

# Long-Term Care Product Comparison

## Comparison Assumptions

Male Client                                      **Underwriting Class:** Standard Nontobacco                                      **Billing Frequency:** Annual                                      **Include Couples Discount:** Yes  
Male Age 51                                      **State:** MN                                      **LTC Maximum Monthly Benefit:** \$4,500

CareForward Premium Payment Period: Pay to Age 95 LTC Benefit Multiplier: 3 LTC Payout Percent: 5% LTC Inflation Benefit: 3% for Lifetime	Thrivent Long-Term Care Premium Payment Period: Lifetime LTC Benefit Multiplier: 60 Months LTC Elimination Period: 90 Day LTC Inflation Benefit: AIB 3% Optional Rider: WEP
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## Initial Coverage and Values at age 51:

LTC Maximum Monthly Benefit	\$4,500	\$4,500
LTC Total Available Benefit Amount	\$270,000	\$270,000
Death Benefit	\$90,000	\$0
Initial Modal Premium <sup>1</sup>	\$3,852.50	\$1,962.98
Guaranteed Premiums	Lifetime Guarantee	5-Year Rate Guarantee <sup>2</sup>
State Partnership Eligible <sup>4</sup>	No	Yes

## Projected Values at age 80:

LTC Maximum Monthly Benefit	\$10,605	\$10,605
LTC Total Available Benefit Amount	\$636,273	\$636,273
Death Benefit	\$90,000	\$0
Total Cash Value	\$56,070	\$0
Cumulative Premium Outlay	\$115,575	\$58,889
Break-even Analysis	10 Months 27 days	5 Months 17 days

## Self-Fund Comparison;<sup>3</sup> Assumed Rate of Return 5.0% (Premium to apply to meet LTC Total Benefit Amount)

Goal for LTC Expenses at age 80	\$636,273	\$636,273
Annual Contribution (same payment period)	\$9,723.16	\$9,723.16
Lump Sum Contribution	\$154,580	\$154,580

<sup>1</sup>Premiums paid for long-term care insurance may be tax deductible. See tax advisor for assistance.  
<sup>2</sup>Premiums are designed to remain level but not guaranteed to remain level after the 5-Year Rate Guarantee.  
<sup>3</sup>The calculations for the contributions are based on the tax equivalent yield assuming no taxes. Income taxes may apply. See tax advisor for assistance.  
<sup>4</sup>Thrivent Long-Term Care insurance can be partnership eligible when the appropriate LTC Inflation Benefit is being illustrated.

**CareForward** is a combination of long-term care insurance and life insurance. You can pay a one-time lump sum premium or pay over a period of years. If you do not use the long-term care benefits, the contract is like a traditional life insurance contract, with a death benefit paid to a beneficiary when the insured person passes away. As long-term care benefits are used, the death benefit decreases. Refer to the product proposal of costs and benefits for more details.

**Thrivent Long-Term Care Insurance** helps pay for a range of care services and support that may be needed to meet health or personal needs over a period of time, whether it's at your home or in a facility. This is a long-term care insurance that can help pay for your qualified long-term care expenses and protect income and savings from being redirected to pay for care. The premium is paid for 10 years or lifetime. Rate guarantee for the first five years from the issue date. Couples discount assumes the 20% discount with only one person applying. As long as premiums are paid, this contract provides lifetime coverage. This comparison assumes the Waiver of Elimination Period for Home Care (WEP) rider is included. Refer to the product illustration for more details.

**Self-Funding** long-term care shows a hypothetical contribution amount that you would need to have at an assumed interest rate to match the insurance values. This comparison may assume taxes apply at the stated rate.

## Disclosures

This hypothetical example is for general comparison purposes only. This comparison does not include all products available for issue by Thrivent.

Individual products may have additional riders or benefits.

CareForward is eligible to earn dividends; however, dividends are not anticipated or guaranteed.

CareForward is intended to qualify as life insurance under the Internal Revenue Code (IRC) and as federally tax-qualified long-term care insurance as defined by IRC §7702B(b). The death benefit provided by this contract is intended to qualify for federal income tax exclusion. The contract also provides long-term care benefits to help pay for eligible long-term care expenses such as: facility care, home health care, adult day care, special equipment, and home modifications.

CareForward is non-cancellable, which means that you have the right to continue the contract in force by making the timely payment of premiums set forth in your contract and that the premium rate schedule for your contract will never change.

CareForward premiums are guaranteed to remain level for the life of the contract. If a premium is not paid by the date it is due, the contract will remain in force during a grace period of 60 days. A notice will be given to you if a premium is not paid after 30 days. The contract will enter a Reduced Paid-up status 30 days after a notice is given if a premium is not paid. Notice will be deemed to have been given as of five days after the date we mail it.

CareForward partial surrenders and decreases to the face amount will proportionately reduce the LTC Total Available Benefit. The LTC Maximum Monthly Benefit will remain the same. Reducing the LTC Benefit Multiplier will reduce the extension of LTC benefits to zero. If there is debt on the contract when LTC benefits are paid, the debt will decrease proportionately to the decrease in Face Amount. This debt decrease will reduce the net LTC benefit amount that you receive.

Thrivent Long-Term Care Insurance is intended to be federally tax-qualified long-term care insurance.

Thrivent Long-Term Care Insurance is guaranteed renewable for life. It will terminate if you die, you cancel the contract, the available benefit reaches zero, or you do not pay premiums as required. If a premium is not paid by the date it is due, the contract will remain in force during a grace period of 60 days. A notice will be given to you if a premium is not paid after 30 days. The contract will terminate 31 days after a notice is given if a premium is not paid. Notice will be deemed to have been given as of five days after the date we mail it.

Thrivent Long-Term Care Insurance premiums are not guaranteed to remain unchanged, except during the first five contract years. Any changes to premium rates will apply to all similar contracts issued in your state to contract owners in the same class on the same contract form. This means you cannot be singled out for an increase because of advancing age, changes in your health, claim status or any other reason solely related to you.

Thrivent Long-Term Care Insurance may meet the requirements for participation in a Long-Term Care Insurance Partnership Program in some states. Under a Partnership Program, the contract holder may be able to protect some assets from Medicaid spend-down requirements through a feature known as 'asset disregard.' Nothing in a long-term care insurance contract issued by a company is a guarantee of Medicaid eligibility, nor a guarantee of any ability to disregard assets for purposes of Medicaid eligibility. Please also note that states do not take part in company-specific marketing plans, and states do not endorse specific companies or company specific policy and certificate forms. If you have questions about the availability of this Program in your state, please contact the company or your state insurance department.

CareForward and Thrivent Long-Term Care Insurance may not cover all of the costs associated with long-term care. You are advised to review your contract carefully. Contract provisions and maximum monthly benefits may vary by state.

CareForward and Thrivent Long-Term Care Insurance do not pay benefits for charges billed by a doctor or charges for prescription drugs. In addition, this product does not cover care or services: (1) Outside the United States, its territories and possessions, except as provided in the International Care Benefit provision of the contracts; (2) Necessary due to an attempt at suicide or an intentionally self-inflicted injury; (3)

Provided for the treatment of alcoholism or drug addiction; (4) Provided by an immediate family member unless: (a) He or she is a regular employee of a facility or agency that is providing the treatment, services or care; (b) The facility or agency receives the payment for the treatment, service or care and he or she receives no compensation other than the normal compensation for employees in his or her job category; and (c) He or she has no ownership or financial interest in the facility or agency providing the treatment, services or care (An immediate family member means your spouse or partner and anyone who is related to you, your spouse or partner by blood, adoption or marriage (including step-relatives) as a parent, grandparent, child, grandchild, brother, sister, aunt, uncle, nephew or niece. As used in this provision, partner means a state recognized partner or a person who is in a committed relationship with you, has been living with you for at least three consecutive years, and is committed to sharing expenses with you.); or (5) For which benefits are payable under any state or federal workers compensation, employers liability or occupational disease law.

Guarantees based on the financial strength and claims paying ability of Thrivent.

An application would be required for coverage to be considered. Your actual premium and benefits will be determined based on both the information you submit in your application and the completion of Thrivent's underwriting process. A medical exam may be required. Thrivent does not guarantee that it will issue an insurance contract for all applicants.

This is a solicitation for insurance. A licensed insurance agent/producer may contact you.

Thrivent and its financial professionals do not provide legal, accounting, or tax advice. Consult your attorney or tax professional.

These contracts have exclusions, limitations, and terms under which the benefits may be reduced, or the contract may be discontinued. For costs and complete details of coverage, contact your licensed insurance agent/producer.

Thrivent is the marketing name for Thrivent Financial for Lutherans. Insurance products issued by Thrivent, Appleton, WI. Licensed agent/producer of Thrivent. Not available in all states. [Thrivent.com/disclosures](http://Thrivent.com/disclosures).

Contract Form(s): ICC13 H-HX-LTC, ICC21 L-KZ-WL Rider Form(s): ICC13 HR-HT-CAIB3, ICC13 HR-HE-WEP, ICC21 LR-ZZ-EOB, ICC21 LR-CZ-INFL



# CareForward™

A combination of Long-Term Care and Whole Life Insurance

## Proposal of Costs and Benefits



Prepared for:  
Male Client

Prepared by:  
Thrivent Home Office  
4321 N. Ballard Road  
Appleton, WI 54919  
(800) 847-4836

At Thrivent, we believe money is a tool, not a goal. Driven by a higher purpose at our core, we are committed to providing financial advice, investments, insurance, banking and generosity programs to help people make the most of all they've been given.

We believe everyone deserves a plan for extended care. CareForward offers combined long-term care and life insurance coverage to help you protect your legacy, feel secure in your future, and take care of your loved ones.

Independent insurance analysts have given Thrivent high marks for our financial strength and our claims-paying ability. They are an important sign of our financial strength. Ratings do not apply to the performance of investment products.



**A++ (Superior)  
AM Best**

Highest of 13  
rating categories  
June 2021 • AMBest.com

These ratings refer only to the overall financial status of the company and are not a recommendation of the specific contract provisions, rates or practices of Thrivent.

THRIVENT, THE MARKETING NAME FOR THRIVENT FINANCIAL FOR LUTHERANS, has been in the Long-Term Care Insurance business since 1987.

**Male Client:** Male 51, Non-Tobacco  
 Life Insurance Initial Amount: \$90,000  
 LTC Initial Total Available Benefit Amount: \$270,000  
 LTC Initial Maximum Monthly Benefit Amount: \$4,500  
 Elimination Period: 0 Day for Home Care, 90 Day for Facility  
 Issue State: MN

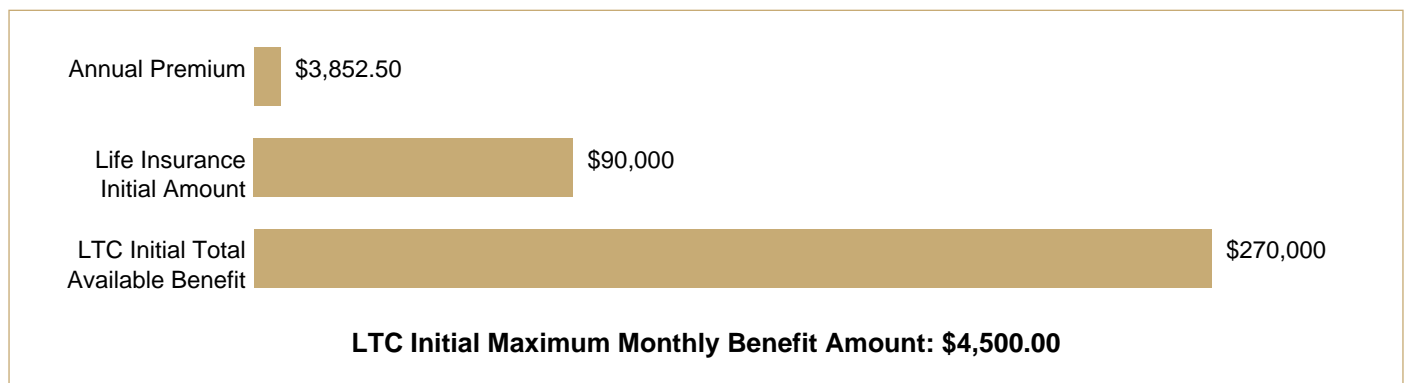
**Optional Riders:**  
 LTC Inflation Benefit: 3% for Lifetime  
  
 Annual Premium: \$3,852.50

## Summary of Coverage

CareForward provides expense reimbursement for qualified long-term care expenses including, but not limited to:

- Home Health Care
- Residential Care Facility
- Equipment/Home Modification
- Adult Daycare
- Caregiver Training
- Alternate Care Services
- Respite Care
- Bed Reservation

CareForward includes a benefit for care coordinator services to assist in developing, implementing, and coordinating a formal plan of care. The care coordinator can help identify local care providers, resources and their associated costs and monitor your ongoing care needs.



### LTC Benefit Selections

LTC Benefit Multiplier: 3 Applied to the life insurance initial amount to determine the LTC Initial Total Available Benefit Amount.  
 LTC Payout Percent: 5% Applied to the life insurance initial amount to determine the LTC Initial Maximum Monthly Benefit Amount.

### Premium Summary

Premium Payment Period	Pay to Age 95
Life Annual Premium	\$1,940.00
LTC Annual Premium	\$2,234.70
<b>Total Annual Premium:</b>	<b>\$3,852.50</b>

**Total Contract Premiums:** \$169,510.00



**Male Client:** Male 51, Non-Tobacco  
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 Issue State: MN

**Optional Riders:**  
 LTC Inflation Benefit: 3% for Lifetime  
 Annual Premium: \$3,852.50

## Projection of Guaranteed Values

Premiums are assumed to be paid at the beginning of the year. The Cash Surrender Value, Death Benefit, LTC Total Available Benefit, and LTC Maximum Monthly Benefit are shown as of the end of the year.

**Long-Term Care Benefits**  
 3% for Lifetime Inflation Benefit Included

Age	Year	Annualized Premium	Sum of Premium Outlay	Cash Surrender Value	Death Benefit	LTC Total Available Benefit	LTC Maximum Monthly Benefit
51	1	\$3,852.50	\$3,852.50	\$0	\$90,000	\$270,000	\$4,500
52	2	3,852.50	7,705.00	90	90,000	278,100	4,635
53	3	3,852.50	11,557.50	1,620	90,000	286,443	4,774
54	4	3,852.50	15,410.00	3,240	90,000	295,036	4,917
55	5	3,852.50	19,262.50	4,860	90,000	303,887	5,065
56	6	3,852.50	23,115.00	6,480	90,000	313,004	5,217
57	7	3,852.50	26,967.50	8,190	90,000	322,394	5,373
58	8	3,852.50	30,820.00	9,990	90,000	332,066	5,534
59	9	3,852.50	34,672.50	11,790	90,000	342,028	5,700
60	10	3,852.50	38,525.00	13,680	90,000	352,289	5,871
61	11	3,852.50	42,377.50	15,570	90,000	362,857	6,048
62	12	3,852.50	46,230.00	17,460	90,000	373,743	6,229
63	13	3,852.50	50,082.50	19,440	90,000	384,955	6,416
64	14	3,852.50	53,935.00	21,420	90,000	396,504	6,608
65	15	3,852.50	57,787.50	23,490	90,000	408,399	6,807
66	16	3,852.50	61,640.00	25,560	90,000	420,651	7,011
67	17	3,852.50	65,492.50	27,630	90,000	433,271	7,221
68	18	3,852.50	69,345.00	29,790	90,000	446,269	7,438
69	19	3,852.50	73,197.50	31,950	90,000	459,657	7,661
70	20	3,852.50	77,050.00	34,200	90,000	473,447	7,891
71	21	3,852.50	80,902.50	36,360	90,000	487,650	8,128
72	22	3,852.50	84,755.00	38,610	90,000	502,280	8,371
73	23	3,852.50	88,607.50	40,770	90,000	517,348	8,622
74	24	3,852.50	92,460.00	43,020	90,000	532,868	8,881
75	25	3,852.50	96,312.50	45,180	90,000	548,854	9,148
76	26	3,852.50	100,165.00	47,430	90,000	565,320	9,422
77	27	3,852.50	104,017.50	49,590	90,000	582,280	9,705
78	28	3,852.50	107,870.00	51,750	90,000	599,748	9,996
79	29	3,852.50	111,722.50	53,910	90,000	617,740	10,296
80	30	3,852.50	115,575.00	56,070	90,000	636,273	10,605
81	31	3,852.50	119,427.50	58,140	90,000	655,361	10,923
82	32	3,852.50	123,280.00	60,210	90,000	675,022	11,250
83	33	3,852.50	127,132.50	62,280	90,000	695,272	11,588
84	34	3,852.50	130,985.00	64,170	90,000	716,131	11,936
85	35	3,852.50	134,837.50	66,060	90,000	737,614	12,294
86	36	3,852.50	138,690.00	67,860	90,000	759,743	12,662
87	37	3,852.50	142,542.50	69,570	90,000	782,535	13,042
88	38	3,852.50	146,395.00	71,190	90,000	806,011	13,434



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 Issue State: MN

**Optional Riders:**  
 LTC Inflation Benefit: 3% for Lifetime  
 Annual Premium: \$3,852.50

Projection of Guaranteed Values, cont.

Long-Term Care Benefits  
 3% for Lifetime Inflation Benefit Included

Age	Year	Annualized Premium	Sum of Premium Outlay	Cash Surrender Value	Death Benefit	LTC Total Available Benefit	LTC Maximum Monthly Benefit
89	39	3,852.50	150,247.50	72,810	90,000	830,192	13,837
90	40	3,852.50	154,100.00	74,250	90,000	855,097	14,252
91	41	3,852.50	157,952.50	75,780	90,000	880,750	14,679
92	42	3,852.50	161,805.00	77,400	90,000	907,173	15,120
93	43	3,852.50	165,657.50	79,110	90,000	934,388	15,573
94	44	3,852.50	169,510.00	81,270	90,000	962,419	16,040
95	45	0.00	169,510.00	81,810	90,000	991,292	16,522
96	46	0.00	169,510.00	82,350	90,000	1,021,031	17,017
97	47	0.00	169,510.00	82,800	90,000	1,051,662	17,528
98	48	0.00	169,510.00	83,250	90,000	1,083,212	18,054
99	49	0.00	169,510.00	83,700	90,000	1,115,708	18,595
100	50	0.00	169,510.00	84,060	90,000	1,149,179	19,153
101	51	0.00	169,510.00	84,330	90,000	1,183,655	19,728
102	52	0.00	169,510.00	84,600	90,000	1,219,164	20,319
103	53	0.00	169,510.00	84,870	90,000	1,255,739	20,929
104	54	0.00	169,510.00	85,140	90,000	1,293,411	21,557
105	55	0.00	169,510.00	85,410	90,000	1,332,214	22,204
106	56	0.00	169,510.00	85,680	90,000	1,372,180	22,870
107	57	0.00	169,510.00	85,950	90,000	1,413,345	23,556
108	58	0.00	169,510.00	86,220	90,000	1,455,746	24,262
109	59	0.00	169,510.00	86,490	90,000	1,499,418	24,990
110	60	0.00	169,510.00	86,670	90,000	1,544,401	25,740
111	61	0.00	169,510.00	86,940	90,000	1,590,733	26,512
112	62	0.00	169,510.00	87,120	90,000	1,638,455	27,308
113	63	0.00	169,510.00	87,390	90,000	1,687,608	28,127
114	64	0.00	169,510.00	87,570	90,000	1,738,237	28,971
115	65	0.00	169,510.00	87,750	90,000	1,790,384	29,840
116	66	0.00	169,510.00	87,930	90,000	1,844,095	30,735
117	67	0.00	169,510.00	88,110	90,000	1,899,418	31,657
118	68	0.00	169,510.00	88,290	90,000	1,956,401	32,607
119	69	0.00	169,510.00	88,380	90,000	2,015,093	33,585
120	70	0.00	169,510.00	90,000	90,000	2,075,545	34,592
121	71	0.00	169,510.00	90,000	90,000	2,137,812	35,630

This contract can provide coverage until the insured's death as long as required premiums are paid. If the contract is still in force at contract age 121, the coverage will remain in force and will continue to provide death benefit and LTC benefits accordingly.

## Riders included at issue for no additional premium

### **Accelerated Death Benefit for Terminal Illness Rider**

This rider provides a discounted death benefit while the insured is still living by accelerating all or a portion of the remaining death benefit. If the entire death benefit is accelerated, the contract will terminate on the date the benefit is paid. If you are certified by a qualified physician to have a life expectancy of 24 months or less you may qualify for this benefit. Benefits paid under the rider may, in limited situations, be taxable. There is a \$150 processing fee that applies when the benefit is exercised. Once this benefit is exercised, LTC benefits are no longer paid.

## Optional riders included at issue for an additional premium

### **Extension of Benefit for Long-Term Care Rider (LTC Benefit Multiplier)**

Provides you with additional long-term care insurance benefits after the LTC Base Benefit is reduced to zero. The amount of additional coverage is determined at issue when the LTC Benefit Multiplier is 2 or 3.

### **LTC Inflation Benefit Rider**

Each year, your LTC Maximum Monthly Benefit and LTC Total Available Benefit will increase. Your options for the annual rate of compound interest and duration from issue available with this rider are:

- 5% interest for the life of the contract (Lifetime Duration)
- 3% interest for the life of the contract (Lifetime Duration)
- 3% interest for 20 years from issue (20-year Duration)

This proposal assumes the benefit increases at 3% compound interest for the life of the contract.



## Features & Key Terms

### Life Insurance Amount

The sum of the original face amount at issue and any face amount purchased with the Paid-up at Issue Rider, if the rider is available. Any LTC Base Benefit payments will cause the Life Insurance Amount to decrease.

### Death Benefit

The available Death Benefit equals the Life Insurance Amount less any outstanding loans and any due and unpaid life insurance premiums.

### Premium Payment Period

The Premium Payment Period is the option you selected for premium payments.

### Waiver of Premium

Your total contract premiums are waived once a 90-day elimination period is satisfied and you continue to be eligible for LTC benefits.

### Elimination Period

This is the period during which you pay for long-term care costs before your LTC insurance benefits begin. The LTC Elimination Period of Care varies, depending on the location of the care you receive.

- Residential Care Facility is 90 days
- Home Care is 0 days
- Adult Day Care is 0 days

### LTC Benefit Multiplier

The factor applied to the Life Insurance Amount to determine your LTC Total Available Benefit at issue. Your available Benefit Multiplier options are 1, 2 or 3. The Benefit Multiplier can only be changed after issue to the multiplier of 1.

### LTC Maximum Monthly Benefit Amount

Your LTC Maximum Monthly Benefit is the maximum amount that will be reimbursed to you under Long-Term Care Benefits for any month in which you received qualified long-term care expenses.

### LTC Payout Percent

The LTC Payout Percent represents the percent of the Life Insurance Amount at issue that determines your LTC Maximum Monthly Benefit Amount. Your options are 3%, 4%, or 5%.

### LTC Total Available Benefit Amount

The total amount of money available during your lifetime to help pay for qualified long-term care expenses.

### Couples Discount

If you select and qualify for the couples discount, it will be included in the long-term care insurance premium. The discount can be added at or after issue, if you meet the eligibility requirements. Once the discount is applied, it remains on your contract for life.

## Important Notes

This proposal is provided based on the assumption that you are insurable. You will be subject to full underwriting, which may require a medical exam to determine your insurability and risk class. The risk class you are offered may differ from the assumption in this Proposal of Costs and Benefits. The availability of features and riders may vary by state.

CareForward is eligible to earn dividends, however, dividends are not anticipated or guaranteed.

Under current tax law, death proceeds received by beneficiaries are income tax-free. However, death proceeds may be subject to estate and inheritance tax.

**IRC Seven-Pay Premium: \$4,732.00:** This premium limit determines the status of a life insurance contract as a Modified Endowment Contract (MEC). A MEC is subject to gain-first taxation of life distributions including loans and loan interest. It does not apply to long-term care benefits paid. Under current tax law, the contract as proposed is not a MEC in year one. A cumulative premium test applies during the first seven contract years after issue or after a change in benefits. Decreases in coverage and requested termination of riders may cause retroactive failure of the MEC test. This proposal does not determine the MEC status of the contract after year one.

**Tax Qualification:** CareForward is intended to qualify as life insurance under the Internal Revenue Code(IRC) and as federally tax-qualified long-term care insurance as defined by IRC Section 7702B(b). The death benefit provided by this contract is intended to qualify for federal income tax exclusion. The contract also provides long-term care benefits to help pay for eligible long-term care expenses such as: facility care, home health care, adult day care, special equipment, and home modifications.

**Renewability, Termination and Cancelability:**

CareForward is non-cancellable. This means that you have the right to continue the contract in force by making the timely payment of premiums set forth in your contract and that the premium rate schedule for this contract will never change.

**Premiums and Grace Period:** If a premium is not paid by the date it is due, the contract will remain in force during a grace period of 65 days. A notice will be given to you if a premium is not paid after 30 days. The contract will enter a Reduced Paid-up status 30 days after a notice is given if a premium is not paid. Notice will be deemed to have been given as of five days after the date we mail it.

**Exceptions:** CareForward may not cover all of the costs associated with long-term care. You are advised to review your contract carefully. Contract provisions and maximum monthly benefits may vary by state.

CareForward does not pay benefits for charges billed by a doctor or charges for prescription drugs. In addition, this product does not cover services:

- 1) Outside of the United States, its territories and possessions, except as provided in the International Care Benefit provision of the contract.
- 2) Necessary due to an attempt at suicide or an intentionally self-inflicted injury.
- 3) Provided for the treatment of alcoholism or drug addiction.
- 4) Provided by an Immediate Family Member unless:
  - a) He or she is a regular employee of a facility or agency that is providing the treatment, services or care;
  - b) The facility or agency receives the payment for the treatment, service or care and he or she receives no compensation other than the normal compensation for employees in his or her job category; and
  - c) He or she has no ownership or financial interest in the facility or agency providing the treatment, services or care.

An Immediate Family Member means your spouse or Partner and anyone who is related to you, your spouse or Partner by blood, adoption or marriage (including step-relatives) as a parent, grandparent, child, grandchild, brother, sister, aunt, uncle, nephew or niece.

As used in this provision, Partner means a state-recognized partner or a person who is in a committed relationship with you, has been living with you for at least three consecutive years and is committed to sharing expenses with you.

- 5) For which benefits are payable under any state or federal workers' compensation, employer's liability or occupational disease law.

**Reductions:** Partial surrenders and decreases to the face amount will proportionately reduce the LTC Total Available Benefit. The LTC Maximum Monthly Benefit will remain the same. Reducing the LTC Benefit Multiplier will reduce the LTC Total Available Benefit, making it equal to the LTC Base Benefit. If there is debt on the contract and when LTC benefits are paid, the debt will decrease proportionately to the decrease in Face Amount. This debt decrease will reduce the net LTC benefit amount that you receive.

**Medicare Non-Duplication:** CareForward does not pay benefits for expenses that are reimbursable under Medicare or would be reimbursable under Medicare but for the application of a deductible or coinsurance amount.

**Proof of Loss:** Proof of loss must be given to us at our Client Services Center. This should be done within 90 days after the loss occurs. Failure to give proof within 90 days will not affect the claim if proof is given as soon as is reasonably possible, but the proof must be given no later than one year from the time proof is otherwise required, unless you were legally incapacitated.

**First-Year Contract Premium:** The annualized premium is greater than the annual premium because the annualized premium includes additional fees.

Annual	Monthly
3,852.50	331.31

Note: If you choose a monthly premium mode, a modal charge will apply. A modal charge is a fee charged when payments are made on a schedule other than annually.

If you have any questions about this CareForward™ Insurance Product, please contact:

Thrivent Home Office  
4321 N. Ballard Road  
Appleton, WI 54919  
800-847-4836

**This is for illustrative purposes only. It is not a contract.**

Applies to contract form: ICC21 L-KZ-WL. Rider form(s): ICC21 LR-ZZ-EOB, ICC21 LR-CZ-INFL

Thrivent  
4321 N. Ballard Road  
Appleton, WI 54919  
Client Services: 1-800-847-4836

Guarantees based on the financial strength and claims-paying ability of Thrivent.

The use of the terms "you", "your", and "yours" in this document assumes the owner and the insured are the same individual. All LTC benefit payments and other distributions are made to the owner, not the insured. The rights of the owner are described in the contract.

Thrivent and its financial professionals do not provide legal, accounting or tax advice. Consult your attorney or tax professional.

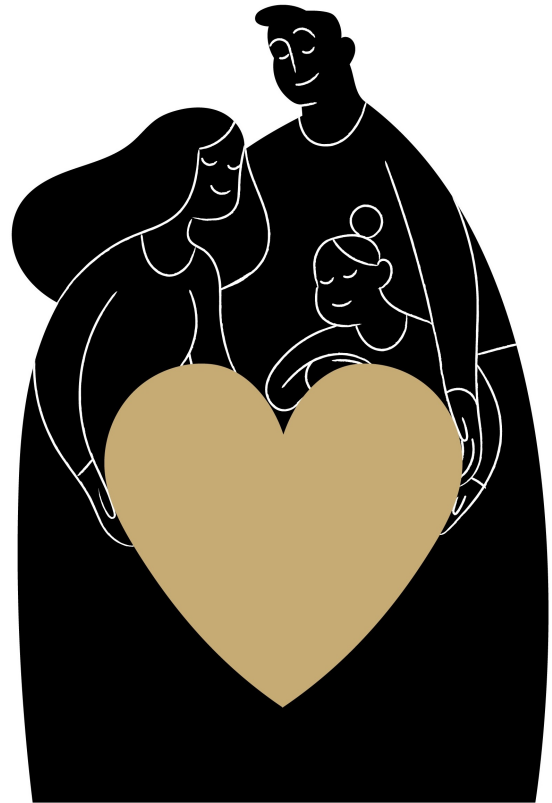
This contract has exclusions, limitations, and terms under which the benefits may be reduced, or the contract may be discontinued. For costs and complete details of coverage, contact your licensed insurance agent/producer.

Thrivent is the marketing name for Thrivent Financial for Lutherans. Insurance products issued by Thrivent, Appleton, WI. Not available in all states. Licensed agent/producer of Thrivent. [Thrivent.com/disclosures](http://Thrivent.com/disclosures).



# Thrivent Long-Term Care Insurance

Illustration



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Prepared for  
Male Client

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Prepared by  
Thrivent Home Office  
4321 N. Ballard Road  
Appleton, WI 54919  
(800) 847-4836

At Thrivent, we believe money is a tool, not a goal. Driven by a higher purpose at our core, we are committed to providing financial advice, investments, insurance, banking, and generosity programs to help people make the most of all they've been given.

We believe everyone deserves a plan for extended care. Thrivent Long-Term Care Insurance offers long-term care coverage to help you protect your legacy, feel secure in your future, and take care of your loved ones.

Independent insurance analysts have given Thrivent high marks for our financial strength and our claims-paying ability. They are an important sign of our financial strength. Ratings do not apply to the performance of investment products.



**A++ (Superior)  
AM Best**

Highest of 13  
rating categories  
June 2021 • AMBest.com

**These ratings refer only to the overall financial status of the company and are not a recommendation of the specific contract provisions, rates or practices of Thrivent.**

THRIVENT, THE MARKETING NAME FOR THRIVENT FINANCIAL FOR LUTHERANS, has been in the Long-Term Care Insurance business since 1987.



# Thrivent Long-Term Care Insurance

## Summary of Coverage

**Male Client**  
**Male 51, Standard**  
**Issue State: MN**

Maximum Monthly Benefit:	\$4,500
Benefit Multiplier:	60 months
<b>Available Benefit:</b>	<b>\$270,000</b>
Elimination Period:	90 day
Contract Pay Type:	Lifetime Pay
Modal Premium:	\$1,962.98 (Annual)
<b>Riders/Options:</b>	Annual Increase Benefit - 3% Compound Waiver of Elimination Period for Home Care and Adult Day Care

<b>Premium Breakdown</b>	
Base Contract:	\$1,170.00
Riders/Options:	\$1,283.72
Discounts:	(\$490.74)
<b>Total Annual Premium:</b>	<b>\$1,962.98*</b>

\*If you elect to pay your premium more frequently than annually, a modal charge will apply.

Thrivent Long-Term Care Insurance is intended to be federally tax-qualified long-term care insurance as defined by Internal Revenue Code of 1986 §7702B(b). It provides an Available Benefit (referred to as a pool of money) to help pay for eligible long-term care services such as: home health care, homemaker services, special equipment, home modifications and facility care. While Thrivent does not provide specific legal or tax advice, we can partner with you and your tax professional or attorney.



# Thrivent Long-Term Care Insurance

**Male Client:** Male 51, Standard  
 Maximum Monthly Benefit: \$4,500  
 Benefit Multiplier: 60 months  
 Total Available Benefit: \$270,000  
 Elimination Period: 90 day  
 Issue State: MN

Riders/Options  
 Annual Increase Benefit - 3% Compound  
 Waiver of Elimination Period for Home Care and Adult Day Care  
 Annual Premium: \$1,962.98

## Benefit and Premium Outlay

The following table shows the benefit and premium outlay for your selected Benefit Increase option.

Annual Increase Benefit - 3% Compound				
Age	Yr	Annualized Premium	Maximum Monthly Benefit	Available Benefit
51	1	\$1,962.98	\$4,500	\$270,000
52	2	1,962.98	4,635	278,100
53	3	1,962.98	4,774	286,443
54	4	1,962.98	4,917	295,036
55	5	1,962.98	5,065	303,887
56	6	1,962.98	5,217	313,004
57	7	1,962.98	5,373	322,394
58	8	1,962.98	5,534	332,066
59	9	1,962.98	5,700	342,028
60	10	1,962.98	5,871	352,289
<b>Total</b>		<b>19,629.80</b>		
61	11	1,962.98	6,048	362,857
62	12	1,962.98	6,229	373,743
63	13	1,962.98	6,416	384,955
64	14	1,962.98	6,608	396,504
65	15	1,962.98	6,807	408,399
66	16	1,962.98	7,011	420,651
67	17	1,962.98	7,221	433,271
68	18	1,962.98	7,438	446,269
69	19	1,962.98	7,661	459,657
70	20	1,962.98	7,891	473,447
<b>Total</b>		<b>39,259.60</b>		
71	21	1,962.98	8,128	487,650
72	22	1,962.98	8,371	502,280
73	23	1,962.98	8,622	517,348
74	24	1,962.98	8,881	532,868
75	25	1,962.98	9,148	548,854
76	26	1,962.98	9,422	565,320
77	27	1,962.98	9,705	582,280
78	28	1,962.98	9,996	599,748
79	29	1,962.98	10,296	617,740
80	30	1,962.98	10,605	636,273
<b>Total</b>		<b>58,889.40</b>		



# Thrivent Long-Term Care Insurance

## Annual Increase Benefit - 3% Compound

Age	Yr	Annualized Premium	Maximum Monthly Benefit	Available Benefit
81	31	1,962.98	10,923	655,361
82	32	1,962.98	11,250	675,022
83	33	1,962.98	11,588	695,272
84	34	1,962.98	11,936	716,131
85	35	1,962.98	12,294	737,614
86	36	1,962.98	12,662	759,743
87	37	1,962.98	13,042	782,535
88	38	1,962.98	13,434	806,011
89	39	1,962.98	13,837	830,192
90	40	1,962.98	14,252	855,097
<b>Total</b>		<b>78,519.20</b>		
91	41	1,962.98	14,679	880,750
92	42	1,962.98	15,120	907,173
93	43	1,962.98	15,573	934,388
94	44	1,962.98	16,040	962,420
95	45	1,962.98	16,522	991,292
96	46	1,962.98	17,017	1,021,031
97	47	1,962.98	17,528	1,051,662
98	48	1,962.98	18,054	1,083,212
99	49	1,962.98	18,595	1,115,708
100	50	1,962.98	19,153	1,149,179
<b>Total</b>		<b>98,149.00</b>		

This contract can provide coverage until the insured's death as long as required premiums are paid. If the contract is still in force at contract age 100, the coverage will remain in force and will continue to provide LTC benefits.

## Thrivent Long-Term Care Insurance

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### Riders

(Available for an additional cost and may vary by state. Certain ages or combinations may not be available.)

#### Annual Increase Benefit

Each year, your Maximum Monthly Benefit and Available Benefit will increase. Your choices are:

- 1% compound
- 2% compound
- 3% compound
- 5% compound

#### Waiver of Elimination Period for Home Care and Adult Day Care

Waives your elimination period when you are receiving home care or adult day care.

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### Features & Key Terms

#### Available Benefit

The total pool of money available during your lifetime to help pay for qualified long-term care expenses.

#### Benefit Increase Option

Benefit Increase Options are designed to help keep up with the rising cost of care. There are two types available: Annual Increase Benefit (AIB) and Flexible Increase Benefit (FIB).

#### Benefit Multiplier

A factor based on months of benefits that are used to calculate your Available Benefit. Available options are 24, 36, 48, 60 or 96 months.

#### Couples Discount

Your premium may be reduced:

- **By 20%**, if both of you apply for and are approved for coverage or one of you already has Thrivent long-term care insurance.
- **By 5%**, if both of you apply for coverage and only one is approved, or if only one of you applies for coverage.

Discount will be validated prior to issue of the contract.

#### Elimination Period

This is the period during which you pay for long-term care costs before most insurance benefits begin. (Choose from 30, 90 or 180 days.)

#### Five Year Rate Guarantee

Your original premium is guaranteed to not increase for a period of five years from the date of issue. (If the FIB option is elected, your premium will increase based on the new coverage amount).

#### Maximum Monthly Benefit

The maximum monthly dollar amount of insurance benefits you will be eligible to receive each month. (Choose from \$1,500 to \$15,000; available in \$100 increments.)

#### Waiver of Premium

Waives your premiums once the elimination period is satisfied and you continue to be eligible for benefits.



## Thrivent Long-Term Care Insurance

### Important Notes

Dividends are not guaranteed. The illustration is based on the current dividend scale, which is subject to change. Dividends will be used to reduce future premiums and will accumulate if premiums are not payable. Dividends paid may have tax consequences.

Premiums are not guaranteed to remain unchanged, except during the first five contract years. Any changes in premium rates will apply to all similar contracts issued in your state to contract owners in the same class on the same contract form. This means you cannot be singled out for an increase because of advancing age, changes in your health, claim status or any other reason solely related to you.

The contract is guaranteed renewable for life. It will terminate if you die, cancel the contract, the Available Benefit reaches zero, or you do not pay premiums as required. If a premium is not paid by the date it is due, the contract will remain in force during a grace period of 60 days. A notice will be given to you if a premium is not paid after 30 days. The contract will terminate 31 days after a notice is given if a premium is not paid. Notice will be deemed to have been given as of five days after the date we mail it.

This illustration is being provided based on the assumption that the applicant is insurable. The applicant is subject to full underwriting, which may require a medical exam, to determine insurability status and risk class. The offered risk class may differ from the illustrated assumption.

**Exceptions:** The product does not pay benefits for charges billed by a Doctor or charges for prescription drugs. In addition, this product does not cover services:

1. Outside of the United States, its territories and possessions, except as provided in Section 4.4 International Care Benefit.
2. Necessary due to an attempt at suicide or an intentionally self-inflicted injury.
3. Provided for the treatment of alcoholism or drug addiction.
4. Care or services provided by an Immediate Family Member unless:
  - He or she is a regular employee of a facility or agency that is providing the treatment, services or care;
  - The facility or agency receives the payment for the treatment, service or care and he or she receives no compensation other than the normal compensation for employees in his or her job category; and
  - He or she has no ownership or financial interest in the facility or agency providing the treatment, services or care.

An Immediate Family Member means your spouse or Partner and anyone who is related to you, your spouse or Partner by blood, adoption or marriage (including step-relatives) as a parent, grandparent, child, grandchild, brother, sister, aunt, uncle, nephew or niece.

As used in this provision, Partner means a state-recognized partner or a person who is in a committed relationship with you, has been living with you for at least three consecutive years and is committed to sharing expenses with you.

5. For which benefits are payable under any state or federal workers' compensation, employer's liability or occupational disease law.

**Medicare Non-Duplication:** The product does not pay benefits for expenses that are reimbursable under Medicare or would be reimbursable under Medicare but for the application of a deductible or coinsurance amount.

**Proofs of Loss:** Proof of loss must be given to us at our Service Center. This should be done within 90 days after the loss occurs. Failure to give proof within 90 days will not affect the claim if proof is given as soon as is reasonably possible, but the proof must be given no later than one year from the time proof is otherwise required, unless you were legally incapacitated.

**Partnership Program:** Thrivent Long-Term Care Insurance may meet the requirements for participation in a Long-Term Care Insurance Partnership Program in some states. Under a Partnership Program, the contract holder may be able to protect some assets from Medicaid spend-down requirements through a feature known as 'asset disregard.' Nothing in a long-term care insurance contract issued by a company is a guarantee of Medicaid eligibility, nor a guarantee of any ability to disregard assets for purposes of Medicaid eligibility. Please also note that states do not take part in company-specific marketing plans, and states do not endorse specific companies or company specific policy and certificate forms. If you have questions about the availability of this Program in your state, please contact the company or your state insurance department.



Prepared for Male Client

## Thrivent Long-Term Care Insurance

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If you have any questions about this Thrivent Long-Term Care Insurance illustration, please contact:

Thrivent Home Office  
4321 N. Ballard Road  
Appleton, WI 54919  
800-847-4836

**This is for illustration purposes only. It is not a contract.**

Applies to contract form: ICC13 H-HX-LTC. Rider form(s): ICC13 HR-HT-CAIB3, ICC13 HR-HE-WEP

Thrivent  
4321 N Ballard Road  
Appleton, WI 54919  
Client Services: 1-800-847-4836

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## Your Underwriting Process

### Long-term care insurance



#### What to expect next

You deserve a financial plan that you feel confident about—Thrivent is here to help with the necessary steps to take on the road to your retirement. Once you apply for Thrivent Long-Term Care Insurance, your underwriting process will begin. Take a deeper look, so you know what to expect from us and what the underwriting process will entail.

Your financial professional will gather your medical information during the application process, or it will be taken during a phone interview. Typically, assessments are ordered based on your age (see the chart on the next page). However, the underwriter can order an assessment for applicants of any age on a discretionary basis.

Your physician may require special authorization before releasing your medical records. Please respond to any requests as soon as possible to ensure the timely processing of your application.

#### The telephone assessment

The telephone assessment is conducted by a nurse, who will gather, validate or clarify your medical and nonmedical information. If your medical information wasn't gathered when you completed your application process, the nurse will ask questions about medical conditions you may or may not have had within the past 10 years, including:

- Names of conditions and dates of diagnoses.
- Names and addresses of the doctors seen for the conditions.
- Names and dates of medications prescribed or taken for the conditions.
- Names, dates and results of treatments and tests performed.
- Names, addresses and phone numbers of any treatment facilities used.

To minimize your time, it is helpful to have this information available during the assessment. Depending on your age and medical status, you also may be asked to participate in a cognitive acuity screen.

#### The in-home face-to-face assessment

If you are required to participate in an in-home face-to-face assessment, a nurse will call you to schedule an appointment at your convenience. During the assessment, you'll be asked to provide identification and answer standard questions about your medical history. The nurse will also take your blood pressure and record your height and weight. (No blood work or urinalysis is needed.) You also may be asked to participate in a cognitive acuity screen.

#### The cognitive acuity screen

Some people must also participate in a cognitive acuity screen in addition to the telephone or face-to-face assessment. Thrivent uses the Minnesota Cognitive Acuity Screen, a standardized assessment used by many long-term care insurance providers. You will be asked questions to assess your:

- Orientation
- Repetition
- Attention
- Naming computation
- Word recall
- Judgment
- Comprehension
- Verbal fluency

To help ensure your comfort and the best results, you'll want to select a time and place free from distraction. If family or friends are present during the screening, they will need to be in a separate room.

#### How the information is used

Once your assessment is complete, your results will be forwarded to an underwriter, who will use it to make a decision about your insurability. Based on the underwriter's evaluation, your coverage may be:

- Approved at the rate your financial professional quoted you.
- Approved, but at a rate different from the one originally quoted by your financial professional.
  - Thrivent will explain its decision, and your financial professional may contact you to discuss the underwriting decision, as well as any additional requirements and available options.
- Denied. In this case, you will receive a letter from Thrivent explaining the reason(s) you were denied.

In certain circumstances, you may be reconsidered at a future date. If any special workups or tests are required as part of the reconsideration, they will be done at your expense.

Your financial professional may contact you to discuss additional or alternative options for your extended-care strategy.

What's needed*		
If your age is	And you <b>have</b> consulted with a physician in the last 24 months	And you <b>have not</b> consulted with a physician in the last 24 months
<b>18 to 59</b>	A telephone assessment and prescription check will be needed unless your physician is asked to provide medical records for certain medical conditions.	<ul style="list-style-type: none"> <li>• A telephone assessment will be needed.</li> <li>• A prescription check will be ordered.</li> </ul>
<b>60 to 69</b>	<ul style="list-style-type: none"> <li>• A telephone assessment with a cognitive acuity screen will be needed.</li> <li>• Medical records from your physician will be requested.</li> </ul>	<ul style="list-style-type: none"> <li>• A telephone assessment with a cognitive acuity screen will be needed.</li> <li>• Medical records from your physician will be requested.</li> </ul>
<b>70 or older</b>	<ul style="list-style-type: none"> <li>• An in-home face-to-face assessment with a cognitive acuity screen will be needed.</li> <li>• Medical records from your physician will be requested.</li> </ul>	<ul style="list-style-type: none"> <li>• An in-home face-to-face assessment with a cognitive acuity screen will be needed.</li> <li>• A prescription check will be ordered.</li> </ul>
<b>California applicants</b>	<ul style="list-style-type: none"> <li>• Medical records will be requested, and a prescription check will be ordered for all proposed insureds from California, regardless of their age and their last consultation with a physician.</li> <li>• Proposed insureds aged 18 to 59 will undergo a face-to-face assessment without a cognitive acuity screen if they have not consulted a physician in the last 24 months.</li> <li>• Proposed insureds aged 60 and older should refer to the guidelines in the columns above.</li> </ul>	

\*A typical telephone assessment takes approximately 15 minutes, a telephone assessment with a cognitive acuity screen takes approximately 30 minutes and an in-home face-to-face assessment takes approximately 40 minutes.

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