

ManhattanLife Lighthouse Series OmniFlex™ Short-Term Care

Underwritten by: Standard Life and Casualty Insurance Company

Benefit & Premium Illustration

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Prepared for:
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Age: **61**
State: **AL**

Prepared On:
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FACILITY CARE COVERAGE DETAILS

- ◆ **Description of Facility Benefits: \$400 Daily / 360 Day (w/5%) Benefit Period / 20 Day Elim. Period / Restoration of Benefits / 10 Days Bed Reservation (Lifetime Max. 20 Days)**

	On Effective Date	On 1st Policy Anniv.	On 2nd Policy Anniv.	On 3rd Policy Anniv.	On 4th Policy Anniv.	On 5th Policy Anniv.	On 25th Policy Anniv.
Daily Indemnity Benefit:	\$200.00	\$240.00	\$280.00	\$320.00	\$360.00	\$400.00	\$800.00
Per Period Pool of Money:	\$72,000	\$86,400	\$100,800	\$115,200	\$129,600	\$144,000	\$288,000

Lifetime Max. Facility Period: **720 Days - (Max. Lifetime Facility Pool of Money = \$576,000)**

Prescription Drug Benefit: **\$10 Generic / \$25 Brand (\$300 Per Policy Year Max.)**

Fast-50™ Benefit: **Waives Elimination Period & pays a first-day cash benefit equal to 50% of your accumulated Daily Benefit. While it can be used for anything, Fast-50™ is perfect for times when spouse, family or friends help out.**

OPTIONAL BENEFIT DETAILS

- ◆ **5% Simple Inflation Protection?: Included for both Facility & Home Health Care Benefits**

- ◆ **Home Health Care Rider: \$300 Daily / 360 Day (w/5%) Benefit Period / Zero Day Elim. Period / Restoration of Benefits / Fast-50™ Benefit Included**

	On Effective Date	On 1st Policy Anniv.	On 2nd Policy Anniv.	On 3rd Policy Anniv.	On 4th Policy Anniv.	On 5th Policy Anniv.	On 25th Policy Anniv.
Daily Indemnity Benefit:	\$150.00	\$180.00	\$210.00	\$240.00	\$270.00	\$300.00	\$600.00
Per Period Pool of Money:	\$54,000	\$64,800	\$75,600	\$86,400	\$97,200	\$108,000	\$216,000

Lifetime Max. HHC Period: **720 Days - (Max. Lifetime HHC Pool of Money = \$432,000)**

- ◆ **Hospital Indemnity Benefit Rider: No Hospital Indemnity Rider Elected**

Lifetime Max. HI Period: **No Hospital Indemnity Rider Elected**

MODAL PREMIUM FOR THESE CHOICES*:

\$2,692.98 Annual

* Premium does not include a one-time \$25 policy fee.

IMPORTANT: This illustration does not constitute coverage & only provides a brief overview of the available benefits of the OmniFlex™ Short-Term Care insurance plan. Your agent/producer will provide you with an outline of coverage that includes complete details.