COMPARISON

BenefitAccess Rider vs. Other Chronic Illness and/or Terminal Illness Riders

COMPARISON CHARTS

Click on number to jump to desired information.

QUICK LOOK:
Life insurance with an optional Chronic Illness, Long-Term Care, and/or Terminal Illness Rider

QUICK LOOK:
Hybrid life products

DETAILED LOOK:
Life insurance with BAR vs. Life insurance with optional Chronic Illness and/or Terminal Illness Rider – Part 1
Prudential, Lincoln National, John Hancock, Genworth, Pacific Life, Penn Mutual

DETAILED LOOK:
Life insurance with BAR vs. Life insurance with optional Chronic Illness and/or Terminal Illness Rider – Part 2
Prudential, Protective, Transamerica, American General, AXA, Minnesota Life

DETAILED LOOK:
Life insurance with BAR vs. Life insurance with optional Chronic Illness and/or Terminal Illness Rider – Part 3
Prudential, MetLife, Principal, Voya, Symetra

DETAILED LOOK:
Life insurance with BAR vs. Hybrid Life Products
(Products that offer both life insurance and Long-Term Care benefits)

Many prominent carriers offer products that provide death benefit and chronic illness care protection. Which product or carrier is appropriate for your client depends on a variety of factors. Use the accompanying charts to help you evaluate the differences and similarities between these products.

BENEFITACCESS RIDER (BAR) HIGHLIGHTS

Pays for the Condition, Not the Care – 80% of people who are chronically ill stay in their private home.* With BenefitAccess, there is no requirement to receive professional care in order to be eligible for benefits. Clients have the flexibility to use their funds the way they'd like. Even if they want to stay home and be cared for by a loved one.

No Elimination or Waiting Period – With BenefitAccess, clients can begin receiving benefit payments as soon as their claim is approved, without having to fulfill a waiting or elimination period. Terms and conditions apply.

Double Duty Dollars – Life insurance with BenefitAccess offers clients multiple benefits in one policy—100% of the policy's death benefit will be paid out, either as a living benefit or as a death benefit.

Prepare Now, Plan Later – A person who is healthy today does not know what type of care they'll specifically want or need for a chronic illness event which might occur many years in the future. Clients have full flexibility to use BAR proceeds in a way that best suits their needs during a chronic illness. There is no specific list of covered services for benefit eligibility. BenefitAccess provides clients with the flexibility to make those critical decisions later, when it matters most.

Lifetime Benefit Can Grow** – The total amount available for acceleration with BenefitAccess can grow as the policy's death benefit grows:

- If the policy hits corridor on a policy with Option A Death Benefit;
- If the policy's contract fund grows on a policy with Option B Death Benefit; or
- If a policy has Option C Death Benefit, the BAR Benefit will equal the basic insurance amount plus premiums.

Competitive Cost – BenefitAccess can be a cost-effective way for clients to have added protection against a chronic or terminal illness event when they purchase permanent life insurance. The cost of the rider is generally 10 – 15% of the life insurance premium (depending on age, gender, and underwriting class).

* Hagen S, et al. Rising demand for longterm services and supports for elderly people. Congressional Budget Office. June 26, 2013, p.13.

** The maximum monthly amount is subject to IRS limits. Availability of death benefit options varies by product type.

NOT FOR CONSUMER USE.

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Prudential
Bring Your Challenges®

COMPARISON

LIFE INSURANCE WITH BENEFITACCESS RIDER: A COMPETITIVE COMPARISON

Life insurance with an optional Chronic Illness, Long-Term Care, and/or Terminal Illness rider

	Rider Name	Product Type	No Waiting Period	Pays for Family Care[1]/No Professional Care Required	Full DB Available for Acceleration	Permanent Lapse Protection[2]	No Restrictions on Benefit Use	Available with Option B Death Benefit	No Health License Required to Sell Rider
Prudential	BenefitAccess Rider	Indemnity	✓	✓	✓	✓	✓	✓	✓
Nationwide[4]	Long-Term Care (LTC) Rider	Indemnity		✓[3]	✓		✓		
John Hancock[4]	Long-Term Care (LTC) Rider	Reimbursement			✓				
Protective[4]	ExtendCare Rider	Indemnity		✓	✓	✓	✓		✓
	Chronic Illness Accelerated Death Benefit Rider	Indemnity		✓	✓	✓	✓		✓
Penn Mutual	Chronic Illness Accelerated Benefit Rider	Indemnity		✓			✓	✓	✓
Pacific Life	Premier Living Benefits Rider	Indemnity	✓	✓	✓		✓	✓	✓
Lincoln National	LifeEnhance Accelerated Benefits Rider	Indemnity	✓	✓	✓	✓	✓	✓	✓
Genworth	Accelerated Benefit Rider for Long-Term Care Services	Reimbursement			✓				
AXA	Long-Term Care Services Rider	Indemnity			✓			✓	
Transamerica	Long-Term Care Rider	Indemnity			✓				
American General	Accelerated Access Solution Chronic Illness Accelerated Death Benefit Rider	Indemnity		✓	✓		✓	✓	✓
Minnesota Life	Long-Term Care Agreement	Indemnity		✓	✓		✓		
MetLife	Enhanced Care Benefit	Indemnity		✓		✓	✓	✓	✓
	Long Term Care Acceleration of Death Benefit Rider	Indemnity		✓		✓	✓	✓	
Principal	Chronic Illness Death Benefit Advance Rider	Indemnity	✓	✓	✓		✓		✓
Voya	Chronic Illness Death Benefit Advance Rider	Indemnity		✓			✓	✓	✓
Symetra	Chronic Illness Rider	Indemnity	✓	✓		✓	✓		✓
	Chronic Illness Plus Rider	Indemnity	✓	✓	✓	✓	✓		✓

[1] Family Care means that the insured does not need to receive professional, qualified LTC services to be eligible for benefits, and there are no restrictions if a family member is the caregiver.

[2] With Prudential, while on chronic illness claim, the policy is protected from lapse, through waiver of policy and rider charges. If the chronic illness claim continues for 25+ months, the policy is permanently protected from lapse, even if the client later comes off claim. If the client comes off claim within 25 months of initially going on claim they may need to make additional premium payments to keep the policy from lapsing.

[3] A home health care service agency with a valid certificate of approval must be the primary caregiver monitoring care on a regular basis. However, excess benefits may be used to pay a family member to provide supplemental care.

[4] Terminal illness benefits available through another rider the carrier has available.

For complete information about the specifics of the products included here, please refer to the tables on the pages that follow.

COMPARISON

LIFE INSURANCE WITH BENEFITACCESS RIDER: A COMPETITIVE COMPARISON

HYBRID LIFE PRODUCTS (products that offer both Life Insurance and Long-Term Care Benefits)

	Product Name	Product Type	No Waiting Period	Pays for Family Care/No Professional Care Required	Full DB Available for Acceleration	Permanent Lapse Protection	No Restrictions on Benefit Use	Available with Option B Death Benefit	No Health License Required to Sell Rider
Lincoln National[4]	MoneyGuard II	Reimbursement	✓		✓				
Genworth[4,5]	Total Living Coverage	Reimbursement		✓	✓				
Pacific Life[5]	PremierCare Advantage	Reimbursement			✓				
Nationwide	YourLife CareMatters	Indemnity		✓[3]	✓				

[5]Genworth and Pacific Life only offer single-premium products; therefore, policies are not subject to potential lapse.

For complete information about the specifics of the products included here, please refer to the tables on the pages that follow.

LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 1

	Prudential	Nationwide	Lincoln National	John Hancock	Genworth	Pacific Life	Penn Mutual
Rider Name	**BenefitAccess Rider**	**Long-Term Care Rider**	**LifeEnhance Accelerated Benefits Rider**	**Long-Term Care (LTC) Rider**	**Long-Term Care Rider**	**Premier Living Benefits Rider**	**Chronic Illness Accelerated Benefit Rider**
Tax Qualified Status	IRC 101(g)	7702B(b)—LTC; 101((g)(5))—Accelerated Death Benefit	IRC 101(g)	IRC 7702B(b)	IRC 7702B(b)	IRC 101(g)	IRC 101(g)
Rider Type	Chronic/terminal illness rider	Long-term care rider	Chronic/terminal illness rider	Long-term care rider	Long-term care rider	Chronic illness rider	Chronic illness rider
Product Availability	PruLife Founders Plus, VUL Protector, PruLife Universal Protector, PruLife Custom Premier II, PruLife Index Advantage UL	YourLife Indexed UL, YourLife No-Lapse Guarantee UL, YourLife Current Assumption UL, YourLife Single Premium UL, YourLife Accumulation VUL, YourLife Protection VUL, YourLife Indexed UL Protector, YourLife Indexed UL Accumulator	LifeGuarantee UL 2013, LifeReserve Indexed UL Accumulator 2014, VULone-2014	Accumulation UL 09, Accumulation IUL 14, Accumulation VUL 14, Protection VUL 12, Protection UL 13, Protection IUL 13, UL-G 13, Premier Life	Asset Builder Index UL, Foundation Builder Index UL	Pacific Indexed Accumulator 4, Pacific Indexed Performer LT, Pacific Prime VUL, Pacific Select VUL, Versa-Flex NLG UL, Versa-Flex PRO II UL, Pacific Prime NLG UL, Pacific Prime IUL	Accumulation Builder II Indexed UL, Guaranteed Protection UL, Flexible Choice WL, Diversified Growth VUL, Survivorship Plus Indexed UL; can be added to qualifying in-force policies
Accident and Health License Requirement	NO	YES	NO	YES	YES	NO	NO
Eligibility	Certified by licensed health care practitioner that the insured is unable to perform 2 out of 6 Activities of Daily Living (ADL) or requires substantial supervision and protection from threats to health and safety due to a severe cognitive impairment, and that the condition is expected to last the rest of the insured's life.	Certified by a licensed health care practitioner as being unable to perform, without substantial assistance from another individual, at least two Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity; or requiring substantial supervision for protection from threats to health and safety due to severe cognitive impairment.	Written certification by a licensed health care practitioner within the preceding 12 months that the insured is chronically ill and unable to perform (without substantial assistance from another individual) at least 2 Activities of Daily Living (ADLs) for a period of at least 90 days due to a loss of functional capacity. ADLs include: bathing, continence, dressing, eating, toileting, and transferring **OR requiring substantial supervision from another individual to protect the insured from threats to health and safety due to severe cognitive impairment AND according to certification from a licensed health care practitioner, services are likely to be needed for the rest of the insured's life.**	Written certification from a licensed health care practitioner that the life insured is chronically ill as defined in the rider (the life insured must be unable to perform 2 of the 6 ADLs without substantial assistance or is found to have a severe cognitive impairment that threatens their health or safety. The six ADLs are bathing, eating, continence, toileting, dressing, and transferring) and is receiving qualified long-term care services under a current plan of care. Further documentation includes written proof of loss for the life of the insured.	The insured must (1) be certified as chronically ill by a licensed health care practitioner and be unable to perform, without substantial assistance from another individual, at least two Activities of Daily Living because of the loss of functional capacity for a period of at least 90 days or (2) require substantial supervision for protection from threats to health and safety because of severe cognitive impairment. The long-term care services must be provided pursuant to a plan of care described in the rider. The services, which are defined in the rider, are necessary diagnostic, preventive, therapeutic, curing, treating, mitigating, rehabilitative, and maintenance or personal care services.	Written proof by a licensed health care practitioner that the insured has been certified as chronically ill and is unable to perform without substantial assistance from another individual at least two Activities of Daily Living due to a loss of functional capacity or must require substantial supervision to protect the individual from threats to health and safety due to severe cognitive impairment and that the condition(s) is expected to be permanent.	Access to this benefit is subject to a waiting period that in most states is two years. After that time, a licensed health care practitioner must certify that the policyholder is unable to perform two of the six Activities of Daily Living or suffered from a severe cognitive impairment for at least 90 consecutive days within the previous 12 months. Activities of Daily Living include: bathing, continence, dressing, eating, toileting, and transferring.

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LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 1 *(continued)*

	Prudential	Nationwide	Lincoln National	John Hancock	Genworth	Pacific Life	Penn Mutual
Issue Ages	20 – 80	20 – 80	20 – 80	20 – 75	18 – 65	18 – 75 *(Varies by product)*	20 – 85
Benefit Payment Options	Monthly indemnity, annual lump sum, or one-time lump sum *(One-time for terminal illness only)*	Monthly indemnity	Monthly indemnity, or one-time lump sum	Either 1%, 2%, or 4% in Monthly Acceleration Percentage (MAP) of the total benefit pool (from 1% to 100% of the face amount)	Monthly reimbursement available in 2-, 3-, or 4-year coverage periods	Monthly indemnity or annual lump sum	Indemnity *(Available in systematic monthly, quarterly, semi-annual, or annual periodic payments)*
Maximum Monthly Benefit	Maximum monthly benefit is 2% of the death benefit, not to exceed: 1) IRS limit at time of claim; 2) IRS per diem limit at policy issue, compounded at 4% annually	Lesser of 2% of the specified amount or IRS per diem limit	The lesser of either 2% of the original benefit amount or the IRS per diem limit times the number of days in the month	$50,000	$25,000	Up to 2% of the eligible death benefit (24% if annually) of the policy at the time of initial claim up to 125% of IRS per diem limit. Entire death benefit may be accelerated up to the lifetime maximum of $1.5 million	Least of 2% of the death benefit at the time of the election, $20,000, or IRS per diem
Maximum Total Benefit	$5 million (applies on an aggregate basis per insured individual, at the time of application)	Equal to the policy's specified amount	$5 million *(Ages 20 – 69)* $2 million *(Ages 70 – 80)*	Varies by Monthly Acceleration Percentage (MAP): $5 million for 1% MAP, $2.5 million for 2% MAP, $1.25 million for 4% MAP	$1 million	$1.5 million	Lesser of 24% of specified amount at issue or $240,000 with a lifetime maximum of $5 million
Restrictions on Use of Benefit	No restrictions on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met	Benefit payments will only cover qualifying long-term care costs actually incurred including home health care, assisted living facility, adult day care center, nursing home, hospice center, and bed hold benefit for up to 21 days per policy year, up to selected monthly benefit.	Benefit payments will only cover qualifying long-term care costs actually incurred including home and community care, assisted living facilities, nursing home facility, home modifications and equipment, adult day care, cost of caregiver training, hospice care and facility, respite care to relieve qualified caregivers.	No limitations on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met

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LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 1 *(continued)*

	Prudential	Nationwide	Lincoln National	John Hancock	Genworth	Pacific Life	Penn Mutual
Elimination Period	NONE	90 days *(Need not be consecutive, but must be within a continuous period of 730 days)*	NONE	100 days *(Need not be consecutive)*	90 days *(Need not be consecutive)*	NONE	90 days *Elimination period (consecutive) and 2 years waiting period from the time the policy is issued with the rider or the time the rider is added to the policy before a claim can be made (but varies by state)*
Residual Death Benefit	NONE	10% of policy specified amount	NONE	NONE	NONE	Any death benefit remaining when policyowner elects less than 100% of acceleration for claim	$50,000 after maximum acceleration of death benefit
Rider Charge	Monthly deductions	Monthly deductions *(Treated as non-taxable distributions that reduce cost basis)*	Monthly deductions *(adds approximately 6% increase to base product target)*	Monthly deductions *(Treated as non-taxable distributions that reduce cost basis)*	Monthly deductions *(Treated as non-taxable distributions that reduce cost basis) which may be subject to change after the first 5 policy years; Guaranteed Monthly Risk Rates for this rider cannot exceed 50% of the Current Monthly Risk Rates*	NONE	NONE *(subject to discount factors)*
Recertification Required	Yes, annually	Yes, annually *Recertification only as necessary (at Company's expense)*	Yes, annually	NO	NO	Yes, annually	Yes, annually
Claim Impact on Death Benefit	Dollar-for-dollar reduction	Dollar-for-dollar reduction	Proportional reduction	Dollar-for-dollar reduction	Proportional reduction	Greater than dollar-for-dollar reduction; reduced with discount factor	Greater than dollar-for-dollar reduction; reduced with discount factor
Claim Impact on Policy Values	Proportional reduction	Dollar-for-dollar reduction	Proportional reduction	Proportional reduction	Proportional reduction	Proportional reduction	Proportional reduction

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LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 1 *(continued)*

	Prudential	Nationwide	Lincoln National	John Hancock	Genworth	Pacific Life	Penn Mutual
International Benefits	YES *(The insured must meet the terms and conditions of the rider including certification and recertification in the U.S. every 12 months by a U.S. licensed health care practitioner in accordance with IRS guidelines)*	YES *(Upon meeting qualifying conditions, the insured can receive LTC benefits outside of the U.S. as long as the physician assessment and care service are commensurate with what is expected of a U.S. claim)*	NONE	NONE	YES *(Pays for covered LTC costs for up to: 4 years if insured travels abroad or resides outside of the U.S., 50% of the accelerated monthly maximum benefit for out-of-country nursing facility care, 25% of the accelerated monthly maximum benefit for home and community care services abroad for no more than 365 service days. No benefit will be paid after 4 years from the first claim. Assisted living facility coverage and privileged care coordination services are not available outside the U.S.)*	NONE	NONE
Provides Benefits in the Event of Terminal Illness	YES *(Provides for benefit if the insured becomes terminally ill and has a life expectancy of 6* months or less)* ** CA: 12 months*	Terminal illness benefits available through a separate rider	YES *(Provides for benefit if the insured becomes terminally ill and has a life expectancy of 12 months or less)*	Terminal illness benefits available through a separate rider	Terminal illness benefits available through a separate rider	Terminal illness benefits available through a separate rider	Terminal illness benefits available through a separate rider

LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 2

	Prudential	Protective		Transamerica	American General	AXA	Minnesota Life
Rider Name	**BenefitAccess Rider**	**Chronic Illness Accelerated Death Benefit Rider**	**ExtendCare Rider**	**Long-Term Care Rider**	**Accelerated Access Solution Chronic Illness Accelerated Death Benefit Rider**	**Long-Term Care Services Rider**	**Long-Term Care Agreement**
Tax Qualified Status	IRC 101(g)	IRC 101(g)	IRC 101(g)	IRC 7702B(b)	IRC 101(g)	7702B(b)—LTC; 101((g)(5))—Accelerated Death Benefit	IRC 7702B(b)
Rider Type	Chronic/terminal illness rider	Chronic illness rider	Chronic illness rider	Long-term care rider	Chronic illness rider	Long-term care rider	Long-term care rider
Product Availability	PruLife Founders Plus, VUL Protector, PruLife Universal Protector, PruLife Custom Premier II, PruLife Index Advantage UL	ProClassic UL	Indexed Choice UL, Advantage Choice UL, Custom Choice UL	TransNavigator IUL, Transamerica Journey VUL	AG Secure Lifetime GUL II, Elite Index II, AG Platinum Choice VUL, Value+ IUL	Athena UL, BrightLife Grow Indexed UL, BrightLife Protect Indexed UL, Incentive Life Optimizer II VUL, Incentive Life Legacy II VUL	Eclipse Indexed Life, Eclipse Protector Indexed Life, Accumulator VUL, Accumulator UL
Accident and Health License Requirement	NO	NO	NO	YES	NO	YES	YES
Eligibility	Certified by licensed health care practitioner that the insured is unable to perform 2 out of 6 Activities of Daily Living (ADL) or requires substantial supervision and protection from threats to health and safety due to a severe cognitive impairment, and that the condition is expected to last the rest of the insured's life.	Must be certified by a licensed health care practitioner within the past 12 months that the insured is chronically ill, defined as either unable to perform at least two Activities of Daily Living without assistance for at least 90 days, or requiring substantial supervision for protection from health and safety threats due to severe cognitive impairment.	Must be certified by a licensed health care practitioner within the past 12 months that the insured is chronically ill, defined as either unable to perform at least two Activities of Daily Living without assistance for at least 90 days, or requiring substantial supervision for protection from health and safety threats due to severe cognitive impairment.	Subject to the insured (1) being certified by a licensed health care practitioner as being chronically ill as defined in the rider (being unable to perform, without substantial assistance from another individual, at least 2 out of the 6 Activities of Daily Living (ADLs) for an expected period of at least 90 days due to a loss of functional capacity; or requiring substantial supervision to protect the insured from threats to health and safety due to severe cognitive impairment); (2) receiving qualified long-term care services covered under the rider and specified in a plan of care; (3) having an approved current plan of care and written proof of loss.	In addition to completion of a 90-day elimination period, one of the following health impairment criteria must be met: Certification by a qualified practitioner that the insured is chronically ill and is permanently unable to perform, without substantial assistance from another person, two of the Activities of Daily Living (ADLs – bathing, continence, dressing, eating, toileting, transferring); Requires substantial supervision from threats to health and safety due to a severe cognitive impairment (similar to Alzheimer's and similar forms of irreversible dementia) that is measured by clinical evidence and standardized tests measuring short-term or long-term memory, orientation as to people, places, or time, and deductive or abstract reasoning.	Insured must be certified by a licensed health care practitioner as being chronically ill as defined in the rider (1) Being unable to perform without substantial assistance from another person at least two Activities of Daily Living such as bathing, continence, dressing, eating, toileting, and transferring, due to a loss of functional capacity for a period of at least 90 days; or (2) Requiring substantial supervision to protect such individual from threats to health and safety due to cognitive impairment); be receiving qualified long-term care services pursuant to a plan of care prescribed by the practitioner; and provide proof of loss.	Policyholder must be certified by a licensed health care practitioner (a physician, a registered nurse, or a licensed social worker) as chronically ill and (1) unable to perform, without substantial assistance, at least two Activities of Daily Living for an expected period of at least 90 days due to the loss of functional capacity. Activities of Daily Living include eating, bathing, toileting, continence, dressing, and transferring; or (2) having a severe cognitive impairment.
Issue Ages	20 – 80	20 – 80	20 – 80	18 – 75	18 – 80	20 – 75	20 – 80

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LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 2 *(continued)*

	Prudential	Protective		Transamerica	American General	AXA	Minnesota Life
Benefit Payment Options	Monthly indemnity, annual lump sum, or one-time lump sum *(One-time for terminal illness only)*	Monthly indemnity, or annual lump sum	Monthly indemnity, or annual lump sum	Monthly indemnity	Monthly indemnity *(3 Payout Options: IRS maximum per diem amount in effect at the time claim begins; 2% of specified benefit amount; 4% of specified benefit amount)*	Monthly indemnity *(Lesser of 1%, 2%, or 3% of specified benefit amount or 200% (100% in NY) of HIPAA per diem limit times 30)*	Monthly indemnity
Maximum Monthly Benefit	Maximum monthly benefit is 2% of the death benefit, not to exceed: 1) IRS limit at time of claim 2) IRS per diem limit at policy issue, compounded at 4% annually	$1,000 $2,500 $5,000 $7,500 *(available only with $150,000 minimum face amount)*	$1,000 – $9,900 monthly *(selected by insured at the time of issue and cannot exceed 5% of base policy face amount—may not exceed HIPAA per diem limits)*	Lesser of 2% of the specified amount or IRS per diem limit	2% of accelerated benefit amount	$50,000	Lesser of 2% or 4% of the specified amount or IRS per diem limit
Maximum Total Benefit	$5 million (applies on an aggregate basis per insured individual, at the time of application)	Lesser of $1 million or 90% of the death benefit	$5 million	$1 million	$1.5 million *(Election of 100% of specified benefit)* $3 million *(Election of 50% of specified benefit)*	$5 million *(1% LTC benefit)* $2.5 million *(2% LTC benefit)* $1,666,666 *(3% LTC benefit)*	$5 million
Restrictions on Use of Benefit	No restrictions on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met	Benefit payments will only cover qualifying long-term care costs actually incurred including one or more necessary diagnostic, preventive, therapeutic, rehabilitative, maintenance, or personal care services, provided in a setting other than an acute care unit of a hospital such as: (a) a long-term care facility; (b) an adult day care center; (c) a hospice care facility; or (d) the home	No limitations on benefit use, once benefit eligibility requirements are met	Benefit payments will only cover qualifying long-term care costs actually incurred including services received by insured while chronically ill and confined to a long-term care facility (other than the acute care unit of a hospital) that provides skilled nursing care, intermediate care, or custodial care; assisted living facility; hospice care facility; home health care provider or adult day care	No limitations on benefit use, once benefit eligibility requirements are met
Elimination Period	NONE	90 or 365 days *(Consecutive)*	90 or 365 days *(Consecutive)*	90 days *(Need not be consecutive)*	90 days *(Consecutive)*	90 days *(Within a consecutive 24-month period)*	90 days *(Need not be consecutive)*
Residual Death Benefit	NONE	NONE	NONE	Residual death benefit endorsement *(Lesser of 10% of the lowest face amount of the base policy from its inception or $10,000)*	NONE	Any death benefit remaining when policyowner elects less than 100% of acceleration for claim	10% of the maximum life insurance face amount up to $25,000

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LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 2 *(continued)*

	Prudential	Protective		Transamerica	American General	AXA	Minnesota Life
Rider Charge	Monthly deductions	Monthly deductions	Monthly deductions	Monthly deductions	Monthly deductions	Monthly deductions *(Treated as non-taxable distributions that reduce cost basis)*	Monthly deductions *(Treated as non-taxable distributions that reduce cost basis)*
Recertification Required	Yes, annually	Yes, annually	Yes, annually	Yes, every 12 months from the date of the initial or subsequent certification	Yes, annually	Yes, annually	Yes, annually
Claim Impact on Death Benefit	Dollar-for-dollar reduction	Proportional reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction
Claim Impact on Policy Values	Proportional reduction	Proportional reduction	Proportional reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction	Proportional reduction	Proportional reduction
International Benefits	YES *(The insured must meet the terms and conditions of the rider including certification and recertification in the U.S. every 12 months by a U.S. licensed health care practitioner in accordance with IRS guidelines)*	Yes (insured must be certified by a U.S. Licensed Practitioner)	Yes (insured must be certified by a U.S. Licensed Practitioner)	Restricted to United States, District of Columbia, or Canada	NONE	NO *(Unless initial and any annual recertifications are completed by a physician licensed in the U.S. For purpose of the exclusion, U.S. is defined as the 50 states, District of Columbia, Puerto Rico, and the U.S. Virgin Islands)*	NONE
Provides Benefits in the Event of Terminal Illness	YES *(Provides for benefit if the insured becomes terminally ill and has a life expectancy of 6 months or less)*	Terminal illness benefits available through a separate rider	Terminal illness benefits available through a separate rider	Terminal illness benefits available through a separate rider	Terminal illness benefits available through a separate rider *(must be included with the chronic illness rider)*	Terminal illness benefits available through a separate rider	Terminal illness benefits available through a separate rider

LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 3

	Prudential	MetLife		Principal	Voya	Symetra	
Rider Name	**BenefitAccess Rider**	**Enhanced Care Benefit**	**Long Term Care Acceleration of Death Benefit Rider**	**Chronic Illness Death Benefit Advance Rider**	**Chronic Illness Death Benefit Advance Rider**	**Chronic Illness Rider**	**Chronic Illness Plus Rider**
Tax Qualified Status	IRC 101(g)	IRC 101(g)	7702B(b)	IRC 101(g)	IRC 101(g)	IRC 101(g)	IRC 101(g)
Rider Type	Chronic/terminal illness rider	Chronic Illness Rider	Long-Term Care (LTC) Rider	Chronic Illness Rider	Chronic Illness Rider	Chronic Illness Rider	Chronic Illness Rider
Product Availability	PruLife Founders Plus, VUL Protector, PruLife Universal Protector, PruLife Custom Premier II, PruLife Index Advantage UL	Promise Whole Life Series	Promise Whole Life Series	UL Flex II, UL Accumulation II, Indexed UL Flex	IUL Accumulator, IUL-Global, IUL-Global Choice, IUL-Protector	Symetra UL-G, Symetra CAUL	Symetra UL-G, Symetra CAUL
Accident and Health License Requirement	NO	NO	YES	NO	NO	NO	NO
Eligibility	Certified by licensed health care practitioner that the insured is unable to perform 2 out of 6 Activities of Daily Living (ADL) or requires substantial supervision and protection from threats to health and safety due to a severe cognitive impairment, and that the condition is expected to last the rest of the insured's life.	Certified by a physician within the preceding 12 months as being permanently unable to perform, without Substantial Assistance from another individual, two or more Activities of Daily Living; or requiring Substantial Supervision to protect the insured from threats to health and safety due to permanent Severe Cognitive Impairment.	Certified by a physician within the past 12 months that the insured is "Chronically Ill" and is unable to perform, without substantial assistance from another person, at least two of the six Activities of Daily Living for an expected period of at least 90 days due to loss of functional capacity; or requiring substantial supervision to protect the insured from threats to health and safety due to a severe cognitive impairment. Must be receiving qualified long-term care services as prescribed by a physician for 90 days before a benefit will be paid. The 90 days need not be consecutive, but must be met within a 24 month period and it only needs to be satisfied once.	Certified by a physician as being chronically ill and unable to perform two of the six Activities of Daily Living for a period of 90 consecutive days and the condition must be permanent or require substantial supervision for a period of at least 90 consecutive days for protection from threats to health and safety due to permanent severe cognitive impairment.	Certified in writing by a licensed health care practitioner as being unable to perform without substantial assistance from another individual at least two Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity and the condition is expected to be permanent or requiring substantial supervision to protect the individual from threats to health and safety due to severe cognitive impairment and the condition is expected to be permanent.	A licensed health care practitioner certifies during the prior 12-month period that the insured is permanently unable to perform at least two of six activities of daily living, or has a severe cognitive impairment, requiring substantial supervision to ensure the health and safety of himself or herself and others.	A licensed health care practitioner certifies during the prior 12-month period that the insured is permanently unable to perform at least two of six activities of daily living, or has a severe cognitive impairment, requiring substantial supervision to ensure the health and safety of himself or herself and others.
Issue Ages	20 – 80	18 – 70	18 – 70	20 – 75	20 – 75	20 – 85	20 – 80
Benefit Payment Options	Monthly indemnity, annual lump sum, or one-time lump sum *(One-time for terminal illness only)*	Monthly indemnity, annual lump sum, or one-time lump sum	Monthly indemnity	Annual lump sum	Monthly indemnity or annual lump sum	Annual lump sum or one-time lump sum	Monthly or annualized lump sum

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LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 3 *(continued)*

	Prudential	MetLife		Principal	Voya	Symetra	
Maximum Monthly Benefit	Maximum monthly benefit is 2% of the death benefit, not to exceed: 1) IRS limit at time of claim; 2) IRS per diem limit at policy issue, compounded at 4% annually	Will pay once during the 12 month claim period up to 24% of the eligible death benefit in either a lump-sum or monthly payment, subject to IRS per diem dollar limits times the number of days left in the current calendar year	At least the minimum monthly benefit of $500 and no more than the lesser of 1) the monthly equivalent of the IRS per diem dollar limit in effect for the month for which the benefit is paid; or 2) the greater of 2% of the net death benefit	Only annual lump sum available. Annual maximum is lesser of 25% of initial eligible amount, the Annual Per Diem Acceleration, or the death benefit	Based on lesser of IRS per diem amount or 24% of eligible death benefit per year	Only annual lump sum or one-time lump sum available	Monthly benefit of 2%, capped at the IRS per diem
Maximum Total Benefit	$5 million (applies on an aggregate basis per insured individual, at the time of application)	Up to 90% of eligible death benefit up to $5M	Up to 90% of eligible death benefit or $10M whichever is less	Lesser of 75% of initial eligible amount or $1M	$2M lifetime maximum	Up to 50% of the policy's death benefit ($500,000 maximum)	Up to 100% of eligible death benefit
Restrictions on Use of Benefit	No restrictions on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met	No limitations on benefit use, once benefit eligibility requirements are met
Elimination Period	NONE	90 calendar days (must be met within a 24 month period)	90 calendar days (must be met within a 24 month period)	NONE	Eligibility period of 90 days for activities of daily living. None for cognitive impairment	NONE	NONE
Residual Death Benefit	NONE	No less than 10% of policy specified amount	No less than 10% of policy specified amount	NONE	$25,000	$5,000	NONE
Rider Charge	Monthly deductions	There is no premium for this rider. However, there are two charges assessed upon exercise of this rider: a $150 processing fee and a Life Expectancy (LE) Fee deducted from the policy death benefit at the time of each exercise. This fee is determined by multiplying the ECB payment amount by a factor made up of the ECB Interest Rate and the ECB LE Factor. Future policy premiums, beginning on the date of the claim, will be recalculated to reflect the lower death benefit.	Additional guaranteed renewable charge; company has right to raise premiums on a class basis	No up-front charges - Benefit amount is discounted at time of claim and administrative charge is applied	Cost of insurance charges apply. Annual administrative charges apply if claims are paid.	NONE (The amount of the death benefit that's accelerated, plus any accrued interest, will be secured by a lien against the base policy death benefit)	Additional charge included in the premium

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LIFE INSURANCE WITH BENEFITACCESS VS. LIFE INSURANCE WITH OPTIONAL CHRONIC ILLNESS AND/OR TERMINAL ILLNESS RIDER – Part 3 *(continued)*

	Prudential	MetLife		Principal	Voya	Symetra	
Recertification Required	Yes, annually	Yes, the policyowner must re-certify within 12 months of the previous claim that the insured is still meeting the rider requirements. If this is not done by the end of the current claim period, a new waiting period will begin.	Yes, the policyowner must re-certify within 12 months of the previous claim that the insured is still meeting the rider requirements. If this is not done by the end of the current claim period, a new waiting period will begin.	Yes, annual recertification is required	Yes, annual recertification is required	Yes, annual recertification is required	Yes, annual recertification is required
Claim Impact on Death Benefit	Dollar-for-dollar reduction	Proportional Reduction	Proportional Reduction	Proportional Reduction	Proportional Reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction
Claim Impact on Policy Values	Proportional reduction	Proportional Reduction	Proportional Reduction	Proportional Reduction	Proportional Reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction
International Benefits	YES *(The insured must meet the terms and conditions of the rider including certification and recertification in the U.S. every 12 months by a U.S. licensed health care practitioner in accordance with IRS guidelines)*	Yes, there are no international restrictions	Yes, provided the Licensed Health Care Professional is U.S. licensed	NONE	NONE	NONE	NONE
Provides Benefits in the Event of Terminal Illness	YES *(Provides for benefit if the insured becomes terminally ill and has a life expectancy of 6* months or less)* ** CA: 12 months*	NO	NO	NO	NO	NO	NO

LIFE INSURANCE WITH BENEFITACCESS VS. HYBRID LIFE PRODUCTS

PRODUCTS THAT OFFER BOTH LIFE INSURANCE AND LONG-TERM CARE BENEFITS

	Prudential	Lincoln National	Genworth	Pacific Life	Nationwide
Product Name	**BenefitAccess Rider** *(Available on PruLife Founders Plus, VUL Protector, PruLife Universal Protector, PruLife Custom Premier II, PruLife Index Advantage UL))*	**MoneyGuard II**	**Total Living Coverage**	**PremierCare Advantage**	**YourLife CareMatters**
Product Type	Chronic/terminal illness rider	Linked benefit	Linked benefit	Linked benefit	Linked benefit
Tax Qualified Status	IRC 101(g)	IRC 7702B(b)	IRC 7702B(b)	IRC 7702B(b)	IRC 7702B(b)
Benefit Type	Indemnity	Reimbursement	Reimbursement	Reimbursement	Indemnity
Accident and Health License Requirement		YES	YES	YES	YES
Eligibility	Certified by licensed health care practitioner that the insured is unable to perform 2 out of 6 Activities of Daily Living (ADL) or requires substantial supervision and protection from threats to health and safety due to a severe cognitive impairment, and that the condition is expected to last the rest of the insured's life.	The insured is certified as chronically ill (defined as unable to perform at least two of the Activities of Daily Living (ADLs) without substantial assistance from another individual for a period of at least 90 days or as the result of severe cognitive impairment. The ADLs are: bathing, continence, dressing, eating, toileting, and transferring). Care is also provided under a care plan prescribed by a licensed health care practitioner.	The insured must be chronically ill as defined in the rider (refers to a person who has been certified by a licensed health care practitioner as being unable to perform, without substantial assistance from another individual, at least two Activities of Daily Living including bathing, dressing, continence, eating, transferring, and toileting due to a loss of functional capacity for a period of at least 90 days or requiring substantial supervision to protect the person from threats to health and safety due to severe cognitive impairment). The company receives a current eligibility certification for the insured and must receive ongoing proof which verifies that the covered care the insured is receiving is necessary due to the insured continually being chronically ill.	The insured must be certified by a licensed health care practitioner as a chronically ill individual (unable to perform at least 2 of 6 Activities of Daily Living—bathing, continence, dressing, eating, toileting, and transferring for a period of at least 90 days; or one who requires substantial supervision to protect the insured from threats to health and safety caused by severe cognitive impairment). The licensed health care practitioner must approve a written plan of care for covered long-term care services that the insured receives while the policy is in force and recertify that the insured is still chronically ill and verify the plan of care once every 12 months thereafter.	A licensed health care practitioner must certify that the insured is chronically ill, meaning that, the insured (a) must have a severe cognitive impairment, or (b) is unable to perform two or more of these Activities of Daily Living such as bathing, eating, continence, toileting, dressing, and transferring (moving into or out of a bed, chair, or wheelchair). A 90-calendar-day elimination, or waiting, period must be satisfied beginning immediately following the date the insured is certified as chronically ill and begins receiving qualified long-term care services. These days of care or services don't need to be consecutive, but they do need to be accumulated within a continuous period of 730 days. The insured must also receive qualified long-term care services according to a plan of care as prescribed by a licensed health care practitioner. While receiving benefits, the licensed health care practitioner will be asked to recertify the care needs at least once a year.
Issue Ages	20 – 80	40 – 79	18 – 79	30 – 75	40 – 75 *(Max age 70 for 6-Year Benefit) (Max age 69 for Single Premium)*

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LIFE INSURANCE WITH BENEFITACCESS VS. HYBRID LIFE PRODUCTS *(continued)*

PRODUCTS THAT OFFER BOTH LIFE INSURANCE AND LONG-TERM CARE BENEFITS

	Prudential	Lincoln National	Genworth	Pacific Life	Nationwide
Premium Options	Flexible premiums	Flexible premiums *(1 – 10 years)*	Single premium *(Additional premiums allowed)*	Single premium, 5, 7, and 10 years *(Additional premiums allowed)*	Single pay, 5-pay, 10-pay
Benefit Payment Options	Monthly indemnity, annual lump sum, or one-time lump sum *(One-time for terminal illness only)*	2 – 7 years *(based on duration of LABR and LEBR options chosen)*	Monthly reimbursement choice of 24, 36, or 48 months	Choice of 2 – 8 years	2 – 7 years
Maximum Monthly Benefit	Maximum monthly benefit is 2% of the death benefit, not to exceed: 1) IRS limit at time of claim 2) IRS per diem limit at policy issue, compounded at 4% annually	Initial specified amount at issue plus the LABR inflation benefit limit, if any, divided by the number of months in the LABR duration chosen	$25,000 Max LTC monthly benefit	The initial monthly maximum benefit is set at policy issue. It equals the policy's face amount divided by 24. This amount will increase on each policy anniversary if an inflation benefit option is elected. The monthly amount reimbursed is the cost of the covered long-term care expenses actually incurred, which may be less than the monthly maximum benefit. The monthly maximum benefit may be pro-rated based on the actual number of days the insured is chronically ill or confined to a facility.	$20,833
Maximum Total Benefit	The death benefit of the policy at the time of initial claim. The maximum is $5 million and applies on an aggregate basis if multiple policies are owned by the insured.	$750,000 with 3-year LABR *(Long-Term Care Accelerated Benefit Rider)* or $500,000 for a 2-year LABR *(Long-Term Care Accelerated Benefit Rider)*	$1.2 million	$600,000	$1.75 million
Restrictions on Use of Benefit	No limitations on benefit use, once benefit eligibility requirements are met	Benefit payments will only cover qualifying long-term care costs actually incurred including adult day care center; assisted care; bed reservation; care planning services; caregiver training; home health care; hospice care; respite care; skilled nursing home care; alternative care services; non-continual alternative care services; or any other qualifying licensed long-term care service.	Benefit payments will only cover qualifying long-term care costs actually incurred including home and community care, assisted living facilities, nursing home facility, home modifications and equipment, adult day care, cost of caregiver training, hospice care and facility, respite care to relieve qualified caregivers.	Benefit payments will only cover qualifying long-term care costs actually incurred including home health care, care coordination, caregiver training, home modification, durable medical equipment, adult day care facility, nursing home facility, assisted living facility, and facility hospice care.	No limitations on benefit use, once benefit eligibility requirements are met
Elimination Period	NONE	NONE	90 days—facility care or immediate—home care	90 days—facility care or immediate—home care	90 days *(Need not be consecutive, but must be within a continuous period of 730 days)*
Residual Death Benefit	NONE	5% of the initial specified amount or $10,000, whichever is less	Yes, 10% of initial specified amount	Lesser of $5,000 or 5% of the initial policy face amount	20% of policy specified amount

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LIFE INSURANCE WITH BENEFITACCESS VS. HYBRID LIFE PRODUCTS *(continued)*

PRODUCTS THAT OFFER BOTH LIFE INSURANCE AND LONG-TERM CARE BENEFITS

	Prudential	Lincoln National	Genworth	Pacific Life	Nationwide
Rider Charge	Monthly deductions	Monthly deductions *(Treated as non-taxable distributions that reduce cost basis)*	Monthly deductions (Treated as non-taxable distributions that reduce cost basis) which may be subject to change after the first 5 policy years; guaranteed monthly risk rates for this rider cannot exceed 50% of the current monthly risk rates	Monthly deductions *(Provides for benefit if the insured becomes terminally ill and has a life expectancy of 12 months or less)*	Monthly deductions *(Treated as non-taxable distributions that reduce cost basis)*
Recertification Required	Yes, annually	Yes, annually	Yes, annually	Yes, annually	Yes, annually *Recertification only as necessary (at company's expense)*
Claim Impact on Death Benefit	Dollar-for-dollar reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction	Dollar-for-dollar reduction
Claim Impact on Policy Values	Proportional reduction	Proportional reduction	Dollar-for-dollar reduction	Proportional reduction	Dollar-for-dollar reduction
International Benefits	YES *(The insured must meet the terms and conditions of the rider including certification and recertification in the U.S. every 12 months by a U.S. licensed health care practitioner in accordance with IRS guidelines)*	Limited to the available maximum monthly benefit if the insured is confined to a nursing home or assisted living facility outside of the U.S. Requires proof in writing of confinement outside of the U.S. and that the insured has met all of the benefit conditions of the rider (Must be furnished in English). Reserves the right to verify monthly satisfaction of eligibility requirements.	YES *50% of specified benefit amount*	The insured must meet the qualification conditions above (documentation required in English) Covers nursing home care only Paid as cash benefit equal to the monthly maximum benefit amount No other benefit is payable during a policy month in which the insured receives the international benefit A maximum benefit limit applies and this benefit may not be available beyond the policy's first 2 years of reimbursing long-term care benefits	International LTC rider benefit payments will be no greater than 50% of the maximum monthly LTC rider benefit amount, until the maximum lifetime LTC rider benefit amount is exhausted, while the insured is receiving care outside of the United States (International LTC rider benefits), and will be paid in U.S. dollars only All claims information and medical records must be submitted in English. The insured is not required to return to the United States for certification; however, the licensed health care practitioner providing the certification must be licensed to practice in the United States or its territories or possessions.[6]
Inflation Protection	No inflation protection feature, but the benefit is available on policies with Option B Death Benefit, so there is potential for the rider lifetime benefit amount to increase over time	3% or 5% compound *(Applies to LTC benefits and not the death benefit)*	Optional benefit 3% or 5% simple or compound	5% compound interest 5% simple interest 3% simple interest	3% simple 5% compound
Provides Benefits in the Event of Terminal Illness	YES *(Provides for benefit if the insured becomes terminally ill and has a life expectancy of 6 months or less)*	Terminal illness benefits available through a separate rider	Terminal illness benefits available through a separate rider	YES *(Provides for benefit if the insured becomes terminally ill and has a life expectancy of 12 months or less)*	YES *(Provides for benefit if the insured becomes terminally ill and has a life expectancy of 12 months or less)*

[6] Policyowner entitled to 100% of the total cumulative benefit pool but can only accelerate it at 50% of the monthly maximum benefit at a time. For example: if the monthly LTC benefit is $10,000 for 3 years, while overseas, the policyowner can accelerate 50% or $5,000 for 6 years.

[<For CA only:> **The BenefitAccess Rider is a life insurance benefit that gives the policyowner the option to accelerate some or all of your life insurance policy's death benefit if the criteria for a qualifying event described in the policy are met. This policy or certificate does not provide Long-Term Care insurance subject to California Long-Term Care insurance law. This policy or certificate is not a California Partnership for Long-Term Care program policy. This policy or certificate is not a Medicare supplement (policy or certificate). Benefits paid under the BenefitAccess Rider are intended to be treated for federal tax purposes as accelerated life insurance death benefits under IRC §101(g)(1)(b). Obtaining benefits under the terms of the rider will reduce and may eliminate the net death benefit your beneficiaries will receive.**

It is important to understand the differences between the BenefitAccess Rider (BenefitAccess) and Long-Term Care (LTC) insurance.

- BenefitAccess is an Accelerated Death Benefit (ADB) rider on a life insurance policy and is not LTC insurance, nor is it intended to replace the need for LTC insurance.
- There is no requirement for the insured to incur LTC expenses in order to be eligible for BenefitAccess benefits. Eligibility for BenefitAccess benefits is based on the insured's chronic illness condition, not the LTC expenses they incur. LTC insurance policies pay on an expense reimbursement basis and benefit eligibility is based on evidence (such as receipts) that the insured has incurred qualified long-term care expenses. The benefit payment on a LTC policy amount is equal to the amount of LTC expenses incurred by the insured during that benefit period.
- The total benefit amount available under BenefitAccess is the death benefit of the life insurance policy. The total benefit amount available under a LTC insurance policy is based on a benefit level selected by the policyowner at the time of purchase.
- Once the insured qualifies for BenefitAccess benefits, payments can begin immediately and there are no restrictions on the use of benefit payments. LTC insurance policies often require that a waiting period or elimination period (such as 90 or 100 days) be satisfied before benefit payments begin, and benefits must be used to pay for qualified LTC expenses.
- There may be other differences between BenefitAccess and any specific LTC insurance policy. Carefully review the specific details of each before making any decision to purchase.]

When comparing products and riders, price is not always the determining factor. Features and benefits can be equally important. We have selected certain scenarios that highlight our competitive position. These scenarios are not indicative of our competitive position in every scenario. Different assumptions regarding issue ages, rating classes, states of issue, non-guaranteed rates of return, charges, face amounts, or premium payments will produce different relative results. Pricing structures and administration of charges and fees may also differ and would affect relative results.

This information was obtained from each company's respective rider contract, as of October 2015. Although we believe it to be accurate as of the time of this printing, we cannot guarantee the accuracy.

[<For CW xCA:> The BenefitAccess Rider is an optional rider for chronic or terminal illness that accelerates the life insurance death benefit. It is not Long-Term Care (LTC) insurance. Benefits received under the rider will reduce and may deplete the death benefit. Electing the BenefitAccess Rider results in an additional charge and underwriting requirements. Some benefit payments may be subject to a fee. Other terms and conditions apply. Clients should consult their tax and legal advisors.

For New York contracts: Please also note the rider is not subject to the minimum requirements of New York law, does not qualify for the New York State Long-Term Partnership Program, and is not a Medicare supplement policy. In addition, receiving accelerated death benefits may affect clients' eligibility for public assistance programs and such benefits may be taxable.]

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Your client should consider the investment objectives, risks, and charges and expenses carefully before investing in the contract, and/or underlying portfolios. The prospectus and, if available, the summary prospectus contain this information as well as other important information. A copy of the prospectus(es) may be obtained from prudential.com. Your clients should read the prospectus carefully before investing.

It is possible to lose money by investing in securities.

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