



# CareForward

## At-a-glance

Feature	Description
Product Description	CareForward is a combination of long-term care insurance and life insurance. As long-term care benefits are used, the death benefit decreases.
State Approvals	Not available in: CA, NY
Issue Ages	Ages 18 to 75. <ul style="list-style-type: none"><li>• The pay-to-95 option will only be allowed up to age 65.</li><li>• Premium will be based on the proposed insured's age as of the application date. If the proposed insured's date of birth is within 30 days of the application date, premium will be based on the younger age.</li></ul>
Free Look Period	30 days (state variations may apply).
Face Amount at Issue	Minimum: \$50,000 Maximum: \$500,000
Risk Classes	<ul style="list-style-type: none"><li>• Nontobacco</li><li>• Nontobacco Class 1</li><li>• Tobacco</li><li>• Tobacco Class 1</li></ul>
Premium Payment Options	<ul style="list-style-type: none"><li>• Single premium (single-pay)</li><li>• Premiums payable for 10 contract years (10-pay)</li><li>• Premiums payable for 20 contract years (20-pay)</li><li>• Premiums payable to age 95 (pay-to-95), limited to a max issue age of 65</li></ul>
Premium Rate Guarantee	Guaranteed for the life of the contract.
Premium Modes	<ul style="list-style-type: none"><li>• Annual</li><li>• Monthly (may include an additional charge)</li></ul>
LTC Elimination Period	<ul style="list-style-type: none"><li>• Home care is 0 days</li><li>• Adult day care is 0 days</li><li>• Residential care facility is 90 days</li></ul> NOTE: Only needs to be satisfied once during the life of the contract. Care received at home or adult day care counts toward Residential Care Elimination Period.
Waiver of Premium	<ul style="list-style-type: none"><li>• The Waiver of Premium elimination period is 90 days, regardless of location of care received, and only needing to be satisfied once during the life of the contract.</li><li>• When the Waiver of Premium qualifications are met, the total premiums (LTCi and Life) will be waived.</li></ul>

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Couples Discount	<p>Couples discount can be added at or after issue, and only applies to the LTCi portion of the premium.</p> <p>NOTE: Both individuals do not need to own a CareForward (or any LTC) contract to receive the discount.</p>
Comprehensive Coverage	<p>The comprehensive long-term care portion of CareForward provides coverage including home health care, residential care facilities, and adult day care.</p>
LTC Monthly Benefit	<ul style="list-style-type: none"> <li>• The minimum monthly benefit amount at issue is \$1,500. (Minimum for: South Dakota is \$3,000; Vermont is \$3,000; Wisconsin is \$1,800.)</li> <li>• The maximum monthly benefit amount at issue is \$15,000.</li> <li>• The LTC maximum monthly benefit may increase after issue with the optional LTC Inflation Benefit. It will not decrease after issue.</li> </ul>
LTC Benefit Multiplier	<p>Selected at issue, the options are: 1, 2 or 3. This represents how many times larger the LTC Total Available Benefit will be at issue compared to the death benefit.</p> <p>The LTC Benefit Multiplier can be decreased to 1 after issue.</p>
LTC Payout Percent	<p>LTC Payment Percent options are: 3%, 4% or 5%.</p> <p>The LTC Payout Percent represents the percentage of the Face Amount at issue that determines the LTC Monthly Benefit amount. The LTC Payout Percent is selected at issue and cannot be changed.</p>
Death Benefit	<p>After issue, the available Death Benefit at any time will be equal to the Total Face Amount at that time less any debt. As LTC benefits are paid, the Face Amount on the base contract will decrease.</p>
Cash Value	<ul style="list-style-type: none"> <li>• The Cash Surrender Value is equal to the Cash Value less any debt and is available to the contract owner upon full surrender of the contract. The Cash Surrender Value for any applicable Paid-Up Addition is available for surrender as well.</li> <li>• A Face Amount decrease will result in a distribution of a portion of the guaranteed cash value.</li> <li>• The Cash Value and Face Amount will decrease when LTC benefit payments are made.</li> </ul>
LTC Total Available Benefit	<p>The available benefit is the total pool of money available during the insured's lifetime to pay for qualified long-term care expenses.</p> <ul style="list-style-type: none"> <li>• This amount will increase if an Inflation Benefit Rider is selected or decrease when covered expenses are reimbursed.</li> <li>• Available Benefit = Face Amount x Benefit Multiplier.</li> </ul>
LTC Benefit Eligibility	<p>The insured must meet the following conditions to be eligible for LTC benefits.</p> <ul style="list-style-type: none"> <li>• Be chronically ill, and</li> <li>• Have received qualified LTC services; and</li> <li>• Satisfied the LTC Elimination Period for care (for benefits subject to the LTC Elimination Period).</li> </ul> <p>On a given day, a person is chronically ill if a licensed health care practitioner has, within the 12-month period preceding the day, certified in writing that the person has either:</p> <ul style="list-style-type: none"> <li>• A physical impairment, expected to last at least 90 days, that prevents him or her from performing at least two activities of daily living (ADLs) without substantial assistance. The six ADLs are bathing, continence, dressing, eating, transferring, and using the toilet.</li> <li>• A severe cognitive impairment is an impairment of the mind comparable to (and includes) Alzheimer's disease and similar forms of irreversible dementia, that is measured by clinical evidence and standardized tests, and requires substantial supervision. Performing ADLs are not considered for a severe cognitive impairment.</li> </ul>

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LTC Benefit Eligibility cont.	<p>Qualified long-term care services are necessary diagnostic, preventive, therapeutic, curative, treatment, mitigation and rehabilitative services and maintenance or personal care services that are:</p> <ul style="list-style-type: none"> <li>• Required because the client is chronically ill; and</li> <li>• Provided pursuant to a plan of care.</li> </ul>
Care Coordinator	<p>A care coordinator is a health care professional with training and expertise in case management. Services that are covered separately and do not reduce the insured's available benefit include:</p> <ul style="list-style-type: none"> <li>• Performing a comprehensive care needs assessment.</li> <li>• Assisting in the development, implementation and coordination of a plan of care.</li> <li>• Identifying the services needed.</li> <li>• Locating local caregivers and care facilities.</li> <li>• Monitoring ongoing care.</li> </ul>
Alternate Care	<p>If the plan of care prescribes qualified long-term care services not covered under the contract, such services may be covered if:</p> <ul style="list-style-type: none"> <li>• The prescribed services are cost-effective alternatives.</li> <li>• Thrivent has a written agreement that describes the qualified long-term care services are to be covered and how they will be covered under the contract.</li> </ul> <p>No benefits will be paid for services provided prior to the date of the written agreement.</p>
Bed Reservation	<p>Residential care facility benefits will not be interrupted by a temporary absence from the facility where the client is a resident.</p>
Ancillary Benefits	<ul style="list-style-type: none"> <li>• Respite care</li> <li>• Equipment/home modification benefit</li> <li>• Caregiver training</li> <li>• International care</li> </ul>
Riders Included at Issue at No Additional Cost	<ul style="list-style-type: none"> <li>• Accelerated Death Benefit for Terminal Illness Rider</li> <li>• Paid-up Addition Rider</li> </ul>
Optional Riders for Additional Premium	<ul style="list-style-type: none"> <li>• LTC Rider Available Benefit (LTC Extension of Benefit Rider, which is added when an LTC Benefit Multiplier greater than 1 is selected)</li> <li>• LTC Inflation Benefit Rider (compounded annually) <ul style="list-style-type: none"> <li>• 3% for 20 years</li> <li>• 3% for Lifetime</li> <li>• 5% for Lifetime</li> </ul> </li> <li>• LTC Nonforfeiture Benefit Rider</li> </ul>
Multiple LTCi Contracts	<p>If other LTCi contract is issued by Thrivent:</p> <ul style="list-style-type: none"> <li>• If an LTC expense is also covered by other LTCi contracts/riders issued by Thrivent, the covered expense will be reduced by the sum of the amounts that we pay for that expense under other coverage (in states that allow this). The contract/rider with the earliest issue date will pay first.</li> </ul> <p>If other LTCi contract is not issued by Thrivent:</p> <ul style="list-style-type: none"> <li>• If the state does not allow coordination, then the insured can be reimbursed from more than one contract (a non-Thrivent contract) for the same long-term care expenses.</li> </ul> <p>NOTE: States that allow coordination between multiple LTCi plans: Arizona, California, Connecticut, District of Columbia, Delaware, Indiana, Montana, South Dakota.</p>
Partnership Eligible	<p>CareForward is not partnership-qualified. State guidelines do not allow combination products to participate in any state LTC Insurance Partnership Programs.</p>

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Tax-qualified LTCi Contract; 7702B(b)	<ul style="list-style-type: none"> <li>• Income tax-free death benefit.</li> <li>• LTCi benefit payments are not taxable.</li> </ul>
Dividends	CareForward is a participating product; however, no dividends are expected to be paid from it.
Contract Fee	\$50 annually
Loans	<ul style="list-style-type: none"> <li>• 8% charged in arrears.</li> <li>• If interest is not paid when due, it is added to the debt balance and bears interest at the same rate.</li> </ul>
Coverage Period	<p>Non-cancellable for life.</p> <p>The insured has the right to continue the contract in force by the timely payment of premiums set forth in the contract. Thrivent shall not unilaterally make any change in any provision of the contract while the contract is in force, nor make any change to the premium rates.</p>
Grace Period	<p>Any premium in default may be paid within a grace period of 65 days after the date it is due. During the grace period, this contract will remain in force.</p> <p>After any premium remains in default for 30 days, we will give notice by mail to the Owner. Notice will be deemed to have been given to the Owner as of five days after the date we mail it. If the premium in default is not paid within the grace period, this contract will terminate or enter nonforfeiture status, if applicable, on the 31st day after we have given notice to the Owner.</p>
Reinstatement	If the contract was not surrendered (or terminated due to excess debt), all components of the contract can be reinstated to their prior levels before lapse. See CareForward product guide for details.
Face Amount Increases and Decreases	<p>The Total Face Amount at issue may increase through the Paid-Up Addition at Issue (PUA) Rider. The Total Face Amount will be the sum of the original Face Amount at issue and any Face Amount purchased at issue with the PUA Rider. The Total Face Amount at issue is still limited by the Maximum Face Amount at issue.</p> <p>The Total Face Amount cannot increase after issue (after the 12-month period for the PUA Rider has expired).</p> <p>The Face Amount can be reduced by client election after issue. Reduction of Face Amount may result in a refund of premium to ensure compliance with IRC section 7702 and the definition of life insurance.</p>

