

State Specific Information

Acci-Flex

As approved, some state insurance departments may require modifications to policy application, contract language, benefits, rates and other features. Please refer to the individual contracts specific to each state as the ultimate authority.

This applies to individual policy Form Nos. L T02-E and I H1513 NY. This information is for agent use only. It is not for use with consumers.

The following chart represents some of those key differences:

State Specific Information for Acci-Flex Policy and Riders.	
California	<ul style="list-style-type: none">• Accident Only Disability Income Rider is not available.
Florida	<ul style="list-style-type: none">• Waiver of Premium Rider is not available.• Return of Premium Rider is not available.• Policy has state-specific rates (included in the illustration system).
Georgia	<ul style="list-style-type: none">• Return of Premium Rider is not available.
Hawaii	<ul style="list-style-type: none">• Return of Premium Rider is not available.
Louisiana	<ul style="list-style-type: none">• Payment of Proceeds provision stipulates that death must occur within 60 days of the date of the insured's accidental bodily injury.
Montana	<ul style="list-style-type: none">• Policy has state specific rates (included in the illustration system)
New Hampshire	<ul style="list-style-type: none">• Accident Only Disability Income Rider is not available.
New Jersey	<ul style="list-style-type: none">• Return of Premium Rider is not available.
New York	<ul style="list-style-type: none">• Return of Premium Rider is not available.
Pennsylvania	<ul style="list-style-type: none">• Return of Premium Rider is not available.
Tennessee	<ul style="list-style-type: none">• Return of Premium Rider is not available.
Vermont	<ul style="list-style-type: none">• Policy has state specific rates (included in the illustration system)
Virginia	<ul style="list-style-type: none">• Return of Premium Rider is not available.



LifeScape®
Acci-Flex Accidental Death Benefit Insurance

Acci-Flex Accidental Death Benefit Policy and Waiver of Premium Rider							
Annual Premium per \$1,000 Benefit							
For all states except the following: FL, MT, VT				For Florida Only			
Issue Age	Male		Female		Issue Age	Male	
	Base	Waiver	Base	Waiver		Base	Waiver
18-25	0.98	0.03	0.44	0.02	18-25	0.64	N/A
26	0.98	0.03	0.44	0.02	26	0.64	N/A
27	0.98	0.03	0.44	0.02	27	0.64	N/A
28	0.98	0.03	0.44	0.03	28	0.64	N/A
29	0.98	0.03	0.44	0.03	29	0.64	N/A
30	0.79	0.03	0.44	0.03	30	0.52	N/A
31	0.79	0.03	0.44	0.03	31	0.52	N/A
32	0.79	0.03	0.44	0.03	32	0.52	N/A
33	0.79	0.03	0.44	0.03	33	0.52	N/A
34	0.79	0.04	0.44	0.04	34	0.52	N/A
35	0.79	0.04	0.44	0.04	35	0.52	N/A
36	0.79	0.04	0.44	0.04	36	0.52	N/A
37	0.79	0.04	0.44	0.04	37	0.52	N/A
38	0.79	0.04	0.44	0.04	38	0.52	N/A
39	0.79	0.04	0.44	0.05	39	0.52	N/A
40	0.71	0.05	0.47	0.05	40	0.47	N/A
41	0.71	0.05	0.47	0.05	41	0.47	N/A
42	0.71	0.05	0.47	0.05	42	0.47	N/A
43	0.71	0.05	0.47	0.05	43	0.47	N/A
44	0.71	0.06	0.47	0.05	44	0.47	N/A
45	0.71	0.06	0.47	0.06	45	0.47	N/A
46	0.71	0.07	0.47	0.06	46	0.47	N/A
47	0.71	0.07	0.47	0.06	47	0.47	N/A
48	0.71	0.08	0.47	0.07	48	0.47	N/A
49	0.71	0.08	0.47	0.07	49	0.47	N/A
50	0.83	0.09	0.59	0.07	50	0.54	N/A
51	0.83	0.09	0.59	0.08	51	0.54	N/A
52	0.83	0.10	0.59	0.08	52	0.54	N/A
53	0.83	0.10	0.59	0.08	53	0.54	N/A
54	0.83	0.11	0.59	0.08	54	0.54	N/A
55	0.83	0.11	0.59	0.08	55	0.54	N/A
56	0.83		0.59		56	0.54	N/A
57	0.83		0.59		57	0.54	N/A
58	0.83		0.59		58	0.54	N/A
59	0.83		0.59		59	0.54	N/A
60	0.83		0.59		60	0.54	N/A

To calculate the modal premium, multiply the number of units (benefit amount divided by 1,000) by the unit rate listed above, add the policy fee of \$45, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; and monthly 0.088) and round to the nearest \$.01.

FOR AGENT USE ONLY. Not for use with consumers. Policy form L T02-E. Product availability, features and rates may vary by state. The policy may contain reductions of benefits, limitations and exclusions. For complete details of coverage, please contact Assurity Life Insurance Company or ask to review the policy for more



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Acci-Flex Accidental Death Benefit Insurance

Acci-Flex Accidental Death Benefit Policy and Waiver of Premium Rider							
Annual Premium per \$1,000 Benefit							
For Montana Only				For Vermont Only			
Issue Age	Male		Female		Issue Age	Male	
	Base	Waiver	Base	Waiver		Base	Waiver
18-25	0.98	0.03	0.98	0.03	18-25	0.89	0.03
26	0.98	0.03	0.98	0.03	26	0.89	0.03
27	0.98	0.03	0.98	0.03	27	0.89	0.03
28	0.98	0.03	0.98	0.03	28	0.89	0.03
29	0.98	0.03	0.98	0.03	29	0.89	0.03
30	0.79	0.03	0.79	0.03	30	0.72	0.03
31	0.79	0.03	0.79	0.03	31	0.72	0.03
32	0.79	0.03	0.79	0.03	32	0.72	0.03
33	0.79	0.03	0.79	0.03	33	0.72	0.03
34	0.79	0.04	0.79	0.04	34	0.72	0.04
35	0.79	0.04	0.79	0.04	35	0.72	0.04
36	0.79	0.04	0.79	0.04	36	0.72	0.04
37	0.79	0.04	0.79	0.04	37	0.72	0.04
38	0.79	0.04	0.79	0.04	38	0.72	0.04
39	0.79	0.04	0.79	0.04	39	0.72	0.04
40	0.71	0.05	0.71	0.05	40	0.65	0.05
41	0.71	0.05	0.71	0.05	41	0.65	0.05
42	0.71	0.05	0.71	0.05	42	0.65	0.05
43	0.71	0.05	0.71	0.05	43	0.65	0.05
44	0.71	0.06	0.71	0.06	44	0.65	0.06
45	0.71	0.06	0.71	0.06	45	0.65	0.06
46	0.71	0.07	0.71	0.07	46	0.65	0.07
47	0.71	0.07	0.71	0.07	47	0.65	0.07
48	0.71	0.08	0.71	0.08	48	0.65	0.08
49	0.71	0.08	0.71	0.08	49	0.65	0.08
50	0.83	0.09	0.83	0.09	50	0.75	0.09
51	0.83	0.09	0.83	0.09	51	0.75	0.09
52	0.83	0.10	0.83	0.10	52	0.75	0.10
53	0.83	0.10	0.83	0.10	53	0.75	0.10
54	0.83	0.11	0.83	0.11	54	0.75	0.11
55	0.83	0.11	0.83	0.11	55	0.75	0.11
56	0.83		0.83		56	0.75	
57	0.83		0.83		57	0.75	
58	0.83		0.83		58	0.75	
59	0.83		0.83		59	0.75	
60	0.83		0.83		60	0.75	

To calculate the modal premium, multiply the number of units (benefit amount divided by 1,000) by the unit rate listed above, add the policy fee of \$45, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; and monthly 0.088) and round to the nearest \$.01.

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LifeScape®
Acci-Flex Accidental Death Benefit Insurance

Accident Only Disability Income Rider and ADI Rider Waiver of Premium Rider								Return of Premium Rider	
Annual Premium per \$100 Monthly Benefit								Percent of Premium*	
For all states except the following: CA, MA, MT, NH								For Montana Only	
Issue Age	Male		Female		Issue Age	Male		Female	
	Base	Waiver	Base	Waiver		Base	Waiver	Base	Waiver
18-25	7.58	0.21	7.73	0.30	18-25	7.73	0.30	7.73	0.30
26	7.58	0.22	7.73	0.32	26	7.73	0.32	7.73	0.32
27	7.58	0.23	7.73	0.35	27	7.73	0.35	7.73	0.35
28	7.58	0.24	7.73	0.37	28	7.73	0.37	7.73	0.37
29	7.58	0.25	7.73	0.40	29	7.73	0.40	7.73	0.40
30	7.77	0.26	8.54	0.42	30	8.54	0.42	8.54	0.42
31	7.77	0.28	8.54	0.44	31	8.54	0.44	8.54	0.44
32	7.77	0.29	8.54	0.47	32	8.54	0.47	8.54	0.47
33	7.77	0.30	8.54	0.49	33	8.54	0.49	8.54	0.49
34	7.77	0.31	8.54	0.51	34	8.54	0.51	8.54	0.51
35	7.77	0.33	8.54	0.53	35	8.54	0.53	8.54	0.53
36	7.77	0.35	8.54	0.57	36	8.54	0.57	8.54	0.57
37	7.77	0.37	8.54	0.61	37	8.54	0.61	8.54	0.61
38	7.77	0.39	8.54	0.65	38	8.54	0.65	8.54	0.65
39	7.77	0.41	8.54	0.69	39	8.54	0.69	8.54	0.69
40	7.98	0.43	9.72	0.73	40	9.72	0.73	9.72	0.73
41	7.98	0.45	9.72	0.75	41	9.72	0.75	9.72	0.75
42	7.98	0.47	9.72	0.76	42	9.72	0.76	9.72	0.76
43	7.98	0.49	9.72	0.78	43	9.72	0.78	9.72	0.78
44	7.98	0.52	9.72	0.80	44	9.72	0.80	9.72	0.80
45	7.98	0.54	9.72	0.82	45	9.72	0.82	9.72	0.82
46	7.98	0.57	9.72	0.85	46	9.72	0.85	9.72	0.85
47	7.98	0.60	9.72	0.88	47	9.72	0.88	9.72	0.88
48	7.98	0.63	9.72	0.92	48	9.72	0.92	9.72	0.92
49	7.98	0.66	9.72	0.95	49	9.72	0.95	9.72	0.95
50	8.33	0.69	11.19	0.98	50	11.19	0.98	11.19	0.98
51	8.33	0.71	11.19	0.97	51	11.19	0.97	11.19	0.97
52	8.33	0.73	11.19	0.97	52	11.19	0.97	11.19	0.97
53	8.33	0.75	11.19	0.96	53	11.19	0.96	11.19	0.96
54	8.33	0.77	11.19	0.95	54	11.19	0.95	11.19	0.95
55	8.33	0.79	11.19	0.94	55	11.19	0.94	11.19	0.94
56	8.33		11.19		56	11.19		11.19	
57	8.33		11.19		57	11.19		11.19	
58	8.33		11.19		58	11.19		11.19	
59	8.33		11.19		59	11.19		11.19	
60	8.33		11.19		60	11.19		11.19	

*Percentage applied to total premium excluding ROP

To calculate the modal premium, multiply the number of units or total premium (as applicable per rider) by the rate listed above, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; and monthly 0.088) and round to the nearest \$.01 before adding to the modal policy premium.

For agent use only. Rider forms R I0827-W, A-R125 and R T29. Product availability, features and rates may vary by state. The policy may contain reductions of benefits, limitations and exclusions. For complete details of coverage, please contact Assurity Life Insurance Company or ask to review the policy for more information.