LifeStyle Plus Long-Term Care Insurance

A Long-Term Care Insurance Policy

Plan Benefits

- Nursing Home
- Bed Reservation
- Ambulance

Aflac™

Form A25375B IC(4/05)

LifeStyle Plus Long-Term Care Insurance

Policy Series A-25300 and Rider A-25350

Three Ways to Qualify for Nursing Home Benefits!

To qualify for Nursing Home Benefits under this policy, you must:

1. Be unable to perform two or more activities of daily living (ADLs) and require direct personal assistance; OR
2. Be suffering from a cognitive impairment that requires you to be continually supervised for the protection of yourself and others; OR
3. Be suffering from an illness or injury that makes nursing home confinement a medical necessity.

Nursing Home Benefit

Aflac will pay the Nursing Home Daily Benefit selected for each day you require skilled, intermediate, or custodial care while confined in a nursing home facility. Benefits start after the nursing home elimination period and are subject to the nursing home benefit period and the lifetime maximum benefit.

Choose Your Benefit

Daily Benefit

Select the amount of Nursing Home Daily Benefit to be paid for stays in a nursing home facility. Daily benefit amount options (in $10 increments): $40–$200.
Amount Chosen: $_____

How Long?

Select the maximum length of time for Nursing Home Benefits to be paid. Benefit period options:

❑ 2 years
❑ 3 years
❑ 5 years
❑ Lifetime

Elimination Period

Select when payment of Nursing Home Benefits can begin. When the elimination period ends, the selected benefit period begins. Elimination period options:

❑ 0 days
❑ 20 days
❑ 100 days

Bed Reservation Benefit

Aflac will pay the charges incurred, up to the Nursing Home Daily Benefit amount selected, to reserve your bed in a nursing home facility if you require transfer to a hospital during your nursing home facility confinement. Benefits start after the nursing home elimination period and are subject to the nursing home benefit period chosen and the lifetime maximum benefit. This benefit is limited to a 21-day calendar year maximum.

Ambulance Benefit

Aflac will pay the charges incurred up to $200 for ambulance transportation for you to or from a nursing home or hospital. This benefit is limited to four trips per year. The ambulance service must be performed by a licensed professional ambulance company.

Alternate Plan of Care Benefit

Aflac will pay an agreed-upon Alternate Plan of Care Benefit if you qualify for Nursing Home Benefits and you are unable to perform two or more ADLs, or you are suffering from cognitive impairment (if such plan is an acceptable option). It must be a mutually agreed-upon written plan among you, your physician, and Aflac in which the benefit amount has been predetermined. An alternate plan of care may include modifications to your home to accommodate a wheelchair or other special needs. This benefit does not include Home Health Care, Assisted-Living, or Adult Day-Care Benefits. Medical necessity will not trigger this benefit. This benefit cannot exceed the lifetime maximum benefit and is not payable while you are receiving benefits for a nursing home confinement or after you have exhausted the benefits payable under your nursing home benefit period.

Restoration of Coverage Benefit

Aflac will restore your nursing home benefit period if, for at least 180 consecutive days, you are no longer eligible to receive benefits under this policy or any attached riders and are able to perform four or more ADLs. The lifetime maximum amount that this policy will pay for nursing home care, bed reservation, and any alternate plan of care combined will not exceed two times the nursing home benefit period multiplied by the Nursing Home Daily Benefit.

This brochure is for illustration purposes only.

Refer to the policy and riders for complete details, limitations, and exclusions.

Waiver of Premium Benefit

Aflac will waive, from month to month, any premium(s) falling due during your continued nursing home confinement, after you have received Nursing Home Daily Benefits for 60 consecutive days. When Nursing Home Daily Benefits are no longer being paid, premium payments must be resumed.

❑ Optional: Home Health Care/Assisted-Living/ Adult Day-Care Benefit Rider

Home Health Care Benefit

Aflac will pay the charges incurred for each day you receive care at home up to the Home Health Care Daily Benefit amount selected. This benefit does not cover homemaker services, companion services, meal preparation, and similar nonmedical services. The daily benefit cannot exceed the Nursing Home Daily Benefit selected. A home cannot be a hospital, nursing facility, or any other such type facility.

Choose Your Benefit

Daily Benefit

Select the Home Health Care Daily Benefit. Daily benefit amount options: $20–$200 (in $10 increments) (Minimum benefit is 50% of Nursing Home Daily Benefit.)
Amount Chosen: $_____

How Long?

Select the maximum length of time for which the Home Health Care/Assisted-Living/Adult Day-Care Rider will pay.
Benefit period options:
❑ 1 year
❑ 2 years
❑ 3 years

Elimination Period

Select when the payment of benefits can begin. When the elimination period ends, the selected benefit period begins.
Elimination period options:
❑ 0 days
❑ 20 days

Adult Day-Care Benefit

Aflac will pay the charges incurred up to 50% of the Home Health Care Daily Benefit for each day you receive adult day care. You must be receiving services in an adult day-care facility and be under such care for at least four hours per day. An adult day-care facility is not an overnight facility.

Assisted-Living Benefit

Aflac will pay the charges incurred for each day you are confined in an assisted-living facility up to the Home Health Care Daily Benefit amount selected. An assisted-living facility does not include a facility or any of its sections that is a hospital or clinic; that operates primarily as a place for the treatment of alcoholism, drug addiction, or persons suffering from mental disease; a nursing home; your home; primarily a place for residential living or a similar establishment.

Respite Care Benefit

Aflac will pay the charges incurred up to the Home Health Care Daily Benefit amount for each day respite care is received in a respite care facility. This benefit is limited to a 14-day calendar year maximum. This benefit is not payable if Nursing Home Benefits are being paid.

Hospice Care Benefit

Aflac will pay the charges incurred up to 50% of the Home Health Care Daily Benefit for each day you receive hospice care if your medical prognosis is one in which there is a life expectancy of six months or less and you are ill or injured, and therapeutic intervention directed toward the cure of the disease or injury is no longer appropriate. The benefits must be provided by a licensed hospice agency, organization, or unit. This benefit does not cover nonterminally ill patients who may be confined in a convalescent home; a rest or nursing facility; a skilled or intermediate nursing facility; a rehabilitation unit; or a facility that provides treatment for persons suffering from mental disease or disorders, or care for the aged, drug addicts, or alcoholics. This benefit is limited to a lifetime maximum of 180 days.

To receive the benefits in the optional Home Health Care/Assisted-Living/Adult Day-Care Benefit Rider, you must be unable to perform two or more ADLs and require direct personal assistance, or you must be suffering from a cognitive impairment that requires you to be continually supervised for the protection of yourself and others. Benefits for home health care, assisted living, and adult day care start after the rider elimination period and are subject to the rider benefit period chosen. You will not be paid Home Health Care, Assisted-Living, and Adult Day-Care Benefits on the same day. These benefits will not be paid on the same day that Nursing Home Benefits are payable. The largest daily benefit for care received will be paid.

You need to be aware that benefits received under this policy may create unintended adverse income tax consequences to you. You may want to consult with a knowledgeable individual about these potential income tax consequences.

Alzheimer's Covered
This policy will pay for covered care resulting from Alzheimer's disease, or similar forms of senility or senile dementia, first manifested while coverage is in force.

Lifetime Nursing Home Elimination Period
Once you have satisfied your nursing home elimination period, you will not be subject to another nursing home elimination period while this policy is in force.

Dual Discount
If an applicant and spouse both purchase a long-term care policy, each will receive a 10% premium discount.

Pre-existing Conditions
Subject to the truthful completion of your application, this policy fully covers all health conditions that you may presently have, subject to the terms of the policy, as of the policy effective date shown in the Policy Schedule.

Activities of Daily Living (ADLs)
Dressing – putting on and taking off all items of clothing and any necessary equipment; Eating – feeding yourself; Transferring – moving into or out of a bed, chair, or wheelchair; Toileting – getting to and from and getting on and off a toilet, and performing associated personal hygiene; Continence – ability to maintain control of bowel and bladder functions, or perform associated personal hygiene

Renewal Provision
This policy is guaranteed-renewable for your lifetime. Aflac may change the premium rate, but only if the rate is changed for all policies of this class.

Effective Date
The effective date of this policy is the date shown in the Policy Schedule. The effective date is not the date you signed the application for coverage.

Contingent Benefit Upon Lapse
If your policy lapses, you may be eligible for a Contingent Benefit that provides for your coverage to continue on a limited basis. Please refer to your policy or outline of coverage for further details.

What Is Not Covered
If Medicaid is paying claims on your behalf, all benefits payable under this policy for those claims will be paid directly to Medicaid.

This policy does not cover any care that results from:

- services rendered by a member of your immediate family;
- services for which a charge would not be made in the absence of this insurance;
- care rendered by a Veterans Administration or other federal government facility, unless you or your estate is charged for such care;
- being exposed to war or any act of war, declared or undeclared, or service in any of the armed forces;
- intentionally self-inflicted bodily injury or attempted suicide (while sane or insane);
- the treatment of alcoholism or drug addiction, or any treatment received or contracted due to your being intoxicated or under the influence of alcohol, drugs, or any narcotic unless the alcohol, drug, or narcotic was administered on the advice of a physician and taken according to the physician's instructions (the term intoxicated refers to that condition as defined by the law of the jurisdiction in which the accident, cause of care, or care was received);
- care resulting from bipolar affective disorder (manic depressive syndrome), delusional (paranoid) disorders, psychotic disorders, somatoform disorders (psychosomatic illness), eating disorders, or schizophrenia or anxiety disorders. Care for other mental illnesses not mentioned above is covered if demonstrable organic disease exists. This policy will pay, however, for covered care resulting from Alzheimer's disease, or similar forms of senility or senile dementia (without a requirement of demonstrable organic disease), first manifested while coverage is in force.

A nursing home facility is not a hospital; a place that primarily treats the mentally ill, drug addicts, or alcoholics; a home for the aged; a rest home; a place that primarily provides domiciliary, residency, or retirement care; or a place owned or operated by you.

The policy to which this sales material pertains is written only in English; the policy prevails if interpretation of this material varies.

Buying Long-Term Care Insurance Today May Save You Money Tomorrow!

Long-term care coverage helps provide critical financial support if a chronic condition incapacitates you or your spouse for an extended time.

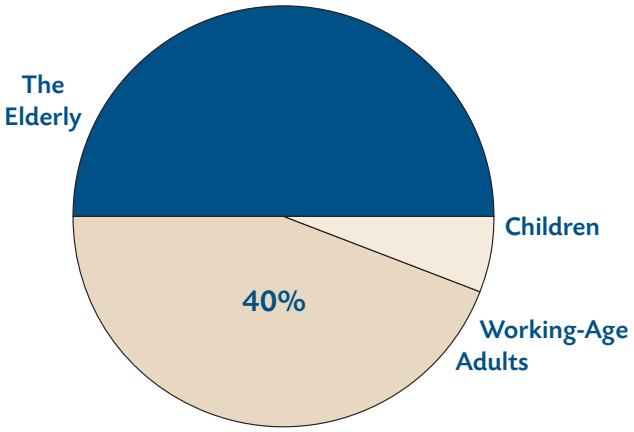
The Cost and Need for Coverage Continue to Surge.

- The average daily rate for a private room in a nursing home is $192. The average nursing home cost is approximately $70,080 per year.[1]
- The average daily charge for assisted living is about $66 (or $24,000 per year), and home care costs for the chronically disabled are about $12,000 per year.[2]
- Doctors and hospitals are under tremendous pressure to get patients out as quickly as possible. Patients often go to a nursing home to continue the recovery period.

A Disability Knows No Age Limit!

An estimated 10 million Americans need assistance from others to carry out everyday activities.[4] More important, long-term care isn't just for the elderly and the retired; injuries can incapacitate the young as well as the aged—sometimes with longer-lasting implications.

Who Uses Long-Term Care?[3]



Why Buy Early?

- The need exists at any age.
- Capitalize on your current good health.
- Take advantage of lower age-based issue rates.

Buy at Your Current Age—and Save!

The cost difference between buying a long-term care policy at age 50 compared to buying the same policy at age 65 is substantial.

Aflac's Long-Term Care Plan ... coverage from a top-rated world leader in guaranteed-renewable insurance benefits sold at the workplace

Aflac™

[1]Trevor Thomas, LTC Specialists Approach Rising Nursing Home Care Costs Differently, National Underwriter LTC e-Wire, October 6, 2004, <http://www.nationalunderwriter.com/LTC/articles/2004_10_feature.asp> (October 6, 2004)
[2]Guide to Long-Term Care Insurance, © 2003, America's Health Insurance Plans
[3]A Guide to Long-Term Care Insurance, 2002, Health Insurance Association of America (HIAA), HIAA-101-03, What Does Long-Term Care Cost?
[4]Medicaid and Long-Term Care, Kaiser Commission on Medicaid and the Uninsured, May 2004

Aflac is ...

- A Fortune 500 company with assets exceeding $59 billion, insuring more than 40 million people worldwide.
- Rated AA in insurer financial strength by Standard & Poor's (April 2004), Aa2 (Excellent) in insurer financial strength by Moody's Investors Service (March 2003), A+ (Superior) by A.M. Best (June 2004), and AA in insurer financial strength by Fitch, Inc. (December 2003).*
- Named by Fortune magazine to its list of America's Most Admired Companies for the fifth consecutive year in March 2005.
- A premier provider of insurance policies with premiums payroll deducted for more than 300,000 payroll accounts nationally.
- Outstanding in claims service, with most claims processed within four days.
- Included by Forbes magazine in its annual Platinum 400 List of America's Best Big Companies since 2000 (January 2004).
- Named by Fortune magazine to its list of the 100 Best Companies to Work For in America for the seventh consecutive year in January 2005.

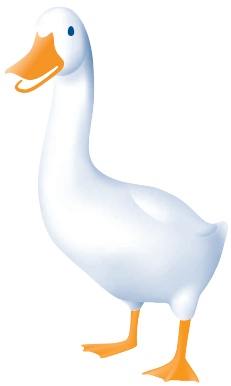
* *Ratings refer only to the overall financial status of Aflac and are not recommendations of specific policy provisions, rates, or practices.*

Your local Aflac insurance agent/producer

1.800.99.AFLAC (1.800.992.3522)

En español:
1.800.SI.AFLAC (1.800.742.3522)

Visit our Web site at aflac.com.



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