

## How the information is used

Once your assessment is complete, your results will be forwarded to an underwriter, who will use it to make a decision about your insurability. Based on the underwriter's evaluation, your coverage may be:

- Approved at the rate your financial professional quoted you.
- Approved, but at a rate different from the one originally quoted by your financial professional.
  - Thrivent will explain its decision, and your financial professional may contact you to discuss the underwriting decision, as well as any additional requirements and available options.
- Denied. In this case, you will receive a letter from Thrivent explaining the reason(s) you were denied.

In certain circumstances, you may be reconsidered at a future date. If any special workups or tests are required as part of the reconsideration, they will be done at your expense.

Your financial professional may contact you to discuss additional or alternative options for your extended-care strategy.



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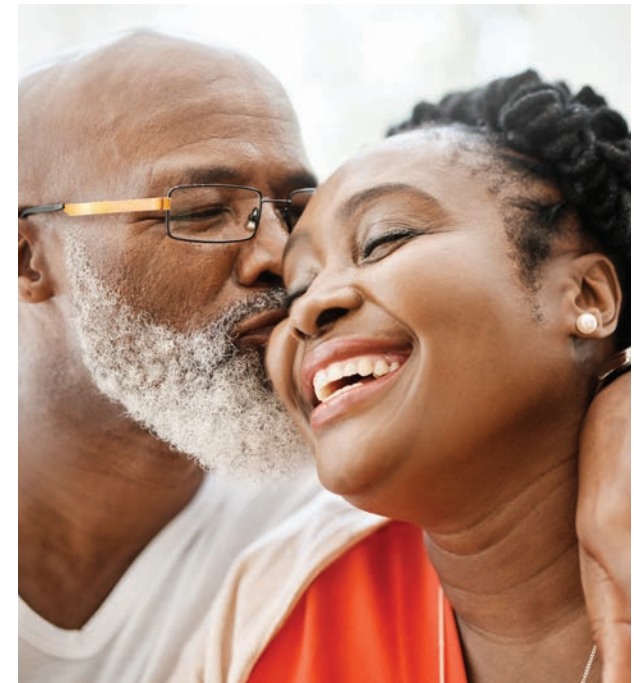
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# Your Underwriting Process—

Long-term care insurance



## What to expect next

You deserve a financial plan that you feel confident about —Thrivent is here to help with the necessary steps to take on the road to your retirement. Once you apply for Thrivent Long-Term Care Insurance, your underwriting process will begin. Take a deeper look, so you know what to expect from us and what the underwriting process will entail.

Your financial professional will gather your medical information during the application process, or it will be taken during a phone interview. Typically, assessments are ordered based on your age (see below). However, the underwriter can order an assessment for applicants of any age on a discretionary basis.

Your physician may require special authorization before releasing your medical records. Please respond to any requests as soon as possible to ensure the timely processing of your application.

## The telephone assessment

The telephone assessment is conducted by a nurse, who will gather, validate or clarify your medical and nonmedical information. If your medical information wasn't gathered when you completed your application process, the nurse will ask questions about medical conditions you may or may not have had within the past 10 years, including:

- Names of conditions and dates of diagnoses.
- Names and addresses of the doctors seen for the conditions.
- Names and dates of medications prescribed or taken for the conditions.
- Names, dates and results of treatments and tests performed.
- Names, addresses and phone numbers of any treatment facilities used.

To minimize your time, it is helpful to have this information available during the assessment. Depending on your age and medical status, you also may be asked to participate in a cognitive acuity screen.

## The in-home face-to-face assessment

If you are required to participate in an in-home face-to-face assessment, a nurse will call you to schedule an appointment at your convenience. During the assessment, you'll be asked to provide identification and answer standard questions about your medical history. The nurse will also take your blood pressure and record your height and weight. (No blood work or urinalysis is needed.) You also may be asked to participate in a cognitive acuity screen.

## The cognitive acuity screen

Some people must also participate in a cognitive acuity screen in addition to the telephone or face-to-face assessment. Thrivent uses the Minnesota Cognitive Acuity Screen, a standardized assessment used by many long-term care insurance providers. You will be asked questions to assess your:

- Orientation
- Repetition
- Attention
- Naming computation
- Word recall
- Judgment
- Comprehension
- Verbal fluency

To help ensure your comfort and the best results, you'll want to select a time and place free from distraction. If family or friends are present during the screening, they will need to be in a separate room.

What's needed*		
If your age is	And you <b>have</b> consulted with a physician in the last 24 months	And you <b>have not</b> consulted with a physician in the last 24 months
<b>18 to 59</b>	<ul style="list-style-type: none"><li>• A telephone assessment and prescription check will be needed unless your physician is asked to provide medical records for certain medical conditions.</li></ul>	<ul style="list-style-type: none"><li>• A telephone assessment will be needed.</li><li>• A prescription check will be ordered.</li></ul>
<b>60 to 69</b>	<ul style="list-style-type: none"><li>• A telephone assessment with a cognitive acuity screen will be needed.</li><li>• Medical records from your physician will be requested.</li></ul>	<ul style="list-style-type: none"><li>• An in-home face-to-face assessment with a cognitive acuity screen will be needed.</li><li>• A prescription check will be ordered.</li></ul>
<b>70 or older</b>	<ul style="list-style-type: none"><li>• An in-home face-to-face assessment with a cognitive acuity screen will be needed.</li><li>• Medical records from your physician will be requested.</li></ul>	<ul style="list-style-type: none"><li>• An in-home face-to-face assessment with a cognitive acuity screen will be needed.</li><li>• A prescription check will be ordered.</li></ul>
<b>California applicants</b>	<ul style="list-style-type: none"><li>• Medical records will be requested, and a prescription check will be ordered for all proposed insureds from California, regardless of their age and their last consultation with a physician.</li><li>• Proposed insureds aged 18 to 59 will undergo a face-to-face assessment without a cognitive acuity screen if they have not consulted a physician in the last 24 months.</li><li>• Proposed insureds aged 60 and older should refer to the guidelines in the columns above.</li></ul>	

\*A typical telephone assessment takes approximately 15 minutes, a telephone assessment with a cognitive acuity screen takes approximately 30 minutes and an in-home face-to-face assessment takes approximately 40 minutes.