



**ACCELERATION OF LIFE INSURANCE DEATH BENEFITS FOR QUALIFIED  
LONG-TERM CARE SERVICES RIDER -- FORM 02ULTCR  
OUTLINE OF COVERAGE**

**FEDERAL INCOME TAX TREATMENT OF THE RIDER:** Long-term care insurance was granted favorable federal income tax treatment in the Health Insurance Portability and Accountability Act of 1996. Contracts meeting certain criteria outlined in this Act are eligible for this treatment. To the best of our knowledge, we have designed this rider to meet the requirements of this law. This rider is intended to be a qualified long-term care insurance contract under Internal Revenue Code section 7702B(b). The benefits provided by the policy are intended to be excludable from federal gross income under sections 7702B and 101(g). If, in the future, it is determined that this rider does not meet these requirements, as may be amended, we will make reasonable efforts to amend the rider if we are required to do so in order to comply. We will offer you an opportunity to receive these amendments. Charges for this rider may be distributions for income tax purposes. If you have any questions concerning the tax implications of this rider, you should consult with an attorney or qualified tax advisor.

**THIS IS NOT A MEDICARE SUPPLEMENT POLICY. If you are eligible for Medicare, review the Guide to Health Insurance for People with Medicare available from the company.**

**CAUTION.** The issuance of this rider is based upon our issuance of the policy and the Insured's responses to the questions on the application for this rider. A copy of the application for the policy and the application for this rider is attached to the policy. If the Insured's answers are not complete, true, and correctly recorded, we have the right (in addition to any rescission rights described in the policy) to deny benefits or rescind the rider subject to the Time Limit on Certain Defenses provision. The best time to clear up any questions is now, before a claim arises! To contact us, write to: John Hancock Variable Life Insurance Company, John Hancock Place, P.O. Box 717, Boston, Massachusetts, 02117 or call Us at 1-800-543-6415.

**NOTICE TO BUYER:** The rider may not cover all of the costs associated with long-term care incurred by the Insured during the period of coverage. You and the Insured are advised to review carefully all rider limitations.

**This rider interacts with the life insurance policy to which it is attached. Each rider benefit payment reduces the Total Sum Insured of the life insurance policy. Each benefit payment also reduces the life insurance policy's Account Value by an amount proportional to the Total Sum Insured reduction. Once benefits are paid under this rider, you will receive a monthly statement showing the amount of benefits paid and the effect of such payments on the policy death benefits, surrender values and account values, as well as the maximum rider benefits available.**

1. The rider is attached to an individual life insurance policy.

2. **PURPOSE OF OUTLINE OF COVERAGE**

This Outline of Coverage provides a very brief description of the important features of the rider. You and the Insured should compare this Outline of Coverage to outlines of coverage for other policies or riders available to the Insured. This is not an insurance contract, but only a summary of coverage. Only the variable life insurance policy and rider contain governing contractual provisions. This means that the life insurance policy and rider set forth in detail the rights and obligations of you, the Insured and the insurance company. Therefore, if you purchase this coverage, or any other coverage, it is important that you READ YOUR POLICY AND RIDER CAREFULLY!

3. **TERMS UNDER WHICH THE RIDER MAY BE CONTINUED IN FORCE OR DISCONTINUED**

(a) **RENEWABILITY:** You have the right to continue the rider except as provided in the provision captioned "Termination of this Rider". In addition, we cannot change the provisions of the rider without your consent. John Hancock cannot change any of the terms of the rider on its own, except that, in the future, IT MAY INCREASE THE CHARGE FOR THIS RIDER.

(b)  **RIDER CHARGE INCREASES.** We have the right to increase the long-term care rider charge as of any rider charge due date. However, any changes in the rider charge must apply to all riders issued in the Insured's state on the rider form.

4. **TERMS UNDER WHICH THE RIDER MAY BE RETURNED AND RIDER CHARGES RETURNED**

- (a) **THIRTY DAY FREE LOOK.** If you are not completely satisfied with the rider for any reason, you may return it within 30 days from the date it was delivered to you. We will then reverse any long-term care rider charge imposed, and the rider will be treated as if it had never been issued.
- (b) **REFUND OF UNEARNED RIDER CHARGES.** Upon receipt of notice that you have died, we will reverse any long-term care rider charge deducted for any period beyond the date of death.

5. **THIS IS NOT A MEDICARE SUPPLEMENT POLICY**

If the Insured is eligible for Medicare, review the Guide to Health Insurance for People with Medicare available from John Hancock. Neither John Hancock Variable Life Insurance Company nor its agents represent Medicare, the federal government or any state government.

6. **LONG-TERM CARE COVERAGE**

Policies and riders of this category are designed to provide coverage for one or more necessary or medically necessary diagnostic, preventative, therapeutic, rehabilitative, maintenance, or personal care services, provided in a setting other than an acute care unit of a hospital, such as in a nursing home, in the community, or in the home.

The rider provides coverage for actual charges incurred for care up to the Maximum Monthly Benefit Amount for covered long-term care expenses, subject to rider limitations and requirements.

7. **LONG-TERM CARE ACCELERATED BENEFITS PROVIDED BY THE RIDER**

(a) **Institutional and Non-Institutional Benefits.** Subject to the conditions, limitations, and exclusions found in the rider, we will make a monthly Accelerated Benefit payment in an amount not to exceed the lesser of (i) the charges incurred by the Insured for Qualified Long-Term Care Services, and (ii) the Maximum Monthly Benefit Amount, provided we receive evidence satisfactory to us that the Insured is:

- confined in a Nursing Home or an Assisted Care Living Facility and is receiving Nursing Care, Custodial Care, Hospice Care or Respite Care; or
- receiving Home Health Care, Hospice Care or Respite Care in his or her home, a rest home or in an Adult Day Care Center.

The monthly Accelerated Benefit payment is based upon a Calendar Month time period and the Accelerated Benefit we have approved for that period

A portion of each approved monthly Accelerated Benefit amount will be used to repay a portion of any indebtedness under the policy and will reduce the monthly Accelerated Benefit payment for that period.

In addition, we will not pay for charges during the Elimination Period. "Elimination Period" means the required period of time while the policy is in force that must elapse before any Accelerated Benefit is available to you under this rider. Such period of time is equal to 100 Dates of Service. The 100 Dates of Service used to satisfy the Elimination Period do not need to be consecutive and may be accumulated under separate requests for acceleration. No day may be counted as more than one day towards the satisfaction of the Elimination Period. Only one complete Elimination Period needs to be met while the policy is in force. The Elimination Period starts on the first Date of Service.

(b) **Effect on the Life Insurance Policy.**

- Partial Withdrawals, Total Sum Insured Reductions, Terminal Illness Accelerated Death Benefit. Any partial withdrawals, reductions in Total Sum Insured (other than reductions in Total Sum Insured arising solely under the provisions of this rider), or acceleration of the Death Benefit due to Terminal Illness, including those made during a Period of Care under this rider, reduces the Maximum Monthly Benefit Amount, resulting in a new Maximum Monthly Benefit Amount, as determined by us. Such reduction will be effective as of the effective date of the partial withdrawal, reduction in Total Sum Insured, or acceleration of the Death Benefit. Further, if the policy imposes a charge for a reduction in Total Sum Insured, and a reduction in Total Sum Insured arises solely under the provisions of this rider, such charge will be waived.
- Death Benefit and Total Sum Insured. Each Monthly Benefit Payment reduces the current Total Sum Insured, resulting in a new Total Sum Insured.
- Account Value. Each Accelerated Benefit amount reduces the current Account Value, resulting in a new Account Value.
- Loans. Prior to payment of a monthly Accelerated Benefit payment, a portion of the payment will be used to repay part of any loans under the policy, thus reducing the amount available for long-term care expenses.

(c) **Eligibility for Payment of Benefits.** You are eligible for Accelerated Benefits under the rider if the Insured:

- needs Substantial Assistance to perform at least two of the Activities of Daily Living; or
- requires substantial supervision to protect him or herself from threats to health and safety due to the presence of a Cognitive Impairment.

Activities of Daily Living mean the following activities: bathing, continence, dressing, eating, toileting, and transferring.

Cognitive Impairment means a deficiency in a person's short-term or long-term memory; orientation as to person, place, and time; deductive or abstract reasoning; or judgment as it relates to safety awareness.

(d) **Conditions.** To receive Accelerated Benefits under this rider:

- the Elimination Period must have been satisfied;
- the Insured must receive Qualified Long-term Care Services covered under this rider and which are specified in a Plan of Care;
- you must submit to us a current Plan of Care and written Proof of Loss for the Insured; and
- we must determine that you are eligible for the payment of benefits under this rider.

You must ALSO provide us with one of the following written certifications:

- A Licensed Health Care Practitioner must certify that the Insured is unable to perform at least two Activities of Daily Living due to the loss of functional capacity for a period expected to last at least 90 days.
- A Licensed Health Care Practitioner must certify that the Insured requires substantial supervision to protect him or herself from threats to health and safety due to the presence of a Cognitive Impairment.

This written certification must be renewed and submitted to us every 12 months, otherwise Accelerated Benefit payments under this rider will discontinue on the first day following the expiry of the 12 month period.

## 8. **LIMITATIONS AND EXCLUSIONS**

In addition to the Conditions set forth above, the following limitations and exclusions apply to the rider.

(a) **Exclusions.** Qualified Long-Term Care Services do not cover care or treatment:

- for intentionally self-inflicted injury.
- required as a result of alcoholism or drug abuse (unless drug abuse was a result of the administration of drugs as part of treatment by a Physician).
- due to war (declared or undeclared) or any act of war, or service in any of the armed forces or auxiliary units.
- due to participation in a felony, riot or insurrection.
- for which no charge is normally made in the absence of insurance.
- provided by a member of the Insured 's Immediate Family.
- provided outside the fifty United States and the District of Columbia.

(b) **Non-Duplication of Benefits.** Qualified Long-Term Care Services do not include charges covered under any of the following:

- Medicare (including amounts that would be reimbursable but for the application of a deductible or coinsurance amounts).
- any other governmental program (except Medicaid).
- any state or federal workers' compensation, employer's liability or occupational disease law, or any motor vehicle no-fault law.

(c) **Charges not Covered.** We will not pay for any of the following: Physician's charges; hospital and laboratory charges; prescription or non-prescription medication; medical supplies; durable medical equipment; transportation; and items and services furnished for beautification, comfort, convenience or entertainment of the Insured.

**THE RIDER MAY NOT COVER ALL THE EXPENSES ASSOCIATED WITH YOUR LONG-TERM CARE NEEDS.**

9. **RELATIONSHIP OF COST OF CARE AND BENEFITS**

Because the costs of long-term care services will likely increase over time, you should consider whether and how the benefits of this rider should be used. ***This rider does not include inflation protection coverage.*** Increases and decreases to the Death Benefit of the policy resulting from the exercise of your rights thereunder, including your right to make policy loans and partial withdrawals, will cause a change in the Maximum Monthly Benefit Amount and the Death Benefit.

10. **ALZHEIMER'S DISEASE AND OTHER ORGANIC BRAIN DISORDERS**

We cover brain disorders with demonstrable organic cause (including Alzheimer's Disease and similar forms of senility and irreversible dementia) that result in the Insured's Cognitive Impairment.

11. **LONG-TERM CARE RIDER CHARGE**

The total rider charge for the long-term care rider is equal to \$\_\_\_\_\_ per month.

12. **ADDITIONAL FEATURES**

- (a) Issuance of this coverage may depend upon certain medical information about the Insured. This is generally known as medical underwriting.
- (b) The rider provides added protection against lapse. If this rider terminates while the Insured would otherwise meet the eligibility criteria set for in the provision "Eligibility for the Payment of Benefits", this rider may be reinstated, if you so request, within 5 months of the date of termination if all the following conditions are met:
  - the policy is reinstated in accordance with its reinstatement provision;
  - you furnish us with satisfactory proof that the Insured would have qualified for benefits (if not for the Elimination Period) on the date of termination; and
  - all overdue rider charges are paid.