Accelerated Access Solution®

Frequently Asked Questions

American General Life Insurance Company

1. Does a chronic illness need to be permanent in order to access the Accelerated Access Solution® (AAS) benefit?

No, thanks to a change in accelerated benefit regulations, which allowed the permanency requirement to be removed from chronic illness riders, AAS benefits can be accessed so long as a licensed healthcare practitioner certifies that the insured has met one of the following criteria for at least 90 consecutive days (except California):

- Unable to perform 2 out of 6 Activities of Daily Living: bathing, dressing, toileting, transferring, continence and eating.
- Diagnosed with a qualifying cognitive impairment (such as Alzheimer's Disease)

Does that mean that an injury resulting from an accident that is not "life-long" would be covered under this rider?

Yes! Even if a chronic illness resulted from an accidental injury, so long as all of the rider eligibility requirements are met (i.e. satisfies definition of chronically ill and satisfies 90 day elimination period, etc.), you can receive the AAS rider benefit.

2. What are some key features that differentiate the AAS chronic illness rider from a traditional long-term care rider?

FEATURE	AAS Chronic Illness Rider	Traditional Long-term Care Riders
Diagnosis	Severe cognitive impairment or unable to perform at least 2 of the 6 Activities of Daily Living (ADLs) as certified by a licensed healthcare practitioner	Severe cognitive impairment or unable to perform at least 2 of the 6 Activities of Daily Living (ADLs) as diagnosed by a carrier-designated examiner
Duration	At least 90 consecutive days (except California) (Permanency NO longer required)	At least 90 days
Benefit Payment Types	Indemnity – full monthly benefit paid to insured every month they qualify. Unrestricted use of funds.	Reimbursement (receipt required) or Indemnity
Benefit Types	Face amount acceleration	Face amount acceleration and/or LTC
Benefit Payment Options	Multiple benefit payment options - • Lump-sum payments (paid annually, and reflects the present value of monthly payments for the upcoming year) • IRS maximum per diem* amount at the time claim begins (paid monthly) *Not available in California • 4% of the AAS benefit per month (paid monthly) • 2% of the AAS benefit per month (paid monthly)	Tax favored if meet IRS per diem requirements and amounts above IRS limits are also not taxable if reimbursement or proof is provided of expenses being related to the condition.
Claims	Waives both base policy and rider charges while on an AAS claim, with no short-term claims catch up provision	Carrier predetermined limit for reimbursement riders
Care Coordination Services	Choice of care is up to the insured, Care Coordination Program available at no additional cost and participation is optional	Some form of care coordination assistance is provided by most carriers; costs vary
Policy Premiums Paid by Owner	Fixed number of years	Lifetime
Policy Cash Values	Potentially builds cash value every year until you surrender	Potentially builds cash value every year until you surrender
Benefit amount if NO chronic illness incurred	The entire face amount of your base policy, i.e. your original life insurance benefit amount	The entire face amount of your base policy, i.e. your original life insurance benefit amount

3. The Accelerated Access Solution is available with what policies?

The Accelerated Access Solution is currently available on QoL Value+ Protector III, QoL Max Accumulator+ III and QoL Guarantee Plus GUL II policies. The maximum underwriting classification is Table D - not available with a flat extra rating.

4. What if I suffer more than one Chronic Illness event, may I access both the AAS and the QoL Chronic Illness rider?

Yes, you may access both riders for qualifying Chronic Illnesses up to 100% of the death benefits ($3M on AAS and $2M on the QoL Chronic Illness Rider) for a combined maximum of $3M.

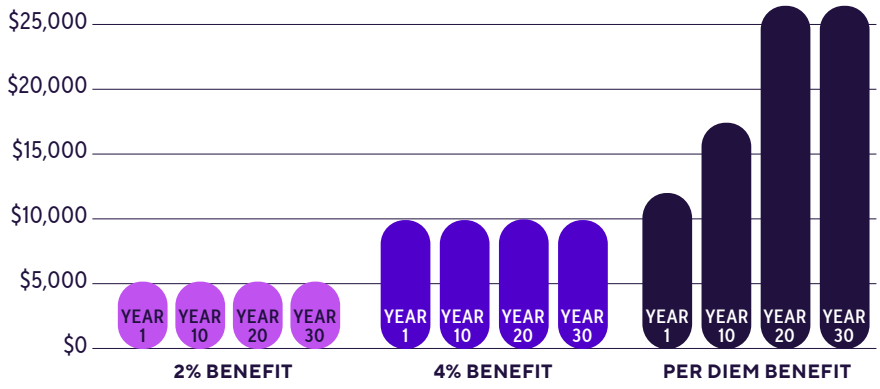
5. What is the benefit of having an IRS per diem benefit payout option?[1]

Most chronic illness riders on the market offer either a fixed maximum payout option (typically 2% or 4% of the death benefit) which must be selected at the time of purchase. This locks you into fixed payouts whenever you go on claim.

An alternative with the AAS is the IRS per diem payout option. This feature allows you to purchase just the amount of coverage needed – no more and no less. AAS is the only product currently in the market providing the maximum monthly benefit allowable by law (the per diem) in an indemnity policy with tax-free benefits. AAS also offers the traditional 2% and 4% payout options for a total of 3 payout options to choose from.

The 2026 IRS per diem is $13,079/month. The hypothetical comparison below showcases the 3 payout options for a $250,000 chronic illness benefit projecting 1, 10, 20 and 30 years from now, increasing at 4% per year. The monthly benefit to the owner grows substantially when they have the IRS per diem option as compared a 2% or 4% option offered by other carriers as their only options. The maximum payout per year with the 2% or 4% options is capped and is not flexible.

Activation at Years 1, 10, 20, 30



NOTE: IRS caps the maximum daily rate each year. For 2026, the maximum per diem is $430/day or $13,079/month (monthly average based on 365 days a year). In the chart to the left, hypothetical per diem increases based on 2026 IRS per diem in year 1, and increasing 4% each year thereafter. Whether or not the IRS per diem limit will change over time is not guaranteed. Hypothetical representation is for illustrative purposes only.

6. Are there any restrictions on foreign residence/travel and AAS?

Although you do not have to live in the U.S. at time of claim to receive benefits, the claim must be certified by a U.S. physician practicing in the state where the physician is licensed. Since AAS is an indemnity plan, benefit payments can be made anywhere. Please note AAS is not available to Category 3 foreign nationals (Non-Resident Aliens living outside the U.S. or holding unaccepted visa types).

7. How much am I required to purchase, or what are my AAS coverage options?

When purchasing an AAS rider, you have the option to choose anywhere from 50% to 100% of the life insurance benefit amount of the base policy (maximum $3M death benefit). This is a valuable feature for those that don't need to use their full life insurance benefit amount through their chronic illness (CI) rider. For example, if you purchased a $1M policy, and didn't need the full $1M for the CI benefit, you can choose between $500,000 – $1,000,000 to meet your needs.

8. How does the waiver of monthly deductions work when I'm on an AAS claim?

Another feature of AGL's chronic illness rider is that while on an AAS claim, your monthly deductions for both the entire base policy and all riders are waived. If you decide to continue paying premiums while taking the AAS benefit, the Waiver of Monthly Deduction will still be in effect and deductions will be waived.

[1] All states where sold, except CA.

9. Can the Accelerated Access Solution rider be canceled or terminated by American General Life on an inforce policy?
No, the rider cannot be canceled or terminated by American General Life on an inforce policy. It will remain in force as long as the required premiums are paid.

10. What happens if the policy lapses? Can it and the rider be reinstated?
Yes, if the policy and the rider terminate at the same time, and the policy is reinstated, the Accelerated Access Solution will also be reinstated, subject to evidence of insurability. Also note that while on claim American General Life waives all monthly deductions so if you come off claim you do not owe any back charges which decreases the likelihood of the policy lapsing.

11. What happens if the rider termination was the result of Severe Cognitive Impairment?
In that instance American General Life will not require evidence of insurability as long as American General Life receives your written request to reinstate within 5 months of the termination (refer to policy for more details).

12. What happens to my policy after coming off an AAS claim?
Upon returning to active plan status, remaining premiums paid will be based upon the remaining life insurance benefit left in your plan. Remaining premiums would still be actively participating in the policy and could potentially receive interest credits. Future plan administration would be handled by AGL Claims. Visit our consumer portal for support.

If you are initially eligible for benefits (i.e. satisfy the definition of "Chronically Ill," and satisfy the 90-day elimination period, etc.) and then subsequently recover, a new elimination period will apply if the number of days that has passed since the end of the last benefit period and the date of the new certification for Chronic Illness is greater or equal to 30 days.

13. When purchasing an increasing death benefit (Option B) **on an IUL, what happens to the chronic illness benefit?**
The lifetime maximum benefit for the Accelerated Access Solution rider equals the selected percentage (2%, 4%, or IRS per diem[2])multiplied by the base policy life insurance benefit at the time all of the conditions in the Eligibility for Benefits provision are first satisfied. Therefore, for IUL policies using Option B (or increasing benefit), the maximum chronic illness benefit under the AAS rider will also increase, up to the $3M lifetime cap. Some carriers will cap their chronic illness/LTC rider benefit at the initial life insurance benefit and it will not grow with the increase in their policies' benefit amount.

[2] All states where sold, except CA.

Important Consumer Disclosures Regarding Accelerated Benefit Riders
Disclosures Solely Applicable to Quality of Life...Insurance® Riders:

- **Critical Illness Accelerated Death Benefit rider**
- **Chronic Illness Accelerated Death Benefit rider**
- **Terminal Illness Accelerated Death Benefit rider**

(1) When filing a claim for Qualifying Critical Illness under a Critical Illness Accelerated Death Benefit Rider, for Qualifying Chronic Illness under a Chronic Illness Accelerated Death Benefit Rider or for Qualifying Terminal Illness under a Terminal Illness Accelerated Death Benefit Rider, the claimant must provide to the Company a completed claim form and then-current Certification which must be received at its Administrative Center.

(2) If a benefit under the Critical Illness Accelerated Death Benefit Rider is payable, the Company will provide the Owner with one (1) opportunity to elect a Critical Illness Accelerated Benefit Amount as to the occurrence of the Qualifying Critical Illness in question. To make such an election, the Owner must complete an election form and return it to AGL within the Election Period set forth in the rider (i.e., within 60 days of the owner's receipt of the election form).

The Company will not provide a later opportunity to elect a Critical Illness Accelerated Benefit Amount under a Policy as to the same occurrence of a Qualifying Critical Illness.

(3) If a benefit under the Chronic Illness Accelerated Death Benefit Rider or under the Terminal Illness Accelerated Death Benefit Rider is payable, the Company will provide the Owner with an opportunity to elect a Chronic Illness Accelerated Benefit Amount as to the Qualifying Chronic Illness in question or to elect a Terminal Illness Accelerated Death Benefit Amount as to the Qualifying Terminal Illness in question, as applicable. To make an election, the Owner must complete an election form and return it to AGL within 60 days of the Owner's receipt of the election form.

(4) **Under certain circumstances where an insured's mortality (i.e., our expectation of the insured's life expectancy) is not significantly changed by a Qualifying Critical Illness or a Qualifying Chronic Illness and, notwithstanding the Minimum Accelerated Benefit Amount provision, the accelerated benefit may be zero.**

(5) Any actual benefit amount will be determined at the time of claim and will be subject to underwriting requirements, an actuarial discount, and all limitations and other terms of the applicable rider. See your policy for applicable requirements concerning claim and election forms for accelerated death benefits.

(6) Benefits payable are intended to receive favorable tax treatment under IRC Section 101(g); however, under certain circumstances, the benefits payable may be taxable. Neither American General Life Insurance Company nor any agent representing it is authorized to give legal or tax advice. Please consult a qualified legal or tax advisor regarding questions concerning the information and concepts contained in this material.

(7) Generally, we will send you an IRS Form 1099-LTC if you receive an accelerated death benefit on account of a Chronic Illness or a Terminal Illness. We will send you an IRS Form 1099-R if you receive an accelerated death benefit on account of a Critical Illness. The sum that will be included in Box 2 (Accelerated death benefits paid) of IRS Form 1099-LTC or in Box 1 (Gross distribution) of IRS Form 1099-R will be the actual sum you received by check or otherwise minus any refund of premium and/or loan interest included with our benefit payment plus any unpaid but due policy premium, if applicable, and/or pro rata amount of any loan balance.

(8) The maximum amount of life insurance death benefits that may be accelerated as to an Insured Person under all accelerated benefit riders is the lesser of the existing amount of such death benefits or a lifetime maximum of $2,000,000.

(9) See your policy for details.

Disclosures Applicable to All Chronic Illness Accelerated Death Benefit riders

NOT Long-Term Care Insurance

This is a life insurance benefit that also gives you the option to accelerate some or all of the death benefit in the event that you meet the criteria for a qualifying event described in the policy. This policy or certificate does not provide long-term care insurance subject to California long-term care insurance law. This policy or certificate is not a California Partnership for Long-Term Care program policy. This policy or certificate is not a Medicare supplement policy.

The Accelerated Access Solution (AAS) is an optional living benefit rider that is available on the insurance policy issued by American General Life Insurance Company (AGL), Houston, TX except in New York, where issued by The United States Life Insurance Company in the City of New York (US Life). The Accelerated Access Solution is a life insurance rider that accelerates a portion of a policy's death benefit upon the insured's not being able to perform two or more of the activities of daily living or being cognitively impaired. The activities of daily living are bathing, continence, dressing, eating, toileting, and transferring.[3] Unlike Long-Term Care benefits, control over how money is spent is up to the policy holder: There are no receipts required and no restrictions on what the money is used for once the policy owner has been certified as eligible to receive AAS benefits. Benefits are paid directly to the policyholder for as long as the criteria are met, or until the AAS benefit amount is exhausted, whichever occurs first.

Acceleration of death benefits and payments under such an accelerated death benefit will reduce the death benefit of the policy and reduce other policy values as well, potentially to zero. If the entirety of the insurance amount is accelerated, the policy terminates.

A Long Term Care insurance (LTCI) policy is any insurance policy, certificate, or rider providing coverage for diagnostic, preventive, therapeutic, rehabilitative, maintenance, or personal care services that are provided in a setting other than an acute care unit of a hospital. Generally, accelerated chronic illness death benefit riders and LTCI is conditioned upon the insured not being able to perform two or more of the activities of daily living or being cognitively impaired. The activities of daily living are bathing, continence, dressing, eating, toileting, and transferring.[3] LTCI includes disability based long-term care policies but does not include insurance designed primarily to provide Medicare supplement or major medical expense coverage.

If you are interested in long-term care, nursing home or home care insurance, you should consult with an insurance agent licensed to sell that insurance, inquire with the insurance company offering the accelerated death benefits.

Receipt of accelerated death benefits may affect eligibility for public assistance programs, such as Medi-Cal (in California) or Medicaid (all other states). Prior to electing to receive the accelerated death benefit, you should consult with the appropriate social services agency concerning how receipt of accelerated death benefits may affect that eligibility.

If the policy terminates, the Chronic Illness Accelerated Death Benefit Rider will also terminate.

ADB benefits will reduce the death benefit that the policyholder's heirs will receive, and the use of the ADB proceeds is unrestricted, whereas LTC benefits will not reduce the death benefit that the policyholder's heirs will receive, and the policyholder must use LTC benefits for LTC services.

Payout Options

All states except California. Three monthly benefit options are available. Monthly benefit under any option is capped at the maximum IRS per diem amount at the time claim begins.

- 2% of the AAS benefit
- 4% of the AAS benefit
- IRS maximum per diem

California ONLY. Two monthly options are available. Monthly benefit under any option is capped at the maximum monthly benefit amount under the policy at the time claim begins.

- 2% of the AAS benefit
- 4% of the AAS benefit

Alternatively, in all states, you have the option at the time of claim to receive the accelerated benefit in a lump sum payment in lieu of the benefits payable under the monthly payment option you selected. Such lump sum benefit will be subject to a present value discount that is determined by the company at

the time you become eligible for benefits under the rider.

Benefit Payment

Once the insured meets the health impairment criteria and benefits have been approved for payment, they may select their disbursement. There is a maximum benefit payable under the monthly disbursement option that we'll notify the insured of at their time of claim. The insured may also select a smaller amount than the maximum monthly benefit. A lump sum option is available as well, which can be substituted for monthly benefits.

Tax Implications

There are no restrictions or limitations on the use of the accelerated death benefit proceeds under a Chronic Illness Accelerated Death Benefit Rider. The accelerated benefits payable under such a rider are generally intended for favorable tax treatment under Section 101(g) of the Internal Revenue Code[3]. There may be tax consequences in some situations in accepting an accelerated benefit payment amount, such as where payments exceed the per diem limitation under the Internal Revenue Code. You should consult your personal tax advisor to assess the impact of this Benefit prior to accepting the Benefit.

Please note: The life insurance offered with Accelerated Benefit Riders is not stand-alone long term care insurance, disability income insurance, or other insurance designed to cover specific costs associated with an illness or condition. Receiving benefits under any one of the Accelerated Benefit Riders will reduce the amounts available for future acceleration under it and any of the others. It will also reduce the base life insurance benefit and the funds available to supplement retirement or other needs and may result in policy termination. The amount received after acceleration may be less than what is needed to cover all of the cost associated with an illness or condition.

[3] Insured must be certified as chronically ill by a Licensed Health Care Practitioner and meet all eligibility requirements and the condition need not be permanent.

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Policies issued by **American General Life Insurance Company** (AGL), Houston, TX. Policy Form Numbers ICC16-16760, 16760, ICC22-22191, 22191, 22476-5, ICC15-15442, 15442; Rider Form Numbers ICC23-23600, 15600, 13600-5. **AGL does not solicit, issue or deliver policies or contracts in the state of New York**. Guarantees are backed by the claims-paying ability of the issuing insurance company and each company is responsible for the financial obligations of its products. Products may not be available in all states and features may vary by state. Please refer to the policy for more information.

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