

What is long term care insurance?

Long term care insurance is designed to help pay for the cost of services you may need to help with some of the everyday activities we often take for granted, like eating, bathing or dressing, on a long term basis. Long term care insurance covers care generally not covered by medical insurance, Medicare or Medicaid. It will not cover doctor visits, hospital costs, pharmacy costs or any other cost to treat an injury or illness.

People often confuse *long term care* insurance with *long term disability insurance*. Such long term disability coverage provides income protection to help you cover daily expenses such as rent, utilities, and food, rather than long term care with daily activities.

What does long term care insurance cover?

Long term care insurance covers care received in a nursing or assisted living facility, at home, or in community settings like adult day care centers. The plan also has features that may help you stay in your own home, such as benefits that help reimburse the costs for informal care, home modifications, caregiver training and in home monitoring systems, as well as a respite care benefit.

When you enroll, you will need to make three coverage decisions:

- Monthly Benefit period: 2, 3 or 4 years
- Monthly benefit amount: \$3,000, \$ \$4,500 or \$6,000
- Benefit Increase Option: Future Benefits Increase, 3% compound & 5% compound

Who should consider long term care insurance?

Regardless of age, anyone could suddenly be in a situation where long term care services are needed. A broken bone, a chronic disease, or a cognitive impairment such as Alzheimer's disease could mean months or even years of ongoing care. Long term care insurance is specifically designed to help pay for this kind of care.

Should I wait until I am older to buy it?

Long term care insurance premiums are based on your age when you apply; so typically, the younger you are the lower your premiums will be. A second reason not to wait is that an accident or illness requiring long term care services could happen at any time. If this happens, it may not be possible to meet the underwriting requirements for coverage in the future.

How do I pay for long term care?

You will pay your premiums via direct bill when your premiums are due. LTC is considered a voluntary benefit where your premiums are paid to Genworth directly using post-tax money. The program is a federally qualified long term care insurance contract. Your benefits are not taxable as income.

Who is eligible to apply for coverage?

You are eligible for this long term care insurance program if you are:

- An actively at work employee working full-time scheduled to work at least 24 hours per week or a part-time employee
- A family member, age 18 to 75, of an eligible employee, including:
 - Spouses or domestic partners
 - Adult children, step-children and adopted children
 - Adult siblings, step-siblings and siblings-in-law
 - Parents, parents-in-law, step-parents, step-parents-in-law
 - Grandparents, grandparents-in-law, step-grandparents and step-grandparents-in-law

All applicants must maintain a permanent US residence and have a valid Social Security number or Tax Identification number. Please note family members may only apply with **full medical underwriting** to receive the group rates.

When is the Chubb Group Long Term Care Insurance Program available?

A New Hires, full-time employee, age 18-65, have the opportunity to enroll within 31 days of hire date through a Modified Guaranteed Issue Comprehensive application.

If you are outside of the enrollment period, you can still enroll for coverage and will need to complete a full underwriting form that requires medical records and paramedical exams, a functional/cognitive assessment, and a phone health interview.

Part-time employees, working less than 24 hours, full time employees age 66+ and all other eligible individuals, (parents, parents-in-law, grandparents, grandparents-in-law, siblings, and adult children) can apply **anytime**, with full underwriting.

Do I have to apply in order for my spouse/domestic partner, parents, or other family members to get coverage?

No, eligible family members can apply for coverage whether or not the eligible employee applies.

When is the policy effective?

The group policy is effective on the first of the month following the coverage approval date. You will receive a Certificate of Coverage from Genworth shortly after you have been approved for coverage.

How do I apply for coverage?

You will enroll on-line through www.genworth.com/Chubb. The site also contains interactive tools to provide you with more information about Long Term Care Insurance, and to help you understand the coverage options that are available.

Where can I receive more information?

You can contact one of the Genworth program experts at 1-800.416.3624: Monday through Friday, 8:00 a.m.– 8:00 pm ET.

You can also request an enrollment kit be mailed to your home, if you prefer to complete through a paper application.

When will this Program pay benefits?

Benefits become payable under this program when:

- You need help with at least two “activities of daily living” and will likely need it for at least 90 days, **OR**
- You are diagnosed with a cognitive impairment that requires supervision, AND
- A medically licensed healthcare professional certifies that your condition qualifies you.

The Activities of Daily Living are eating, dressing, continence, transferring, bathing, and toileting.

In addition, the elimination period must be satisfied, and you must be receiving covered services under a plan of care prescribed by a Licensed Health Care Practitioner. Further information can be found on the Outline of Coverage provided on the Genworth website.

What if I currently have a Long Term Care insurance policy?

The coverage for those currently enrolled with a legacy LTC policy (LChubb John Hancock, Genworth, LACE CNA) will remain in place without disruption. If not, you should include but then the payroll deduction comment would not apply) will continue. It may not be advantageous to drop your policy and switch to Genworth, but you may want to review your options or consider adding more coverage for yourself or encouraging other family members to apply with Genworth. You don't need be insured with Genworth in order for other family members to be eligible to apply.

Can premiums go up in the future? If so, under what circumstances?

No insurance company can guarantee that premiums will *never* increase. Genworth Life Insurance Company has priced this coverage conservatively to help avoid future rate increases; however, it does retain the right to raise premiums in the future.

How long do I need to pay my premiums?

You will continue to pay your premiums as long as you want to keep your insurance in-force. Premium payments will stop if you lapse coverage or exhaust the benefits or "pool of money" available under the plan.

What happens if the premium is not paid on time?

An initial period of 31 days will be granted for each premium that is unpaid on the date due. If premium has not been paid by the end of that 31-day period, Genworth Life will send a notice to the Policyholder or to the insured person explaining that a payment has been missed and that coverage is in danger of lapsing. The notice will provide an additional 35 days to pay the unpaid premium beginning on the date the notice is mailed.

If premiums are paid to Genworth Life directly and the insured person has designated an individual to be notified in case of lapse, Genworth Life will also send notice to the designee at the address provided.

Payment will allow coverage to continue in force without interruption. Failure to pay any unpaid premium by the end of the Grace Period will result in the termination of coverage as of the date the premium was initially due.

What is the requirement for coverage to go into effect?

An eligible employee must be actively at work for at least 30 days before coverage can go into effect. If an eligible new hire applies before completing at least 30 days of employment, the coverage will not become effective until after the 30 day requirement is met.

Once I am receiving benefits under the plan, do I continue to pay premiums?

No. Premium payments will be waived while you are receiving benefits under the Nursing Facility or Assisted Living Facility Benefit, Bed Reservation Benefit, Home and Community Care Benefit or Hospice Care Benefit.

Can I cancel my coverage at any time?

Yes, you can cancel your coverage at any time by notifying Genworth in writing.

How is a claim filed?

When you receive your certificate of coverage, you will receive a toll free number to contact Genworth Life claim services. Should the need for a claim arise, you or your representative should call that number. After speaking with an intake analyst, you will be contacted by a member of the Care Coordination team. The Genworth Care Coordination team can help in developing your plan of care, providing information on available long term care resources in your area, and may set up a face-to-face meeting and conduct a needs assessment.

What happens to my coverage if I leave Chubb?

Your coverage is fully portable which means that it continues according to its terms as long as you pay your premium on time.