Carrier Name Product Name Type of Coverage	Global Atlantic ForeCare	Lincoln Financial	Lincoln Financial	
	lolectie	MoneyGuard Market Advantage	MoneyGuard II 2020	
	LTC	LTC	LTC	
LTC License Required?	Yes	Yes	Yes	
Product Type	Fixed Annuity	Variable Universal Life	Universal Life	
Issue Ages	50 - 80	30-70	40 - 70	
Couple's Discount	Yes. Both partners must apply	Yes Both partners need not apply	Yes. Both partners need not apply	
Minimum Death Benefit	\$35,000	\$50,000	\$50,000	
Maximum Death Benefit	Single Insured: \$400,000 Joint Insured: \$600,000	\$500,000	2-year Initial LTC Benefit Period: \$500,000 3-year Initial LTC Benefit Period: \$750,000	
Benefit Duration	Single Standard: 72 Months Single Premier: 72 Months Joint Standard: 84 Months Joint Premier: 90 Months	Base (Guaranteed): 36 Months Extension of benefit duraiton is based on market performance.	24 Months 36 Months 48 Months 60 Months 72 Months 84 Months	
Lifetime Benefits	No	No	No	
Underwriting Type	Simplified	Simplified	Simplified	
Phone Interview	Cognitive interview only for applicants over 70	Yes, eInterview also available, cognitive only for those over age 60	Yes	
Medical Records	No	No	No	
Paramed	No	No	No	
Underwriting Classes	Standard (x2 leverage) Premier (x3 leverage)	Couple Standard	Couple Standard	
Benefit Type	Reimbursement	Reimbursement; Flex Care Cash offers 50% of daily benefit as cash benefit	Reimbursement	
Premium Duration	Single Premium	Single Premium Recurring Premium design allows for premiums to be paid at any time up to age 75 without underwriting. Any premium paid that increases the LTC Benefit will be subject to underwriting if the policy is past year 15, or the insured has passed attained age 75 (whichever is later)	Single Premium Recurring Premium up to 25 years; based on age at time of issue	
LTC Premium Tax Deductibility	No	No	No	
Qualifications	Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.	Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.	Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.	
Benefit Uses	Qualified, documentable long-term care expenses	Qualified, documentable long-term care expenses, except for Flex Care Cash which has no restrictions	Qualified, documentable long-term care expenses	
Elimination Period	Home Health: 0 Days All Other Services: 90 Days	All Services: 0 Days	All Services: 0 Days	
Inflation Options Available	5% Compound	Market Driven 5% Compound	3% Compound 5% Compound	
Retum of Premium	No	No; Based on underlying cash surrender value	Basic: 80% all years after premium is paid Vested: 100% starting year 6	
Residual Death Benefit	N/A	Lesser of 5% of initial Specified Amount or \$10,000	Lesser of 5% of initial Specified Amount or \$10,000	
Waiver of Premium	No	No	No	
Waiver of Policy Charges	Yes	No	No	
International Benefits	None	100% up to 36 months Type of Care: Facility only	Base Policy: 100% Extension: 0% Type of Care: Facility only	
	Please see the LTC and C	 Foreian National & Foreian Travel Details Cheat SI	peet for additional details	
	Non-Qualified Funds: Yes	Non-Qualified Funds: Yes	Non-Qualified Funds: Yes	
Source of Funds	Qualified Funds: No	Qualified Funds: Indirectly (via SPIA, etc.)	Qualified Funds: Indirectly (via SPIA, etc.)	
States Not Available	NY, CT	CA, DC, MT, VI	Only available in CA	
Additional Details	No Return of Premium; Cash Surrender Value only. In most cases, the Cash Surrender Value is no less than the initial premium, less costs incurred for optional Inflation Protection. The Cash Surrender Value is subject to Market Value Adjustment.	Effective May 10, 2021, issue ages for MoneyGuard Market Advantage® in Washington are now 40-70.		

	Lincoln Financial	Lincoln Financial	Nationwide	
Carrier Name Product Name	MoneyGuard III 2020	MoneyGuard NY	YourLife CareMatters	
Type of Coverage	LTC	LTC	LTC	
LTC License Required?	Yes	Yes	Yes	
Product Type	Universal Life	Universal Life	Universal Life	
Issue Ages	40 - 80	40 - 79	Single Premium: 40 - 69	
Couple's Discount	Yes. Both partners need not apply	No	Recurring Premium: 40 - 75 Yes. Both partners need not apply	
Minimum Death Benefit	\$50,000	\$75,000	2-year Initial LTC Benefit Period: \$60,000	
Maximum Death Benefit	\$500,000	2-year Initial LTC Benefit Period: \$500,000	3-year Initial LTC Benefit Period: \$90,000 2-year Initial LTC Benefit Period: \$500,000	
Maximum Deam Beneiii	36 Months 48 Months 60 Months	3-year Initial LTC Benefit Period: \$750,000 24 Months 36 Months 48 Months	3-year Initial LTC Benefit Period: \$750,000 24 Months 36 Months 48 Months	
Benefit Duration	72 Months 84 Months	60 Months 72 Months 84 Months	46 Months 72 Months 84 Months	
Lifetime Benefits	No	No	No	
Underwriting Type	Simplified	Simplified	Simplified	
Phone Interview	Yes	Yes	Yes	
Medical Records	No	No	No	
Paramed	No	No	No	
Underwriting Classes	Couple Standard	Couple Standard	Non-Tobacco Couple Non-Tobacco Single Tobacco Couple Tobacco Single	
Benefit Type	Reimbursement	Reimbursement	Cash Indemnity	
Premium Duration	Single Premium Recurring Premium up to 40 years; based on age at time of issue	Single premium 3-Pay 5-Pay 7-Pay 10-Pay	Single Premium 5-pay 10-pay	
LTC Premium Tax Deductibility	No	No	No	
LIC FIEITIOTH TOX Deductibility	Unable to perform 2 of 6 ADL's, or needs	Unable to perform 2 of 6 ADL's, or needs	Unable to perform 2 of 6 ADL's, or needs	
Qualifications	"substantial supervision" due to cognitive impairment.	"substantial supervision" due to cognitive impairment.	"substantial supervision" due to cognitive impairment.	
Benefit Uses	Qualified, documentable long-term care expenses	Qualified, documentable long-term care expenses	No restrictions	
Elimination Period	All Services: 0 Days	All Services: 90 Days	All Services: 90 Days	
Inflation Options Available	3% Compound 5% Compound	Initial LTC Benefit Period: Extension of Benefit 3% Simple Rider: 3% Simple 3% Simple 5% Compound	3% Simple 5% Compound	
Return of Premium	Basic: 70% all years after premium is paid Vested: 100% starting year 10	Single Premium: 100% all years Recurring Premium: None	Single Premium: Vested; 100% starting year 6 Recurring Premium: 100% after all premiums are paid	
Residual Death Benefit	Lesser of 5% of initial Specified Amount or \$10,000	10% of initial Specified Amount	20% of initial Specified Amount	
Waiver of Premium	No	No	No	
Waiver of Policy Charges	No	No	No	
International Benefits	100% up to 36 months Type of Care: Facility only	Base Policy: 100% Extension: 100% Type of Care: Facility only	Base Policy: 50% Extension: None Type of Care: No restrictions	
	Please see the LTC and C	 Foreian National & Foreian Travel Details Cheat	 Sheet for additional details	
	Non-Qualified Funds: Yes	Non-Qualified Funds: Yes	Non-Qualified Funds: Yes	
Source of Funds	Qualified Funds: Indirectly (via SPIA, etc.)	Qualified Funds: Indirectly (via SPIA, etc.)	Qualified Funds: Indirectly (via SPIA, etc.)	
States Not Available	CA, NY	Available only in NY	MT	
Additional Details	Terminal Illness Rider: one-time payment for 25%	Terminal Illness Rider: one-time payment no less	Terminal Illness Rider: one-time payment no less	

Carrier Name	Nationwide	OneA	merica	OneA	merica	
Product Name	Nationwide CareMatters II	Asset Care		Asset Care 1		
Type of Coverage	LTC	LTC	T Caro	LTC	Caron	
LTC License Required?	Yes	Yes		Yes		
Product Type	Universal Life		(no assumed dividends)	Interest Sensitive Whole Life		
Issue Ages	30 - 75			Single: 35 - 80 Joint: 35 - 80		
Couple's Discount	Yes. Both partners need not apply	No		No	No	
Minimum Death Benefit	\$60,000	\$50,000		No Minimum Death Benefit Minimum Premium \$10,000		
Maximum Death Benefit	\$500,000	\$1,500,000		\$1,500,000	·	
Benefit Duration	24 Months 36 Months 48 Months 60 Months 72 Months 84 Months	Single Life: 25 months 33 months 50 months 66 months 75 months 100 months Lifetime	Joint Life: 33 months 50 months 66 months 100 months Lifetime	Single Life: 25 months 33 months 50 months 66 months 100 months Lifetime	Joint Life: 33 months 50 months 66 months 100 months Lifetime	
Lifetime Benefits	No	Yes		Yes		
Underwriting Type	Simplified	Simplified		Simplified		
Phone Interview	Yes	Yes		Yes		
Medical Records	No	Only for cause		Only for cause		
Paramed	No	Full Underwriting only		Full Underwriting only		
	Non-Tobacco Couple	Preferred Tobacco		Preferred (Non-Smoker) Standard (Smoker)		
Underwriting Classes	Non-Tobacco Single Tobacco Couple	Preferred Tobacco Standard Non-Tobacco		Standard (Smoker) Preferred (Non-Smoker)	Table 5 - 8	
	Tobacco Couple Tobacco Single	Standard Tobacco	,	Standard (Smoker) Tab		
Benefit Type	Cash Indemnity	Reimbursement		Reimbursement		
	Single Premium	Single Premium		Base Policy:	COB Rider:	
	5-Pay	5-Pay		Single Premium	Single Premium	
	10-Pay	10-Pay			10-Pay	
Premium Duration	Pay to 65 (ages 30 - 54)	20-Pay			20-Pay	
	Pay to 100 (ages 30 - 65)	Pay to 95			Pay to 100	
LTC Premium Tax Deductibility	Yes	Yes		Yes		
	Unable to perform 2 of 6 ADL's, or needs		Unable to perform 2 of 6 ADL's, or needs		6 ADL's, or needs	
Qualifications	"substantial supervision" due to cognitive			"substantial supervision" due to cognitive		
	impairment.	impairment. i		impairment.		
Benefit Uses	No restrictions			Qualified, documentable long-term care expenses		
Elimination Period	All Services: 90 Days. Once met, LTC benefits for first 90 days are paid retroactively.			Home Health: 30 Days All Other Services: 90 Days		
Inflation Options Available	3% Simple 3% Compound 5% Compound Medical Inflation Index	5% Compound		Base Policy (state variations): 5% Simple 5% Compound	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound	
Return of Premium	Vested: *Single Premium & 5-Pay: 100% starting year 6 *10-pay & Pay to 65: 100% starting year 11 *Pay to 100: Not available One-Time Step Up: 80% year 1; 100% starting year 11 *Not available on Pay to 100 Minimum ROP/Max LTC: Cash Surrender Value only	Distinct product with full ROP on life, Acceleration of Benefit (AOB), and Continuation of Benefit (COB) premium. Must use 50 month AOB + 50 month COB. Does not apply to Inflation Protection premium.		Base Policy: Yes	COB: No	
Residual Death Benefit	20% of initial Specified Amount	None		None		
Waiver of Premium	Pay to 100: LTC premiums are waived; life insurance premium is due All other premium schedules: All premiums due, or insured may elect a reduced paid-up policy	Yes		Base Policy: No	COB: Yes	
Waiver of Policy Charges	No	Yes		No	1	
	Base Policy: 100%	CA:	All other states:	CA:	All other states:	
	Extension: None	Base: 100% for 12	Base: 50%	Base: 100% for 12	Base: 50%	
	Type of Care: No restrictions	months per insured	Extension: None	months per insured	Extension: None	
International Benefits		Extension: None	Type of Care: Facility	Extension: None	Type of Care: Facility	
		Type of Care: Facility	only	Type of Care: Facility	only	
	DI	Only Classian National & Foreign Travel Details Cheat S		only Shoot for additional details		
		CI Foreign National & Foreign Travel Details Cheat S				
Source of Funds	Non-Qualified Funds: Yes	Non-Qualified Funds: Yes		Non-Qualified Funds: Yes		
	Qualified Funds: Indirectly (via SPIA, etc.)	Qualified Funds: Yes		Qualified Funds: No		
States Not Available	NY, MT, CA	CA, NY		ONLY available in CA		
Additional Details	All benefit periods are build on a 2 year SAP (Specified Acceleration Period) Terminal Illness Rider: one-time payment no less than \$10K or more than \$250K, less any outstanding indebtedness.			 25 year maximum age range for joint insure Sunset of Asset Care 1 begins July 1, 2019. Please see official carrier communication for specific timelines by state 		

Carrier Name	OneA	merica	OneA	merica	OneA	merica	
Product Name	Asset	Care 2	Asset	Care 3	Asset	Care 4	
Type of Coverage	LTC		LTC		LTC		
LTC License Required?	Yes		Yes		Yes		
Product Type	Interest Sensitive Whole L	ife	Interest Sensitive Whole I	Life	Interest Sensitive Whole Life		
Issue Ages	Single: 59½ - 80		Single: 59½ - 80		Single: 20 - 80		
	Joint: 59½ - 80		Joint: 59½ - 80		Joint: 20 - 80		
Couple's Discount	No Minimum Death Benefit		No Minimum Death Benefit		No Ages 20-50: \$100,000		
Minimum Death Benefit	Minimum Premium \$20,0		Minimum Premium \$20,0		Ages 50+: \$50,000		
Maximum Death Benefit	\$1,500,000		\$1,500,000		\$1,500,000		
Benefit Duration	Single Life: 25 months 33 months 50 months 66 months 100 months Lifetime	Joint Life: 33 months 50 months 66 months 100 months Lifetime	Single Life: 25 months 33 months 50 months 66 months 100 months Lifetime	Joint Life: 33 months 50 months 66 months 100 months Lifetime	Single Life: 25 months 33 months 50 months 66 months 100 months Lifetime	Joint Life: 33 months 50 months 66 months 100 months Lifetime	
Lifetime Benefits	Yes		Yes		Yes		
Underwriting Type	Simplified		Simplified		Simplified		
Phone Interview	Yes		Yes		Yes		
Medical Records	Only for cause		Only for cause		Only for cause		
Paramed	Full underwriting only		Full underwriting only		Full Underwriting only		
Underwriting Classes	Preferred (Non-Smoker) Standard (Smoker) Preferred (Non-Smoker) Standard (Smoker) Table		Preferred (Non-Smoker) Standard (Smoker) Preferred (Non-Smoker) Standard (Smoker) Table		Preferred (Non-Smoker) Standard (Smoker) Preferred (Non-Smoker)	Preferred (Non-Smoker)	
Benefit Type	Reimbursement		Reimbursement		Reimbursement		
Premium Duration	Base Policy: NQ Annuity 1035 Life Insurance Cash Value 1035	COB Rider: Single Premium 10-Pay 20-Pay Pay to 100	Base Policy: Qualified Rollover	COB Rider: Single Premium 10-Pay 20-Pay Pay to 100	Base Policy: 10 - 20-Pay Pay to 100	COB Rider: Single Premium 10-Pay 20-Pay Pay to 100	
LTC Premium Tax Deductibility	Yes	1	Yes		Yes		
Qualifications	Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.		Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.		Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.		
Benefit Uses	Qualified, documentable long-term care expenses		Qualified, documentable long-term care expenses		Qualified, documentable long-term care expenses		
Elimination Period	Home Health: 30 Days All Other Services: 90 Days		Home Health: 30 Days All Other Services: 90 Days		Home Health: 30 Days All Other Services: 90 Days		
Inflation Options Available	Base Policy (state variations): 5% Simple 5% Compound Base Policy: Yes	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound COB: No	Base Policy (state variations): 5% Simple 5% Compound Base Policy: Yes	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound COB: No	Base Policy (state variations): 5% Simple 5% Compound Base Policy: Yes	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound COB: No	
Return of Premium			5550 / 5159, 155		333 (3.8), (3.		
Residual Death Benefit	None		None		None		
Waiver of Premium	Base Policy: No	COB: Yes	Base Policy: No	COB: Yes	Base Policy: Optional WOP Rider	COB: Yes	
Waiver of Policy Charges	No	<u> </u>	No	1	No	1	
International Benefits	CA: Base: 100% for 12 months per insured Extension: None Type of Care: Facility only	All other states: Base: 50% Extension: None Type of Care: Facility only	CA: Base: 100% for 12 months per insured Extension: None Type of Care: Facility only	All other states: Base: 50% Extension: None Type of Care: Facility only	CA: Base: 100% for 12 months per insured Extension: None Type of Care: Facility only	All other states: Base: 50% Extension: None Type of Care: Facility only	
			CI Foreign National & Foreign Travel Details Cheat S		Non-Qualified Funds: Yes		
Source of Funds	Non-qualified Annuity		Qualified Assets		Non-Qualified Funds: Yes Qualified Funds: No		
States Not Available	ONLY available in CA		ONLY available in CA		ONLY available in CA		
Additional Details		le range for joint insureds 2 begins July 1, 2019. 2 Sunset of Asset Care 3 Please see official carrier		. 25 year maximum age range for joint insureds 2. Sunset of Asset Care 3 begins July 1, 2019. 2. Sunset of Asset Care 4 begins July 1, 2019 pecific timelines by state 1. 25 year maximum age range for joint insureds 2. Sunset of Asset Care 4 begins July 1, 2019 please see official carrier communication for pecific timelines by state		4 begins July 1, 2019. er communication for	

Carrier Name	OneAmerica OneAmerica			OneAmerica			
Product Name	Annui	ty Care	Annui	ity Care II	Indexed /	Annuity Care	
Type of Coverage	LTC		LTC		LTC		
TC License Required?	Yes		Yes		Yes		
Product Type	Fixed Annuity		Fixed Annuity		Indexed Annuity		
ssue Ages	50 - 85		40 - 80		40 - 85		
Couple's Discount	No		No		No	No	
Minimum Death Benefit	No Minimum Death Bene		No Minimum Death Benefit		No Minimum Death Benefit		
	Minimum Premium \$10,0 No Maximum Death Ber		Minimum Premium \$10, No Maximum Death Be		Minimum Premium \$50,000 No Maximum Death Benefit		
Maximum Death Benefit	Maximum Premium \$500	0,000	Maximum Premium \$50	0,000	Maximum Premium \$500,000		
Benefit Duration	Single Annuitant: 36 months 72 months Lifetime	Joint Annuitants: 36 months 72 months Lifetime	Single Life: 24 months 60 months 96 months 132 months	Joint Life: 30 months 33 months 102 months 138 months	Single Life: 24 months 48 months 72 months Lifetime	Joint Life: 30 months 60 months 90 months Lifetime	
Lifetime Benefits	Yes		No		Yes		
Underwriting Type	Simplified		Simplified		Simplified		
Phone Interview	Base: No	COB Rider: Yes	Yes		Base: No	COB Rider: Yes	
Medical Records	No		No		No		
Paramed	No		No		No		
Underwriting Classes	None		None		None		
Benefit Type	Reimbursement		Reimbursement	Reimbursement		Reimbursement	
Premium Duration	Base Policy: Single Premium	COB Rider: Single Premium 10-Pay 20-Pay Pay to 100	Single Premium		Base Policy: Single Premium	COB Rider: Single Premium 10-Pay 20-Pay Pay to 100	
LTC Premium Tax Deductibility	Yes		No		Yes		
Qualifications	Unable to perform 2 of "substantial supervision" impairment.		Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.		Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.		
Benefit Uses	Qualified, documentable long-term care expenses		Qualified, documentable long-term care expenses		Qualified, documentable long-term care expenses		
Elimination Period	All Services: 7 Days	All Services: 7 Days All Services: 90 Days			All Services: 60 Days		
Inflation Options Available	Base Policy: None	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound	Base Policy: None	COB Rider: 5% Compound	None	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound	
Return of Premium	No		No		No		
Residual Death Benefit	No N		No		No		
Waiver of Premium	No		No		No		
Waiver of Policy Charges	No	1.0.0	No		No		
International Benefits	CA: Base: 100% for 12 months per insured Extension: None Type of Care: Facility only	All other states: Base: 50% Extension: None Type of Care: Facility only Please see the LTC and	CA: Base: 100% for 12 months per insured Extension: None Type of Care: Facility only CI Foreign National & For	All other states: Base: 50% Extension: None Type of Care: Facility only reign Travel Details Cheat	CA: Base: 100% for 12 months per insured Extension: None Type of Care: Facility only Sheet for additional deta	All other states: Base: 50% Extension: None Type of Care: Facility only	
Source of Funds	Non-Qualified Funds: Yes Non-Qualified Funds: Yes		es	Non-Qualified Funds: Yes			
	Qualified Funds: Yes		Qualified Funds: No	Qualified Funds: No		Qualified Funds: Yes	
States Not Available Additional Details	CT, NH, NM, VT, NY Pension Protection Act (PPA) compliant	Pension Protection Act	(PPA) compliant	NY Pension Protection Act	(PPA) compliant	

Carrier Name	Pacific Life	Securian Financial
Product Name	PremierCare	SecureCare
Type of Coverage	LTC	LTC
LTC License Required?	Yes	Yes
Product Type	Whole Life	Universal Life
Issue Ages	Single Premium: 30 - 75 Recurring Premium: 30 - 70	40 - 75
Couple's Discount	Yes. Both partners need not apply	Yes. Both partners need not apply
Minimum Death Benefit	\$60,000	\$50,000
Maximum Death Benefit	\$600,000	2-year Initial LTC Benefit Period: \$500,000 3-year Initial LTC Benefit Period: \$750,000
Benefit Duration	60 Months 72 Months 84 Months 96 Months	24 Months 36 Months 48 Months 60 Months 72 Months 84 Months
Lifetime Benefits	No	No
Underwriting Type	Simplified	Simplified
Phone Interview	Yes	Yes
Medical Records	No	Only for Cause
Paramed	No	No
	Non-Smoker Couple	Non-Tobacco Couple Non-Tobacco Sinale
Underwriting Classes	Non-Smoker Single Smoker Couple	Tobacco Couple
	Smoker Single	Tobacco Single
Benefit Type	Reimbursement Optional Indemnity for 20% reduction in LTC	Cash Indemnity
	benefit	0: 1 0 :
Premium Duration	Single Premium 5-pay 10-pay	Single Premium 5-Pay 7-Pay 10-Pay 15-Pay
LTC Premium Tax Deductibility	No	Yes
0 15 15	Unable to perform 2 of 6 ADL's, or needs	Unable to perform 2 of 6 ADL's, or needs
Qualifications	"substantial supervision" due to cognitive impairment.	"substantial supervision" due to cognitive impairment.
Benefit Uses	Reimbursement: qualified, documentable long- term care expenses. Indemnity: none.	No restrictions
Elimination Period	Reimbursement: Home Health 0 Days; All Other Services 90 Days Indemnity: All Services 90 Days	All Services: 90 Days
Inflation Options Available	3% Simple 5% Simple 5% Compound	3% Simple 3% Compound 5% Simple 5% Compound
Retum of Premium	Full: 100% all years Vested: 100% starting year 9	Vested: 100% starting year 6.
Residual Death Benefit	Lesser of 5% of initial Specified Amount or \$5,000	Lesser of 10% of initial Specified Amount or \$10,000
Waiver of Premium	No	No
Waiver of Policy Charges	No Base: 100% up to 24 months	No Base: 50%
	COB: None	COB: 50%
International Benefits	Type of Care: Facility only	Type of Care: No restrictions
		an Travel Details Cheat Sheet for additional details
Source of Funds	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA, etc.)	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA, etc.)
States Not Available Additional Details	CA, NY Terminal Illness Rider: one-time payment equal to the lesser of 75% of the face amount or \$250K. Minimum benefit \$500.	Reduced Paid-Up Benefit: if the owner stops paying premiums, he or she may receive a reduced paid-up benefit guaranteed for the rest of their life.

ASSET BASED LONG-TERM CARE GLOSSARY

Term	Definition
Asset Based Long-Term Care	A long-term care policy built on an asset, generally a life insurance policy or annuity. These policies provide a guaranteed death benefit if long-term care is not needed, guaranteed Return of Premium or Cash Surrender Value, tax-free long-term care benefits, and guaranteed premiums. Also referred to as hybrid, combination or linked benefit products.
Activities of Daily Living (ADL's)	Basic actions that independently functioning individuals perform on a daily basis: bathing, dressing, transferring, eating, continence, and toileting.
Benefit Duration	Represents a combination of a "base policy" (may be referred to as Acceleration for LTC or LTC Acceleration of Benefits, AOB) and an optional Extension of Benefits Rider (may be referred to as Continuation of Benefits, COB). The total benefit duration can range from 24 months up to an entire lifetime.
Cash Indemnity	Once a claim is approved by the Carrier, no monthly bills or receipts will need to be submitted, and up to the full monthly LTC benefit will be paid directly to the policy owner.
Traditional Indemnity	Once a claim is approved by the Carrier, no monthly bills or receipts will need to be submitted, and up to the full monthly LTC benefit will be paid directly to the policy owner. However, documentation of \$1 worth of qualified long-term care expenses may be required.
Reimbursement	Once a claim is approved by the carrier, only documented, qualified incurred expenses are paid, up to the stated monthly maximum policy benefit.
Couple's Discount	A discounted premium available to married couples or domestic partners as recognized in the state of policy issue at the time of application.
Elimination Period	Specified amount of time at the beginning of a chronic illness during which you receive covered services, but the policy does not pay benefits. Also known as a Deductible Period or Waiting Period.
International Benefits	Benefits available to an insured receiving qualified long-term care services outside of the United States, its territories or possessions.
LTC Premium Tax Deductibility	Premium (as opposed to a policy charge assessed against the cash value) specifically designated as long-term care premium (premium to accelerate the death benefit for care, premium to extend LTC benefits beyond death benefit depletion, and premium for inflation protection), is considered a health expense. Therefore, an individual or corporation may be able to deduct all or a portion of this premium. Please see carrier specific tax guides for further information.
Residual Death Benefit	The amount of guaranteed death benefit available to a beneficiary even after the death benefit has been fully accelerated for Long-Term Care expenses.
Return of Premium	The amount of premium returned to the policy owner upon surrender of the policy. The Return of Premium amount may be subject to a vesting schedule. Return of Premium options vary widely based on specific product selection and design.
Source of Funds	Refers to the tax-qualification of the asset being used for funding.
Waiver of Premium	Planned premiums are waived when an insured is on active claim.
Waiver of Policy Charges	Policy charges are waived when an insured is on active claim.
Simplified Underwriting	The majority of Asset Based LTC products undergo an Accelerated Underwriting/Simplified Issue process. Meaning, the potential insured is only subject to a Personal History Interview, MIB and prescription database check. Some Carriers may opt to obtain Attending Physicians Statements as well. All insureds deemed within a Table 4 risk are issued in the same rate class.
Full Underwriting	In lieu of Simplified Underwriting, some insureds may be subject to full/traditional underwriting to include a Paramed, blood/urine, EKG, etc. Carriers using a full underwriting platform will generally issue policies for risk class up through Table 8.