



Example – Plan A \$150 Daily Benefit for 5 years

Age Entering Plan	Monthly Premium	Money Available
25	\$13.74	\$273,750
35	\$20.19	\$273,750
45	\$35.26	\$273,750
55	\$63.26	\$273,750

Long Term Care Protection: What is it?

Long term care is not one service, but a variety of services available to individuals who are unable to care for themselves due to an illness, accident or disability. The services are provided in a setting other than the acute care portion of a hospital. Common reasons why long term care services may be required include: car accident, sporting accident, stroke, aging process, Alzheimer's or Multiple Sclerosis.

Long term care services can be provided on a temporary or a permanent basis. Long term care services can range from simple help with meal preparation to assistance with bathing and dressing or to complete 24-hour monitored care.

Long Term Care Protection: Why Now?

- **No health questions for employees.** All newly eligible employees actively at work who enroll in the long term care plan during the new hire open enrollment period are guaranteed to be accepted into the program without having to answer medical questions. Employees that apply after this new hire open enrollment period will be required to submit evidence of good health and be approved for coverage.
- **A simplified spouse application.** All spouses of newly eligible employees who are actively at work can enroll in the long term care plan at anytime by completing a simplified application. Spouse coverage is NOT guaranteed
- **Premiums.** The younger you are when your coverage begins, the lower your premiums will be for the duration of your participation in the plan. That's because once you're in the plan, your rates do not increase just because you grow older. For premiums to change there would have to be a change in premiums for everyone in your age category who has the kind of coverage that you do. As long as you pay your premiums, we cannot cancel your coverage and you can never be singled out for a rate increase because you get older, become ill or because of claims that you may file.

Don't group medical plans cover long term care?

No. Group plans are not designed to cover long term care services for chronic conditions. They usually cover acute/short-term medical expenses that are designed to improve the individual's condition. These services must also be "medically necessary". Because of the requirement that services be "medically necessary", group plans exclude the most commonly required long term care service: custodial long-term care.

Won't my family take care of me? Although most long term care services are still provided by family and friends, this is becoming an increasingly more difficult task due to the changing American family:

- both spouses are working full-time
- children are living in different states
- people are living longer, requiring individuals to care for their children and their parents simultaneously.

Can't I use my savings or a bank loan?

Unfortunately, most Americans are unaware that the estimated national average cost of a one-year stay in a nursing home is \$55,000¹, and can be twice that much in some regions. Do you have that type of money set aside for long term care services, or are you sure that a bank will loan you the money once services are required?

Why should I consider long term care insurance?

Besides the limitations noted, these are the most common reasons cited² for purchasing long-term care insurance:

1. maintain independence
2. preserving assets
3. not relying on changing government programs
4. not wanting to become a burden to family.

Want to Know More?

Johns Hopkins University offers the Group Long Term Care insurance program through CNA. If you have questions about the long term care plan, you may call CNA toll-free at 1-800-528-4582. Representatives are available Monday through Friday, 8:00 am to 6:00 p.m., Eastern Standard Time.

The following chart compares the cost of delaying enrollment:

¹ CNA nursing home survey, 2001

² HIAA, Buyer Survey, 2000

Johns Hopkins University
Benefit Exhibit for Group Long-Term Care

	OPTION 1	OPTION 2	OPTION 3
Maximum daily benefit for nursing home care and alternate care facility The eligible expense per day of nursing home care, up to the maximum nursing home care benefit chosen by you. An eligible expense is the actual expense paid by you for the services covered by the policy.	\$100	\$150	\$200
Maximum daily benefit for home based care – The eligible expenses per day of community based care, up to 60% of the maximum nursing home care benefit chosen by you.	\$60	\$90	\$120
Corresponding lifetime maximum benefit – The lifetime maximum benefit is a pool of money the insured can use for all eligible long term care expenses. The lifetime maximum benefit will automatically increase when your daily benefit for nursing home increases.	<i>CHOICE OF:</i> <p style="text-align: center;">THREE YEAR LIFETIME MAXIMUM BENEFIT \$109,500 \$164,250 \$219,000</p> <p style="text-align: center;">FIVE YEAR LIFETIME MAXIMUM BENEFIT \$182,500 \$273,750 \$365,000</p>		
Waiting period - A licensed healthcare practitioner must certify you as chronically ill and having a chronic illness that is expected to last for 90 days.	60 days nursing home care. 15 days community –based care	60 days nursing home care. 15 days community –based care	60 days nursing home care. 15 days community –based care
Bed reservation benefit – Your plan will pay the eligible expense not to exceed the maximum daily benefit for nursing home care, up to 21 calendar days per year, to hold your bed in the nursing home during your absence.	\$2,100	\$3,150	\$4,200
Home medical technology - Independent living at home may require the ability to summon help quickly with an emergency alert system. Monthly rental or lease fees for such equipment are covered up to or equal to the daily community based care benefit.	\$1,000	\$1,000	\$1,000
Caregiver training benefit – Your plan will pay the eligible expense incurred for caregiver training up to the caregiver benefit stated at right. Caregiver training of this type is covered up to a total of three times the community based care benefit.	\$180	\$270	\$360
Respite care – This benefit pays for care while the normal family caregiver is away. You do not have to satisfy a waiting period to receive this benefit.	\$1,400	\$2,100	\$2,800

ADDITIONAL FEATURES

Inflation Protection Options – Guaranteed Benefit Increase (Standard):

You will periodically be given opportunities to increase your benefit amount and lifetime maximum on a guarantee issue basis. The amount of the daily benefit increase will not be less than a compounded annual 5 percent rate compounded annually. Associates actively at work and their spouses are guaranteed acceptance for benefit increase offers whether or not they have rejected past offers. All other insureds are guaranteed acceptance as long as they continue to accept benefit increase offers. If they have declined previous offers, they will be eligible, but will have to submit evidence of insurability in order to qualify. If their evidence of insurability is accepted, subsequent offers will be guarantee issue until another offer is declined.

Lifetime Compound Automatic Benefit Increase (Optional)

Your plan can help your benefit keep pace with inflation if you choose to add the automatic inflation benefit feature. It will automatically increase the amount of your daily nursing home and home health care benefits each year by 5% of the prior year's amount for life.

Maryland Non-Forfeiture Benefit (Optional)

This feature provides a reduced lifetime maximum benefit if coverage lapses after at least five years in force. To calculate the amount of the reduced lifetime maximum, we begin by considering a portion of all premiums paid by the insured person prior to lapse. We then determine the amount of coverage that amount of premium will buy.

Alternate Plan of Care

Your CNA plan anticipates changes by offering an Alternate Plan of Care program that allows CNA to offer non-standard benefits in place of covered services when appropriate. This feature lets your CNA plan grow as care options grow.



Should you have immediate questions, please call the CNA long-term care counselors at: 1-877-777-9072
Monday – Friday, 8:00 a.m. to 6 p.m. (Eastern)

This piece is for illustrative purpose only and is not a contract. It is intended to provide a general overview of the plan described. Please remember only the insurance policy can give actual terms, coverage, amounts, conditions and exclusions.

Underwritten by Continental Casualty Company, one of the CNA Insurance Companies. Policy number SRLTCP *Not all states approved.*
Effective date may be delayed in states not yet approved.