## GUIDE TO ASSET-BASED LONG-TERM CARE PRODUCTS

PRODUCT TYPE	DEFINITION
Life Insurance Chassis	Asset-Based Long-Term Care products built on a Uninversal Life or Whole Life product base, with an extension/continuation of benefits rider providing benefits once the initial death benefit is exhausted.
Life insurance Chassis	Please see the Asset-Based Long-Term Care Product Details - Life Chassis Resource for additional details
Array its Changia	Asset-Based Long-Term Care products built on an annuity chassis. Generally, these offer more accomodating underwriting, but may provide less robust benefits per dollar of premium.
Annuity Chassis	Please see the Asset-Based Lona-Term Care Product Details - Annuity Chassis Resource for additional details

## AVAILABLE PRODUCT FEATURES BY CARRIER

Carrier	Global Atlantic	John Hancock	Lincoln Financial	Lincoln Financial	Lincoln Financial	MassMutual	MassMutual	Nationwide	Nationwide	Nationwide	New York Life
Product	Forecare	LifeCare	MoneyGuard II 2020	MoneyGuard Fixed Advantage	MoneyGuard Market Advantage	CareChoice One	CareChoice Select	CareMatters II	CareMatters Together	YourLife CareMatters	Asset Flex (Not available in NY)
Annuity Chassis	✓										
Life Chassis		√	√	√	✓	1	√	√	√	✓	√
Accepts Annuity Funds	1										
Accepts Qualified Funds <sup>1</sup>											
Benefits: Indemnity		√		√	✓			√	√	✓	
Benefits: Reimbursement	1	1	√	√	✓	1	1				√
Couples Discount	1	√	√	√	✓			√	√	√	√
Critical Illness Rider		1						√		√	
Flexible Premiums		1	√	√	1				1		
International Benefits		√	1	1	1			√	1	1	√
Lifetime Benefits											
Phone Interview Required		1	√	$\sqrt{3}$	√ <sup>3</sup>	1	1	√	1	1	√
Reduced Paid Up							1	√	1	1	√
Trust Ownership Allowed	1	√	1	√	✓	1	1	√	1	✓	√
Waiver of Premium							√ <sup>4</sup>	√	1		

Carrier	OneAmerica	OneAmerica	OneAmerica	OneAmerica	OneAmerica	OneAmerica	OneAmerica	OneAmerica	Securian Financial	Securian Financial
Product	Annuity Care	Annuity Care II	Asset Care 2019 and 2024	Asset Care 1 (CA Only)	Asset Care 2 (CA Only)	Asset Care 3 (CA Only)	Asset Care 4 (CA Only)	Indexed Annuity Care	SecureCare	SecureCare III
Annuity Chassis	√	1						√		
Life Chassis			√	√	√	√	√		√	✓
Accepts Annuity Funds	1	✓			√			√		
Accepts Qualified Funds <sup>1</sup>			√			√				
Benefits: Indemnity			√ <sup>5</sup>						√	√
Benefits: Reimbursement	√	√	√	√	√	√	√	√		
Couples Discount									√	✓
Critical Illness Rider										
Flexible Premiums	$\checkmark^2$							√ <sup>2</sup>		
International Benefits	1	1	✓	√	√	√	√	√	√	✓
Lifetime Benefits	✓		√	√	√	√	1	√		
Phone Interview Required	1	✓	✓	√	√	√	√	√	√	✓
Reduced Paid Up									√	✓
Trust Ownership Allowed	1	1	√ <sup>6</sup>	1	✓		1	√	√	✓
Waiver of Premium			✓	√ <sup>7</sup>	√ <sup>7</sup>	√ <sup>7</sup>	✓ <sup>8</sup>			✓

✓ Indicates the Core Carrier offers this capability/service

<sup>1</sup> Refers to direct acceptance of qualified funds as premium payments. Many of these products can be funded with qualified assets through the use of a SPIA. Please contact AIN Member Services for additional defails.

<sup>2</sup> Base Policy is single premium only. Continuation of benefits offers multiple premium durations from single pay to pay to age 100

<sup>3</sup> eInterview also available, cognitive only for those over age 60

<sup>4</sup> Up to age 59 but triggered based on Disability

<sup>5</sup> Asset Care 2024 only

<sup>6</sup> Except with qualfied funding

<sup>7</sup> Waiver of premium applies to COB only, not Base Policy

<sup>8</sup> With optional Rider

Carrier Name	John Hancock	Lincoln Financial	Lincoln Financial	Lincoln Financial						
Product Name	LifeCare	MoneyGuard Market Advantage	MoneyGuard II 2020	MoneyGuard Fixed Advantage	CareChoice One					
Product Type		Variable Universal Life	Universal Life	Universal Life	Whole Life					
Type of Coverage		LTC	LTC	LTC	LTC					
LTC License Required?	Yes	Yes	Yes	Yes	Yes					
Issue Ages	30-75	30-70	40 - 79	40 - 80	35-69					
Couple's Discount	Yes. Both partners need not apply	Yes. Both partners need not apply	Yes. Both partners need not apply	Yes. Both partners need not apply	No					
Minimum Death Benefit	\$50,000	\$50,000	\$50,000	\$50,000	Face amount purchased by \$25,000 Minimum Premium					
Maximum Death Benefit	Maximum initial death benefit amount: \$500,000	\$500,000	2-year Initial LTC Benefit Period: \$500,000 3-year Initial LTC Benefit Period: \$750,000	\$500,000	\$720,000					
Underwriting Type		Simplified	Simplified	Simplified	Streamlined					
Phone Interview Required	Yes, for cognitive screen only ages 60 & older. Possible for clients under 60 based on medical history	Yes, for cognitive screen only over age 60. Client can complete eInterview or Phone interview at their discretion if under age 60.	Y Yes	Yes, for cognitive screen only over age 60. Client can complete eInterview or Phone interview at their discretion if under age 60.	Yes					
Medical Records	No	No	No	No	No					
Paramed	No	No	No	No	No					
Underwriting Classes	Preferred Non-Smoker, Standard Non-Smoker, Select Non-Smoker, Standard Smoker (Each risk class is eligible for a couples discount on the long-term care rider premium)	Couple Standard	Couple Standard	Couple Standard	Standard Non-Tobacco and Tobacco					
Benefit Type	Cash Indemnity: Pays 100% of maximum monthly benefit amount (MMBA) up to the IRS per diem limit in a given month, with no receiptiverquired     Reimbursement: Pays up to the maximum monthly benefit amount (MMBA) (roduritied IIC expenses incurred, and may be paid in excess of the IRS per diem limit	Reimbursement or Indemnity: Has to be chosen at 1st claim (choice is irrevacable) if electing the indemnity option, the benefit amount is limited to 80% of the LIC Maximum Manithy amount, but the Total LIC Benefit Limit (Pool) is not reduced regardless of choice between indemnity or Reimbursement.	Reimbursement	Reimbursement or Indemnity: Has to be chosen at 1st claim (choice is irrevocable) if electing the indemnity option, the benefit amount is limited to 80% of the LTC Maximum Monithy amount, but the Total LTC Benefit Limit (Pool) is not reduced regardless of choice between indemnity or Reimbursement.	Reimbursement					
Lifetime Benefits	No	No	No	No	No					
Benefit Duration	2-year = 24 months acceleration of death benefit for LTC (no additional LTC benefits)     4-year = 24 months acceleration of death benefit for LTC, plus 24 months additional 34 benefits     additional 34 benefits     additional UC benefits     odditional UC benefits     odditional UC benefits     odditional UC benefits	Base (Guaranteed): 36 Months Extension of benefit duration is based on market performance.	24 Months 38 Months 48 Months 49 Months 72 Months	36 Months 48 Months 60 Months 72 Months	4 Year Benefit Period with Paid Up Additions that can add to the E Period					
Qualifications	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.	Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.	Unable to Perform 2 of 6 ADLs or Severe Cognitive Impairment					
Benefit Uses	Qualified, documentable long-term care expenses, except for Indemnity which has no restrictions	Qualified, documentable long-term care expenses, except for Indemnity which has no restrictions	Qualified, documentable long-term care expenses	Qualified, documentable long-term care expenses, except for Indemnity which has no restrictions	Qualified, documentable long-term care expenses					
Elimination Period	90 Days	All Services: 0 Days	All Services: 0 Days	All Services: 0 Days	90 Days					
Inflation Options Available	Market Driven 5% Compound	Market Driven 5% Compound	3% Compound 5% Compound	3% Compound 5% Compound	5% Compound Inflation					
International Benefits	Indemnity payments only (100% of monthly max LTC benefit up to the IRS per dem limit) not restricted by geography following claim approval. No reimbursement of anounch is nacess of the LTC per diem limit for QLTC services received outside the United States	100% up to 36 months Type of Care: Nursing Home or Assisted Living Facility only	Base Policy: 100% Extension: 0% Type of Care: Nursing Home or Assisted Living Facility only	100% up to 36 months Type of Care: Nursing Home or Assisted Living Facility only	N/A					
	Beaus use the LIC and Cliforeign National & Foreign Travel Details Cheat Sheet for additional details									
		Single Premium								
Premium Duration	• single-pay	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's age 75 (whichever is later)	Single Premium Recurring Premium up to 25 years; based on age at time of issue	Single Premium Recurring Premium up to 10 years; based on age at time of issue	Single Pay					
Source of Funds	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA, etc.) Annuities: No	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA, etc.) Annuities: No	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA, etc.) Annuities: No	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA, etc.) Annuities: No	Non-Qualified Funds: Yes Qualified Funds: No Annuities: No					
Return of Premium	No; Based on underlying cash surrender value	No; Based on underlying cash surrender value	Basic: 70% all years after premium is paid Vested: 100% starting year 6	Baic: 70% all years after premium is paid Vested: 100% starting year 11	No					
LTC Premium Tax Deductibility	Yes	No	No	Yes: The ratio of LTC to Total (LTC + Life) premium split is determined at issue and is based on policy design, issue age, gender and class.	Yes					
Critical Illness Rider Included	Terminal Available (if the client is certified to be terminally ill with a life expectancy of 1 year or less, this rider allows the policy owner to receive 50% of the eligible death benefit to a maximum of \$1M)	None	None	None	None					
Residual Death Benefit	Lesser of 5% of initial specified amount or \$10,000	Lesser of 5% of initial Specified Amount or \$10,000	Lesser of 5% of initial Specified Amount or \$10,000	Lesser of 5% of initial Specified Amount or \$10,000	N/A					
Reduced Paid Up Option	None	None	None	None	None					
			ease see the ABLTC Reduced Paid Up Options Cheat Sheet for additional de	etails						
Trust Ownership Allowed	Yes	Yes	Yes	Yes	Yes					
Waiver of Premium		No	No	No	N/A					
Waiver of Policy Charges	No	No	No	No	N/A					
States Not Available	CA, CT, DE, GU, IN, MT, NJ, NY, PR, SC.	GU, NY, VI	Only available in CA	CA, GU, NY	None					
Additional Details	Annual Benefit Lock Guarantee - on each policy anniversary, positive account value growth offers potential to 'lock in' a higher death benefit	Effective May 10, 2021, issue ages for MoneyGuard Market Advantage® in Washington are now 40-70.		Terminal Illness Rider: one-time payment for 25% to 75% of the current specified amount of death benefit, up to \$250K.						

Des duet Mense	Come Chaile and the st	Malianuida Oronte II	Constitution Transition	Veurlife Countrillo	New York Life			
Product Name	CareChoice Select	Nationwide CareMatters II	CareMatters Together	YourLife CareMatters	Asset Flex (Not available in NY)			
Product Type	Whole Life	Universal Life	Universal Life	Universal Life	Universal Life			
Type of Coverage		LTC		LTC				
LTC License Required?	Yes	Yes	Yes	Yes	Yes			
Issue Ages	35-69	30-75	30-70	40 - 75	Single Prem/5Pay: 30 - 75; 10Pay: 30 - 70; 15Pay; 30 - 65			
Couple's Discount	No	Yes. Both partners need not apply	Yes, Joint Policy, both partners must be approved.	Yes. Both partners need not apply	Yes			
Minimum Death Benefit	\$40,000 Minimum DB for CareChoice Select	\$40,000	Both Preferred: \$54,000 Either Insured Standard: \$72,000	2-year Initial LTC Benefit Period: \$40,000 3-year Initial LTC Benefit Period: \$90,000	2 year Min Face Amt \$24,000; 3 year Min Face Amt \$36,000 For CA, 2 year Min Face Amt \$36,000; 3 year Min Face Amt \$54,000			
Maximum Death Benefit	\$720,000	\$500,000	\$750,000 (\$1,000,000 if one insured is Standard rating)	2-year Initial LTC Benefit Period: \$500,000 3-year Initial LTC Benefit Period: \$750,000	2 year Max Face Amt \$500,000; 3 year Max Face Amt \$750,000			
Underwriting Type	Streamlined	Simplified	Simplified	Simplified	Full			
Phone Interview Required	Yes	Yes	Yes	Yes	Yes			
Medical Records	No	No	No	No	Varies (Contact NYL)			
Paramed	No	No	No	No	Varies (Contact NYL)			
Underwriting Classes	Standard Non-Tobacco and Tobacco	Non-Tobacco Couple Non-Tobacco Single Tobacco Couple Tobacco Single	Nontobacco Preferred Tobacco Preferred Nontobacco Standard Tobacco Standard	Preferred Nontobacco Preferred Tobacco	Preferred Non-tobacco, Std 1 Non-tobacco, Std 2 Non-tobacco – Preferred tobacco, Std 1 Tobacco, Std 2 Tobacco			
Benefit Type	Reimbursement	Cash Indemnity	Cash Indemnity	Cash Indemnity	Reimbursement			
Lifetime Benefits	No	No	No	No	No			
			Both Preferred:					
		24 Months 36 Months	48 Months 72 Months	24 Months 36 Months				
Benefit Duration	4 Year Benefit Period with Paid Up Additions that can add to the Benefit	48 Months	96 Months	48 Months	24 Months			
	Period	60 Months 72 Months	Either Insured Standard: 48 Months	60 Months 72 Months	36 Months			
		84 Months	72 Months	84 Months				
			96 Months					
Qualifications	Unable to Perform 2 of 6 ADLs or Severe 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.	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" a cognitive impairment.			
Benefit Uses	Qualified, documentable long-term care expenses	No restrictions	No restrictions	No restrictions	Qualified, documentable long-term care expenses			
Elimination Period	90 Days	All Services: 90 Days. Once met, LTC benefits for first 90 days are paid retroactively.	All Services: 90 Days. Once met, LTC benefits for first 90 days are paid retroactively.	All Services: 90 Days	90 Days for Facility (Nursing and Assisted Living) (D Days for Home and Community-Based Core if Care Plan Benefit i otherewise, 90 Days. Walling period does not apply for Hospice Care, Informal Care, In- Support Equipment, Caregiving Relief Benefit and Caregiver Italia			
Inflation Options Available	5% Compound Inflation	3% Simple 3% Compound 5% Compound	3% Compound for life 3% Compound for 20 years 5% Compound	3% Simple 5% Compound	3% or 5% compound (Paid on extension of benefits only)			
International Benefits	NA	Base Policy: 100% Extension: None Type of Care: No restrictions	Base Policy: 100% Extension: None Type of Care: No restrictions	Base Policy: 50% Extension: None Type of Care: No restrictions	N/A			
	Please see the LTC and Cl Foreign National & Foreign Travel Details Cheat Sheet for additional details							
		Single Premium	Single Premium		Single Premium			
Premium Duration	10-Pay	5-Pay 10-Pay Pay to 65 (ages 30 - 54)	S-Pay 10-Pay 20-Pay (Max issue age of 65)	Single Premium S-pay 10-pay	5-Pay 10-Pay			
		Pay to 100 (ages 30 - 65)	Pay to 100 (Max issue age of 65)		15-Pay			
Source of Funds	Non-Qualified Funds: Yes Qualified Funds: No	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA)	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA) Annuilies: No	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA, etc.) Annuities: No	Non-Qualified Funds: Yes Qualified Funds: No Annuities: No			
Return of Premium	Annuillies: No Annuillies: No Annuillies: No N		No. Based on cash surrender value	Arthonies, no Single Premium: Vested: 100% starting year 6 Recurring Premium: 100% offer all premiums are paid	Partial ROP: Refunds 80% of premium in all years after all planned ; paid. (Max LIC & Life insurance benefits)			
LTC Premium Tax Deductibility	Yes	Yes	Yes	No	Yes			
Critical Illness Rider Included	None	Yes	No	Yes	No			
Residual Death Benefit	N/A	20% of initial Specified Amount	10% of the base specified amount will be paid upon the death of the second insured.	20% of initial Specified Amount	Lesser of 10% of initial specified face amount or \$25,000			
Reduced Paid Up Option	Yes	Yes	Yes	Yes	No			
			ease see the ABLTC Reduced Paid Up Options Cheat Sheet for additional de					
Trust Ownership Allowed	Yes	Yes	Yes	Yes	Yes			
Waiver of Premium	Available as an option on CareChoice Select up to age 59 but triggered based on Disability	Pay to 100: LTC premiums are waived; life insurance premium is due. All other premium schedules: All premiums due, or insured may elect a statused and and the schedules.	For all payment options, life and LTC premiums will be waived while the benefits are being paid.	No	No			
Waiver of Policy Charges		reduced paid-up policy		No	No			
	N/A NY, CA	No NY MT	No MT, NY	No Only available for rale in NY	No Not available in NY			
States Not Available Additional Details	III, UR	NY, MT 1. All benefit periods are build on a 2 year SAP (Specified Acceleration Period) 2. Terminal Ulness Rider: one-time payment no less than \$10K or more than	MLNY Maximum age difference • Preferred: 25 years • Standard: 10 years Only one insured may be in the Standard rate class. A policy will not be	Only available for sale in NY Terminal Illness Rider: one-time payment no less than \$10K or more than \$25K, less any outstanding indebtedness.	Not available in NY			

Carrier Name OneAmerica			OneAmerica		America		America	OneAmerica		
Product Name	Asset Care 2024		Care 2019		e 1 (CA Only)		e 2 (CA Only)		e 3 (CA Only)	
Product Type	Participating Whole Life (no assumed dividends)	Participating Whole Life (no assume	d dividends)	Interest Sensitive Whole Life		Interest Sensitive Whole Life		Interest Sensitive Whole Life		
Type of Coverage	LTC	LTC		LTC		LTC		LTC		
LTC License Required?	Yes	Yes				Yes		Yes		
Issue Ages	35-80	35 - 80		Single: 35 - 80		59% - 80		59½ - 80		
Couple's Discount	No	No		No		No		No		
Minimum Death Benefit	\$50,000	\$50,000		Face amount purchased by minimu	m premium of \$10,000	Face amount purchased by minim	um premium of \$20,000	Face amount purchased by minimu	um premium of \$20,000	
Maximum Death Benefit	\$1,500,000	\$1,500,000		\$1,500,000		\$1,500,000		\$1,500,000		
Inderwriting Type	Simplified, full for cause	Simplified, full for cause		Simplified, full for cause		Simplified, full for cause		Simplified, full for cause		
hone Interview Required	Yes	Yes		Yes		Yes		Yes		
		Only for cause		Only for cause		Only for cause		Only for cause		
Aedical Records	Only for cause									
Paramed	Full Underwriting only	Full Underwriting only Preferred Non-Tobacco		Full Underwriting only Preferred (Non-Smoker)		Full Underwriting only Preferred (Non-Smoker)		Full Underwriting only Preferred (Non-Smoker)		
	Preferred Non-Tobacco Preferred Tobacco	Preferred Tobacco		Standard (Smoker)		Standard (Smoker)		Standard (Smoker)		
Underwriting Classes	Standard Non-Tobacco	Standard Non-Tobacco		Preferred (Non-Smoker) Table 5 - 8		Preferred (Non-Smoker) Table 5 - 8		Preferred (Non-Smoker) Table 5 - 8		
	Standard Tobacco	Standard Tobacco		Standard (Smoker) Table 5 - 8		Standard (Smoker) Table 5 - 8		Standard (Smoker) Table 5 - 8		
Benefit Type	Reimbusement and/or Indemnity	Reimbursement		Reimbursement		Reimbursement	Reimbursement			
Lifetime Benefits	Yes	Yes		Yes		Yes		Yes		
		Single Life:			1.1.1.2					
		25 months	Joint Life: 25 months	Single Life: 25 months	Joint Life: 25 months	Single Life: 25 months	Joint Life: 25 months	Single Life: 25 months	Joint Life: 25 months	
		33 months 50 months	33 months	33 months	33 months	33 months	33 months	33 months	33 months	
Benefit Duration	Single or Joint Life: 2 years, 4 years, 6 years, 8 years, Lifetime	66 months	50 months 66 months	50 months 66 months	50 months 66 months	50 months 66 months	50 months 66 months	50 months 66 months	50 months 66 months	
		75 months	100 months	100 months	100 months	100 months	100 months	100 months	100 months	
		100 months Lifetime	Lifetime	Lifetime	Lifetime	Lifetime	Lifetime	Lifetime	Lifetime	
	Unable to perform 2 of 6 ADLs, or needs "substantial supervision" due		eds "substantial supervision" due to	Unable to perform 2 of 6 ADL's, or ne	eds "substantial supervision" due to	Unable to perform 2 of 6 ADL's, or n	eeds "substantial supervision" due to	Unable to perform 2 of 6 ADL's, or ne	eeds "substantial supervisio	
Qualifications	cognitive impairment.	cognitive impairment.		cognitive impairment.		cognitive impairment.		cognitive impairment.		
Benefit Uses	Qualified, documentable long-term care expenses and/or cash ber	nefit Qualified, documentable long-term	care expenses	Qualified, documentable long-term care expenses		Qualified, documentable long-term care expenses		Qualified, documentable long-term care expenses		
Elimination Period	Home Health: 0 Days, All Other Services/Facility: 90 Calendar Days	Home Health: 0 Days All Other Services: 90 Days			Home Health: 30 Days All Ofther Services: 60 Days		Home Health: 30 Days All Other Services: 60 Days		Home Health: 30 Days All Other Services: 60 Days	
Inflation Options Available	2% compound, 3% compound, 5% compound	3% Compound 5% Compound	3% Compound 5% Compound		COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound	Base Policy (state variations, this product only available in CA no inflation option on base): 5% Simple 5% Compound	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound	Base Policy (state variations, this product only available in CA no inflation option on base): 5% Simple 5% Compound	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound	
International Benefits	Base: 50%, Extension: None, Type of Care: Facility Only	CA (this product not available in 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 (this product not available outside CA): Base: 50% Extension: None Type of Care: Facility only	CA: Base: 100% for 12 months per insure Extension: None Type of Care: Facility only	All other states (this product not available outside CA): Base: 50% Extension: None Type of Care: Facility only	CA: Base: 100% for 12 months per insurer Extension: None Type of Care: Facility only	All other states (this proje available outside CA): Base: 50% Extension: None Type of Care: Facility only	
Please see the LTC and Cl Foreign National & Foreign Travel Details Cheal Sheet for additional details										
	Sanda Deserium	Single Premium		-	COB Rider:		COB Rider:		COB Rider:	
	Single Premium 5-Pay	5-Pay			Single Premium	Base Policy:	Single Premium		Single Premium	
Premium Duration	10-Pay	10-Pay		Base Policy: Single Premium	10-Pay	NQ Annuity 1035	10-Pay	Base Policy: Qualified Rollover	10-Pay	
	20-Pay Pay to 95	20-Pay Pay to 95			20-Pay Pay to 100	Life Insurance Cash Value 1035	20-Pay Pay to 100		20-Pay Pay to 100	
	F0y 10 75	Non-Qualified Funds: Yes		Nex OurFeed Funds Ver	Pay 10 100		Paylo luo		Pay to Tou	
Source of Funds	Non-Qualified Funds: Yes, Qualified Funds: Yes, Annuifies: No	Qualified Funds: Yes Annuities: No		Non-Qualified Funds: Yes Qualified Funds: No Annuities: No		Non-qualified Annuity only		Qualified Assets only Annuities: No		
Return of Premium	Available via rider	Distinct product with full ROP on life Continuation of Benefit (COB) prem month COB. Does not apply to Infla	ium. Must use 50 month AOB + 50	Base Policy: Yes	COB: No	Base Policy: Yes	COB: No	Base Policy: Yes	COB: No	
LTC Premium Tax Deductibili	fy Yes	Yes		Yes		Yes		Yes		
Critical Illness Rider Included	i None	None		None		None	None		None	
Residual Death Benefit	None	None		None		None		None		
Reduced Paid Up Option	No	No		No		No		No		
			<u>P</u>	lease see the ABLTC Reduced Paid Up	Options Cheat Sheet for additional d	<u>etails</u>				
Trust Ownership Allowed	Yes - except on qualified funding	Yes - except on qualfied funding		Yes		Yes		No		
Waiver of Premium	Yes	Yes		Base Policy: No	COB: Yes	Base Policy: No	COB: Yes	Base Policy: No	COB: Yes	
Waiver of Policy Charges	Yes	Yes		No		No		No		
States Not Available	AZ, CA, CT, DC, DE, FL, IN, MT, ND, NJ, NY, SC, SD.	CA, NY		Only available in CA		Only available in CA		Only available in CA		
Additional Details	25 year maximum age difference for joint insureds.	25 year maximum age difference fo	r joint insureds.	25 year maximum age difference for joint insureds.		25 year maximum age difference for joint insureds.		25 year maximum age difference for joint insureds; Both insure Table 4 or better.		

_	Carrier Name One America				America		America	Securian Financial	Securian Financial	
P	Product Name		e 2 (CA Only)		e 3 (CA Only)	Asset Care	e 4 (CA Only)	SecureCare (CA Only)	SecureCare III	
	Product Type			Interest Sensitive Whole Life		Universal Life	Whole Life			
	Type of Coverage	Yes         Ye           Ages         5% - 80         5%           Ie's Discount         No         No		Yes		LTC		LTC	LTC	
LI	LTC License Required?					Yes Y		Yes	Yes	
ls	Issue Ages			59½ - 80		20 - 80		40 - 75	40 - 75	
С	Couple's Discount			No	No			Yes. Both partners need not apply	Yes. Both partners need not apply	
N	Minimum Death Benefit	Face amount purchased by minimum premium of \$20,000				Ages 20-50: \$100,000 Ages 50+: \$50,000		\$54,000	\$50,000	
	Maximum Death Benefit	\$1,500,000		\$1,500,000		\$1,500,000		2-year Initial LTC Benefit Period: \$500,000 3-year Initial LTC Benefit Period: \$750,000	\$500,000	
U	Underwriting Type	Simplified, full for cause		Simplified, full for cause		Simplified, full for cause		Simplified	Simplified	
P	Phone Interview Required	Yes		Yes		Yes		Yes	Yes	
Ν	Medical Records	Only for cause		Only for cause		Only for cause		Only for Cause	Only for Cause	
P	Paramed	Full Underwriting only		Full Underwriting only		Full Underwriting only		No	No	
		Preferred (Non-Smoker) Standard (Smoker)		Preferred (Non-Smoker) Standard (Smoker)		Preferred (Non-Smoker) Standard (Smoker)		Non-Tobacco Couple	Non-Tobacco Couple	
U	Underwriting Classes	Preferred (Non-Smoker) Table 5 - 8		Preferred (Non-Smoker) Table 5 - 8		Preferred (Non-Smoker) Table 5 - 8		Non-Tobacco Single Tobacco Couple	Non-Tobacco Single Tobacco Couple	
		Standard (Smoker) Table 5 - 8		Standard (Smoker) Table 5 - 8		Standard (Smoker) Table 5 - 8		Tobacco Single	Tobacco Single	
в	Benefit Type	Reimbursement		Reimbursement		Reimbursement		Cash Indemnity	Cash Indemnity	
Li	Lifetime Benefits	Yes		Yes		Yes		No	No	
		Single Life:	Joint Life:	Single Life:	Joint Life:	Single Life:	Joint Life:			
		25 months	25 months	Single Lite: 25 months	25 months	25 months	25 months	24 Months 36 Months	48 Months	
	Repetit Duration	33 months 50 months	33 months 50 months	33 months 50 months	33 months 50 months	33 months 50 months	33 months 50 months	48 Months	60 Months 72 Months	
	Series Doralion	66 months	66 months	66 months	66 months	66 months	66 months	60 Months	84 Months	
		100 months	100 months	100 months	100 months	100 months	100 months	72 Months 84 Months	96 Months	
		Lifetime	Lifetime	Lifetime	Lifetime	Lifetime	Lifefime			
G	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.	Unable to perform 2 of 6 ADL's, or needs "substantial supervision" cognitive impairment.	
в	Benefit Uses	Qualified, documentable long-term	a care expenses	Qualified, documentable long-term	care expenses	Qualified, documentable long-term care expenses		No restrictions	No restrictions	
EI	Elimination Period	Home Health: 30 Days All Other Services: 60 Days		Hame Health: 30 Days All Other Services: 60 Days		Home Health: 30 Days All Other Services: 60 Days		All Services: 90 Cakendar Days	All Services: 90 Calendar Days	
Ir	Inflation Options Available	Base Policy (state variations, this product only available in CA no inflation option on base): 5% Simple 5% Compound	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound	Base Policy (state variations, this product only available in CA no inflation option on base): 5% Simple 5% Compound	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound	Base Policy (state variations, this product only available in CA – no inflation option on base): 5% Simple 5% Compound	COB Rider: 2% Compound 3% Compound 4% Compound 5% Compound	3% Simple 3% Compound 5% Simple 5% Compound	3% Simple 3% Compound 5% Simple 5% Compound	
Ir	International Benefits	CA: Base: 100% for 12 months per insured Extension: None Type of Care: Facility only	All other states (this product not	CA: Base: 100% for 12 months per insured Extension: None Type of Care: Facility only	All other states (this project not	CA: Base: 100% for 12 months per insured Extension: None Type of Care: Facility only	All other states (this product not	Base: 50% COB: 50% Type of Care: No restrictions	Base: 50% COB: 50% Type of Care: No restrictions	
					Please see	the LTC and CI Foreign National & Foreign Travel Details Cheat Sheet for add		litional details		
T			COB Rider:		COB Rider:		COB Rider:	Single Premium	Single Premium	
		Base Policy:	Single Premium	Base Policy:	Single Premium	Base Policy:	Single Premium	5-Pay	5-Pay	
P	Premium Duration	NQ Annuity 1035 Life Insurance Cash Value 1035	10-Pay 20-Pay	Qualified Rollover	10-Pay 20-Pay	10 - 20-Pay Pay to 100	10-Pay 20-Pay	7-Pay 10-Pay	7-Pay 10-Pay	
			Pay to 100		Pay to 100	,	Pay to 100	15-Pay	15-Pay	
Sa	Source of Funds	Non-qualifie	ed Annuity only	Qualified Assets only Annuities: No		Non-Qualified Funds: Yes Qualified Funds: No		Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA, etc.)	Non-Qualified Funds: Yes Qualified Funds: Indirectly (via SPIA, etc.)	
						Annuities: No		Annuities: No	Annuities: No	
R	Return of Premium	Base Policy: Yes	COB: No	Base Policy: Yes	COB: No	Base Policy: Yes	COB: No	Vested: 100% starting year 6.	100% ROP - subject to vesting schedule 100% vesting in year 6 75% ROP LTC Boost	
LI	LTC Premium Tax Deductibility	Yes		Yes		Yes		Yes	Yes	
-	Critical Illness Rider Included	None		None		None		None	None	
R	Residual Death Benefit	None		None		None		Lesser of 10% of initial Specified Amount or \$10,000	Lesser of 10% of initial Specified Amount or \$10,000	
R	Reduced Paid Up Option	No		No		No		Yes	Yes	
					<u>P</u>	ease see the ABLTC Reduced Paid Up	Options Cheat Sheet for additional d			
Tr	Trust Ownership Allowed	Ownership Allowed Yes		No		Yes		Yes	Yes	
w	Waiver of Premium	Base Policy: No	COB: Yes	Base Policy: No	COB: Yes	Base Policy: Optional WOP Rider	COB: Yes	No	Yes	
	Waiwas af Daliau Ch	No		No		No		No.	N.	
	Waiver of Policy Charges	Only available is C.t.						No	No	
	States Not Available Additional Details	Only available in CA 25 year maximum age difference for joint insureds.		Only available in CA 25 year maximum age difference for joint insured;; Both insured must be Table 4 or better.				Only available in CA	CA, NY Online Part 2 Available on eApp (Client Collaboration) Cognitive Assessment will be a phone call for clients 56 and above separa online Part 2	

			0	morica	<u></u>	Amorica	-0	Amorica	
	Carrier Name Product Name	Global Atlantic Eorecare	I	America ity Care		America ity Care II		America Annuity Care	
	Product Type	Fixed Annuity	Fixed Annuity		Fixed Annuity		Indexed Annuity		
2	Type of Coverage	LIC	LTC		LTC		LTC		
entals	LTC License Required?	Yes	Yes		Yes		Yes		
ame	Issue Ages	50 - 80	50 - 87		40 - 80		40 - 85		
Fundan	Couple's Discount	Yes. Both partners must apply	No		No		No		
Product F	Minimum Death Benefit	\$35,000	No Minimum Death Benefit		No Minimum Death Benefit		No Minimum Death Benefit		
Pro			Minimum Premium \$10,000		Minimum Premium \$10,000		Minimum Premium \$50,000		
	Maximum Death Benefit	Single Insured: \$400,000 Joint Insured: \$600,000	No Maximum Death Benefit No Maximum Death Benefit Maximum Premium \$500,000 Maximum Premium \$500,000		No Maximum Death Benefit Maximum Premium \$500,000				
ails	Underwriting Type	Simplified	Simplified		Simplified		Simplified		
vriting Details	Phone Interview	Cognitive interview only for applicants over 70	Base: No	COB Rider: Yes	Yes		Base: No	COB Rider: Yes	
ting	Medical Records	No	No		No		No		
2	Paramed	No	No		No		No		
Unde	Underwriting Classes	Standard (x2 leverage) Premier (x3 leverage)	None		None		None		
	Benefit Type	Reimbursement	Reimbursement		Reimbursement		Reimbursement		
	Lifetime Benefits	No	Available with Continuation of Be	nefits rider	No		Available with Continuation of B	enefits rider	
	Benefit Durations	Single Standard: 72 Months Single Premier: 72 Months Joint Standard: 84 Months Joint Premier: 90 Months	Single Annuitant: 36 months Lifetime	Joint Annuitants: 36 months Lifetime	Single Life: 24 months base policy with 72 months COB (36 Month COB for age 70 and above)	Joint Life: 30 months base policy with 72 months COB (36 Month COB for age 70 and above)	Single Life: 24 months 48 months Lifetime	Joint Life: 30 months 60 months Lifetime	
	Benefit Qualification	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 to cognitive impairment.	needs "substantial supervision" due	Unable to perform 2 of 6 ADL's, or to cognitive impairment.	needs "substantial supervision" due	Unable to perform 2 of 6 ADL's, or needs "substantial supervision" due to cognitive impairment.		
Details	Benefit Uses	Qualified, documentable long-term care expenses	Qualified, documentable long-ter	m care expenses	Qualified, documentable long-te	erm care expenses	Qualified, documentable long-term care expenses		
efit De	Elimination Period	Home Health: 0 Days All Other Services: 90 Days	All Services: 7 Days		All Services: 90 Days		All Services: 60 Days		
Benefit [	Inflation Options Available	5% Compound	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	
	International Benefits	None	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	
			<u>Plea</u>	se see the LTC and CI Foreign Travel	Details Cheat Sheet for additional	<u>details.</u>			
Details	Premium Duration	Single Premium	Base Policy: Single Premium	COB Rider: Single Premium 10-Pay Pay to 100	Single Premium		Base Policy: Single Premium	COB Rider: Single Premium Lifetime	
Premium D	Source of Funds	Non-Qualified Funds: Yes Qualified Funds: No Annuities: Yes	Non-Qualified Funds: Yes Qualified Funds: No Annuities: Yes		Non-Qualified Funds: Yes Qualified Funds: No Annuities: Yes		Non-Qualified Funds: Yes Qualified Funds: No Annuities: Yes		
_ <u>.</u>	Return of Premium	No	No		No		No		
	LTC Premium Tax Deductibility	No	Yes		No		Yes		
	Critical Illness Rider Included	None	None		None		None		
	Residual Death Benefit	None	None		None		None		
	Reduced Paid Up Option	NA - Single pay only	No		No		No		
			1	se see the ABLTC Reduced Paid Up (		details.			
lies	Trust Ownership Allowed	Yes	Yes		Yes		Yes		
eatr	Waiver of Premium	No	No		No		No		
lot F	Waiver of Policy Charges	Yes	No		No CT, NJ, NY		No		
Additional Product Featu	States Not Available	NY, CT 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 Initiation Protection. The Cash Surrender Value is subject to Market Value Adjustment.		CT, NH, NM, VT, NY			NY		
	Additional Details	Optional Nonforfeiture Benefit – once the contract has been in force for three years, if the LTC rider is terminated, except for reason of Maturity, death of the last surviving Insured, or maximum benefits have been paid, provides for paid-up LTC coverage equal to sum of all rider charges for the LTC coverage and any optional benefits."	Pension Protection Act (PPA) com	pliant	Pension Protection Act (PPA) con	nplianf	Pension Protection Act (PPA) compliant		

# 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.