

2015-16 Plan Year (no change from 2014-15 Plan Year)

Long Term Care Plan	
Feature	Benefit
Elimination Period	90 Days (cumulative within 730 days)
Monthly Benefit Amount	Base Plan 1: Employee-paid \$2,000 Base Plan 2: Employer-paid \$2,000 Additional employee-paid increments of \$1,000 up to \$9,000
Benefit Duration Options	3 years, 6 years or unlimited
Contract Basis	Indemnity
Covered Facilities	Nursing Home, Assisted Living, Hospice, Rehabilitation, Alzheimer's and Residential Care
Guarantee Issue	Employees up to \$6,000 monthly benefit for 6 years
Pre-existing Conditions	No pre-existing condition exclusions will apply, but chronic illness* must occur on or after the coverage effective date.
Optional Benefits	<ul style="list-style-type: none"> • 5% simple inflation, uncapped • Total home care benefit
Premium Waiver	Included in plan.
Bed Reservation	<ul style="list-style-type: none"> • 90 days for stay in acute care facility • 30 days for other temporary absence • Total of 90 days per calendar year
International Benefit	Coverage at 75% of the home care benefit for care received outside of the U.S. or Canada.
Assisted Living	100% of monthly benefit
Professional Home Care	50% of monthly benefit
Issue Ages	<ul style="list-style-type: none"> • 18+ for employees and retirees • 18 to 80 for family members
Limitations and Exclusions	<ul style="list-style-type: none"> • War or act of war, whether declared or undeclared • Chronic illness caused by intentionally self-inflicted injuries or attempted suicide, while sane. • Chronic illness caused by the commission of a crime for which the insured has been convicted under law, or caused by the insured's attempt to commit a crime under law • Chronic illness caused by alcoholism, alcohol abuse, drug addiction or drug abuse • Any period of time while the insured is chronically ill and confined in a hospital, other than if the insured is confined to a long term care facility that is a distinctly separate part of a hospital – does not apply to bed reservation benefit • Any period of time while the insured is chronically ill and outside of the U.S., its territories or possessions or Canada for 30 consecutive days or longer if home care benefits are not selected
Refund of Premium	Premium payments made for coverage beyond the termination date (or date of death) will be refunded
Respite Care Benefit	21 days per calendar year Respite care benefits can be paid while a person is satisfying the elimination period – the days that a respite care benefit is paid apply towards the elimination period.
Additional Care Benefit	A separate pool of \$5,000 to cover services such as equipment and caregiver training to assist the insured living at home or in other residential housing. Pool will not reduce the insured's lifetime maximum benefit and is payable during the elimination period.
Home Care by Relative	Available through Total Home Care provision.

"Chronic Illness" and "Chronically Ill" mean:

- Members are unable to perform, without Substantial Assistance from another individual, two or more Activities of Daily Living; or
- Members require Substantial Supervision by another individual to protect Members from threats to Member's health and safety due to Severe Cognitive Impairment.