

Help protect your future from life's uncertainties

GROUP LONG TERM CARE INSURANCE PROGRAM Underwritten by Genworth Life Insurance Company



*70% of people 65
or older will need
long term care
services and support
at some point.³*

Your Group Long Term Care Insurance Program

University System of New Hampshire (USNH) benefits include Group Long Term Care Insurance for newly hired USNH employees. Under the USNH Voluntary Group Long Term Care Insurance Program, coverage to help pay for long term care may be more affordable than you think.

The need

Long term care insurance enhances USNH's benefit offerings by meeting a largely unrecognized need many of us may have. It pays for covered expenses for long term care services whether they are received at home, in the community or in a nursing facility. Here are a few points to consider:

- These expenses aren't covered by either our disability or health insurance.
- Relying on government programs may not be a viable solution.
- Without insurance, the costs of these services may have to come out of savings.

The cost

Today, a private room in a New Hampshire nursing facility averages \$123,370¹ a year and costs are rising. Since the average long term care claim lasting longer than a year is 3.9 years², a long term care situation could cost almost \$481,145.

The opportunity

As a newly hired full-time USNH employee, you have the opportunity to get coverage, with no underwriting depending on your age and the plan you choose, during the first 31 days of your employment.

¹ Genworth 2016 Cost of Care Survey, conducted by CareScout, 04/2016.

² Genworth Life Insurance Company, business operations information, 12/1974 through 12/2015

³ 2015 Medicare & You, National Medicare Handbook, Centers for Medicare and Medicaid services and support, revised September 2014. For copies of this publication call 1-800-MEDICARE.

What are your basic choices?

Step 1: Choose a Monthly Benefit

This is the maximum amount you'll be reimbursed each month for covered long term care expenses. You have the following choices.

| Monthly Benefit Choices | Will Reimburse Up to This Amount For Covered: | | |
|---|---|-----------------------|------------------------|
| | Home Care | Assisted Living Care | Nursing Facility Care |
| \$ 4,500/month | \$ 4,500/month | \$ 4,500/month | \$ 4,500/month |
| \$ 6,000/month | \$ 6,000/month | \$ 6,000/month | \$ 6,000/month |
| \$ 7,500/month | \$ 7,500/month | \$ 7,500/month | \$ 7,500/month |
| \$ 9,000/month | \$ 9,000/month | \$ 9,000/month | \$ 9,000/month |
| New Hampshire cost of care¹ | \$ 4,767/month | \$ 4,800/month | \$ 10,281/month |

⁴ Genworth 2016 Cost of Care Survey, conducted by CareScout, 04/2016.

Step 2: Select Your Total Coverage Amount

This is the total amount of money available to pay covered long term care expenses for the lifetime of your coverage. You have Total Coverage choices available, depending on the Monthly Benefit you chose.

| Monthly Benefit Choices | Total Coverage Choices | |
|-------------------------|------------------------|------------|
| \$ 4,500/month | \$ 162,000 | \$ 270,000 |
| \$ 6,000/month | \$ 216,000 | \$ 360,000 |
| \$ 7,500/month | \$ 270,000 | \$ 450,000 |
| \$ 9,000/month | \$ 324,000 | \$ 540,000 |

For more information or to enroll:

Go to:
www.genworth.com/groupltc.

Use Group ID: **USNH**
and Access Code:
groupltc

Call:
800 416.3624

To speak with a Program expert or to order an information kit.

Step 3: Choose a Benefit Increase Option

This program offers 3 Benefit Increase Options to help you protect against the rising cost of care:

Buy More Coverage Over Time

Every three years, you will be offered additional coverage - as long as you're not in claims status. If you accept the offer, both your Monthly Benefit and your Total Coverage Maximum (less any claims paid) will increase by 5%, compounded annually. This feature is automatically included in your plan.

Automatic 3% Increase for Life - Compound

Your Monthly Benefit and Total Coverage Maximum (less any claims paid) will automatically increase by 3% compound every year.

Automatic 5% Increase for Life - Compound

Your Monthly Benefit and Total Coverage Maximum (less any claims paid) will automatically increase by 5% compound every year.

A simple solution can fit your needs and budget

It's easy to apply for coverage – and it may be more affordable than you think.

You can tailor a plan to meet your individual needs and your budget.

Call the toll-free number and speak with a Program Expert.

With the USNH Voluntary Group Long Term Care Insurance Program, a 45 year old can purchase comprehensive coverage starting at \$35.52 per month.⁵

A sampling of available plans for a 45 year old.

| | | | |
|-----------------|------------|------------|------------|
| Monthly Benefit | \$ 4,500 | \$ 6,000 | \$ 9,000 |
| Total Coverage | \$ 162,000 | \$ 216,000 | \$ 324,000 |
| Monthly Premium | \$ 35.52 | \$ 47.36 | \$ 71.05 |

⁵ Assumes the "Buy more coverage over time" benefit increase option.

These premiums are not guaranteed, and the insurer has the right to change rates in the future. While Genworth Life Insurance Company reserves the right to change future premiums for the Group Policy, your premiums will never increase solely due to changes in your age or your health status.

Details about benefits, costs, limitations and exclusions can be found in the outline of coverage.

This material is part of a solicitation for Group Long Term Care Insurance under Group Policy number 13014 issued to the University System of New Hampshire, on policy form series 7053, underwritten by Genworth Life Insurance Company. Form numbers can vary by state, including a state specific variation. For example, In Idaho, the certificate form number may read 7053CERT-ID, and in Pennsylvania, 7053CERT-PA.

Benefit Eligibility, Limitations and Exclusions

To understand the benefits and features available to you under this Program go to www.genworth.com/grouplhc (Group ID **USNH** and Access code **grouplhc**) or call **800 416 3624**. A brief summary of the limitations and exclusions that may apply appears below.

Eligibility for Benefits: Your Group Program can reimburse you, up to your plan limits, for the costs of covered long term care services. You qualify for reimbursement when you need assistance with 2 or more everyday activities which include bathing, continence, dressing, eating, toileting, and transferring out of a bed, chair or wheelchair, and the need is expected to last for at least 90 days; or when you need substantial supervision due to a cognitive impairment, such as Alzheimer's disease. A licensed health care professional must confirm your condition. The services must be part of your plan of care from a licensed health care professional.

Limitations and Exclusions: As with any insurance program, certain limitations apply. Charges that are not covered include those for services: • for which no charge is made • received outside of the United States • provided by your immediate family except as covered under the Informal Care benefit • for which benefits are payable by a Worker's Compensation or occupational disease act or law • provided by a Veteran's Administration or other federal government facility, unless a valid charge is made. Charges are also not covered if they are for services that are required because of: • war or an act of war • attempted suicide or self-inflicted injury • your participation in a felony, riot or insurrection • alcoholism or drug addiction.

Other Limitations on Benefits: Benefits under the Program coordinate with other group long term care insurance meaning that the sum of all benefits you receive will not exceed the actual charges. And, benefits will not duplicate benefits received under another insurance program such as: • Medicare • any state or federal worker's compensation, employer's liability, or occupational disease law • any other federal, state or government health care or long term care program (including the Community Living Assistance Services and Supports Act – CLASS Act), or law except Medicaid.

This is a summary of the limitations and exclusions. State variations may apply. The specific language may vary or change the impact of the exclusion. For example, in Oklahoma, the reference to war or act of war is qualified as "war or act of war, while serving in the military service or any auxiliary unit attached to the service..." Check your Outline of Coverage for complete details and any state variations that apply.