

FUTURE GUARDSM



Group Long Term Care Plan



For You and Your Spouse,
Siblings, Parents,
Parents-In-Law,
Grandparents,
and Grandparents-In-Law

*Underwritten by Continental Casualty Company, one of the CNA Insurance Companies

The Facts About Long Term Care

WHAT IS LONG TERM CARE?

Long term care consists of a variety of services for people who are unable to care for themselves over an extended period of time (generally 90 days or more) due to age or disability, and it can be provided in many different settings.

It can mean nursing care provided part-time or around the clock by registered nurses or other highly qualified medical professionals. This care is often received in a nursing home, but it can also be provided at home. Some examples of this type of care are administering medication which cannot be self-administered, or changing wound dressings or catheters. It could also include physical or occupational therapies.

It can also mean personal care for people with chronic health conditions or disabilities such as arthritis, cancer, Alzheimer's Disease, or Parkinson's Disease. It may not be just one service, but many different services which together assist people to function at their highest levels, despite physical limitations. This can include help with activities of daily living, such as bathing, eating, or dressing, and may be provided at home, in an assisted living facility, or a nursing home.

It can mean homemaker services for people who are receiving other long-term care services, and who also need help with meal preparation, laundry, or grocery shopping.

WHO NEEDS LONG TERM CARE?

While it is often thought that long term care is only needed for people age 65 or older, 40% of those who currently receive long term care are adults 18-64 years old who need care because of accidents, strokes, heart disease, cancer, or mental impairments.¹ 70% of people over 65 will need some type of long term care during their lifetime, with an average duration of three years.¹

HOW MUCH DOES LONG TERM CARE COST?

Long term care is an expense that many people either do not anticipate or severely underestimate. Across the United States the cost of nursing home care varies greatly by geographic location, but as a national average just one year in a nursing home costs over \$72,000 for a semi-private room and over \$80,000 for a private room.¹ The cost in many metropolitan areas is much higher.

WHO PAYS FOR LONG TERM CARE?

Most health care insurance plans, including Medicare, cover the cost of treatment for specific medical conditions. They **do not cover** long term nursing care or other services provided primarily for the purpose of meeting personal needs.

For the situations they do cover, health insurance plans, including Medicare, are designed to pay only for **short-term** skilled nursing home care or home health care, generally to help you recuperate from a hospital stay. They don't cover long-term nursing home care or any personal care, assisted living, or maintenance services.

The remaining costs are paid by the patients or by Medicaid (Medical Assistance) which is a federal-state health care program for people with limited incomes and is the **largest source of long term care funding**. Medicaid only pays for services provided to people who fall within the government's standard of poverty, often after depleting the assets they thought would last a lifetime

WHY ARE OTHER HEALTH INSURANCE AND GOVERNMENT PROGRAMS NOT ENOUGH?

Employee Health Plans typically pay only for medically necessary short-term skilled nursing care in a nursing home or in your own home. They are not designed to pay for personal care such as help with dressing, eating, and bathing, or for assisted living facility care.

Disability Income Plans replace lost wages if you are no longer able to work. That money would be needed to cover your normal living expenses like food and housing, and wouldn't be enough to also pay for someone to take care of your long term health care needs.

Medicare doesn't pay for most long term care either, but pays only for short term, post-hospital skilled nursing home care to help you recuperate, and for home health care under very limited conditions, including a requirement that you be homebound. There are no Medicare benefits for assisted living facility care.

Medicaid or Medical Assistance benefits for long term care are only available to persons who become impoverished. You can't qualify for Medicaid until most of your assets and income have been spent, and then the care you receive may not be the type of care you would prefer.

WHAT, THEN IS THE ANSWER?

Many people find that long term care insurance can bridge the gap and give them the peace of mind that comes from knowing they will be able to pay for long term care if they should need it, without depending on family members and without depleting their assets.

The Future Guard Group Long Term Care Insurance Plan is designed to give you the flexibility to choose care at home, in an assisted living facility, in other community based facilities, or in a nursing home. This protection and the options available are described in this brochure.

¹U. S. Department of Health and Human Services, 2010

The Future Guard Group Long Term Care Insurance Plan Highlights

We live in a world where each day brings us new and previously unimaginable advances in medicine and medical technology. While that means more complete, more effective long term care for millions of Americans, it also means that no one can predict exactly what form that care will take down the road. That's why the CNA Future Guard Plan is designed first and foremost to be flexible, guaranteeing that you have a wide range of options to choose from. The benefits you select for yourself today are designed to easily adapt to the innovations of tomorrow in the delivery of long term care.

Future Guard Pays For A Wide Range of Options So You Can Choose The Type Of Care You Need

Nursing Home Care • Home Health Care
Adult Day Care • Assisted Living Facility Care • Adult Foster Care
Personal Care • Maintenance Care • Hospice Care
Emergency Alert Systems • Caregiver Training
Alternate Care Plans

Who Is Eligible To Apply For The Future Guard Plan?

You (the employee) are eligible to apply, along with your spouse and family members including siblings, parents, parents-in-law, grandparents, and grandparents-in-law.

All applicants must be between the ages of 18 and 90 at the time of application.

Except for benefit-eligible actively-at-work employees during a special guaranteed issue enrollment period, all applications are subject to acceptance by the insurer based on the applicant's health.

Your Choice Of Initial Benefit Levels

Nursing Home Daily Benefit	Community Based Care Daily Benefit	Standard Lifetime Maximum Benefit	High Option Lifetime Maximum Benefit
\$100	\$60	\$100,000	\$200,000
\$125	\$75	\$125,000	\$250,000
\$150	\$90	\$150,000	\$300,000
\$175	\$105	\$175,000	\$350,000
\$200	\$120	\$200,000	\$400,000
\$225	\$135	\$225,000	\$450,000
\$250	\$150	\$250,000	\$500,000
\$275	\$165	\$275,000	\$550,000
\$300	\$180	\$300,000	\$600,000

Benefits Of The Future Guard Plan

Future Guard will pay your your actual charges up to the maximum Nursing Home Daily Benefit you choose, after the 90-day waiting period, for the following types of care received from a state-licensed or certified provider.

Nursing Home or Alternate Care Facility Care. Benefits will be paid for any level of nursing care which requires the services of a Registered Nurse, a Licensed Practical Nurse, or a Licensed Vocational Nurse, and for Custodial Care. You may choose a multi-bed room, a semi-private room, or a private room. The decision is yours to make.

Temporary Bed Holding Benefit. This allows payment of the nursing home daily benefit for up to 21 days per calendar year when you have to be away from the nursing home due to a hospital stay or other temporary event.

Hospice Care. This provides for care in a facility to alleviate physical, emotional, social, and spiritual discomforts during the last stages of a terminal disease.

Future Guard will pay your actual charges up to your maximum Community Based Care Daily Benefit, (60% of your maximum Nursing Home Daily Benefit) after the 90-day waiting period, for the following types of care received from a state-licensed or certified provider.

Home Health Care. This includes the following types of care when received at your residence: 1) Occupational therapy, physical therapy, respiratory therapy, speech therapy, or nutritional services. 2) Nursing care performed by a registered nurse (RN), a licensed practical nurse (LPN), or a licensed vocational nurse (LVN). 3) Personal Care Services provided by a home health care aide or by a medical social worker to assist you with activities of daily living, such as bathing, dressing, and eating. 4) Maintenance Services provided by a home health care aide or homemaker, including cooking, cleaning, organizing bills for payment and running errands.

Respite Care. If you are being cared for at home, and your regular caregiver needs to take a break or vacation, the plan will pay the actual cost up to your daily benefit for a companion to come to your home or for you to enter a nursing home for up to 14 days per year with no waiting period.

Adult Day Care. This is a community based program of services for people living at home who cannot be left alone. It does not include 24-hour care.

Adult Foster Care. This is a residential alternative to nursing home care for people who cannot live alone, but whose needs can be met in a private home.

Assisted Living Care. This is a living arrangement in a facility for people who cannot live totally independently because they need some assistance with activities of daily living, but who do not require the level of care available in a nursing home. If the assisted living facility meets certain standards and requirements as to staffing, services, and administration of policies and procedures, as defined in your Certificate, the plan will pay up to 100% of your Nursing Home Daily Benefit instead.

Informal Caregiver Training. This benefit provides payment for up to three times your daily benefit if an informal caregiver, such as a family member, incurs an expense to be trained to provide your care.

Emergency Alert System. This benefit pays the actual cost up to your daily benefit each month for you to rent an emergency alert system which will allow you to remain at home alone.

Hospice Care at Home. See hospice care description above. This care may also be provided at home.

Alternate Care Plans

This feature allows CNA to go outside of the contract language to develop creative solutions to an individual's long term care needs. Even if it is a bit out of the ordinary, CNA will consider paying for an alternate care

plan. Examples of this benefit would be to widen doorways in your home for wheelchair access, or to replace a family member's lost wages if he or she needed to quit their job to care for you.

Benefit Options: A Few Simple Choices For You To Make

Choice 1: Select Your Maximum Nursing Home Daily Benefit Level

You may choose the amount of your daily maximum benefit: \$100, \$125, \$150, \$175, \$200, \$225, \$250, \$275, or \$300. Community Based Care is always 60% of your Nursing Home Daily Benefit.

Choice 2: Select Your Lifetime Maximum Benefit Level

The Standard Lifetime Maximum Benefit will pay 1000 times your Nursing Home Daily Benefit, and the High Option Lifetime Maximum Benefit will pay 2000 times your Nursing Home Daily Benefit.

Choice 3: Select The Type of Inflation Protection You Want Against the Rising Costs of Care

You may choose between two different types of inflation protection option that will both help your benefits keep pace with the rising cost of long-term care:

Inflation Plan A - Future Purchase Option (FPO). This is included in the base plan, and allows you to purchase the highest possible benefit today with opportunities to increase your daily and lifetime maximum benefits every three years, if you wish. You will automatically be approved for the increase while you are actively at work. When you are no longer an active employee, you will only need to show evidence of good health to add coverage if you have declined the previous offer. Premiums for existing benefits will remain unchanged and the additional cost of each increase will be based on your age at the time of the increase. [Find your monthly premium on Chart A on Page 10 or 11.](#)

Plan B - Automatic Benefit Increase Option (ABI). For an additional fixed premium, this allows your daily and lifetime maximum benefits to increase automatically by 5% every year, compounded annually for as long as you are insured, with no corresponding annual increase in premium and with no further proof of insurability, even while you are on claim. The magic of compounding works on this increase just like it does on your savings and investment accounts. [Find your monthly premium on Chart B on Page 10 or 11.](#)

Year of Coverage	Nursing Home Daily Benefit	Community Based Care Daily Benefit	Standard Lifetime Maximum	High Option Lifetime Maximum
1	\$ 100.00	\$ 60.00	\$100,000	\$ 200,000
10	\$ 155.14	\$ 93.08	\$155,140	\$ 310,280
20	\$ 252.72	\$151.63	\$252,720	\$ 505,440
30	\$ 411.66	\$247.00	\$411,650	\$ 823,320
40	\$ 670.54	\$402.32	\$670,540	\$1,341,080

This example shows the increases for an initial \$100 per day Nursing Home Daily Maximum Benefit. To determine the amounts for other benefit levels, just multiply the amounts on the chart by the following factors: \$125 - 1.25, \$150 - 1.50, \$175 - 1.75, \$200 - 2.00, \$225 - 2.25, \$250 - 2.50, \$275 - 2.75, \$300 - 3.00.

Choice 4: Do You Want A Guaranteed Reduced Benefit If You Cancel Your Coverage?

Plan C - Benefit Account Option (BA). This includes the Automatic Benefit (ABI) Increase described as Plan B above, and also adds a provision to allow you to collect benefits even if your coverage lapses, as long as it has been in effect for at least three years. In this case, you will have a reduced lifetime maximum benefit account available to you during the balance of your lifetime. It will be equal to the total premiums you paid, or 30 times your maximum daily nursing home benefit, whichever is greater, less any claims already paid. This option adds from 14 - 23% to your Plan B premium, depending on age. Check with the Plan Administrator for exact cost.

The Pros and Cons of the Two Inflation Options

<i>FUTURE PURCHASE OPTION (FPO)</i>	<i>AUTOMATIC BENEFIT INCREASE OPTION (ABI)</i>
<i>Pros</i>	<i>Pros</i>
<ul style="list-style-type: none"> ● Upgrades are optional. ● Lower initial cost than ABI. ● Guaranteed Issue unless you decline an offer. 	<ul style="list-style-type: none"> ● Available benefits go up every year. ● Easy to budget—premium does not increase as coverage increases each year. ● Daily and lifetime benefit amounts increase automatically even if you are on claim.
<i>Cons</i>	<i>Cons</i>
<ul style="list-style-type: none"> ● Cost of upgrading coverage rises as you get older. ● Cannot upgrade when on claim. ● If not actively-at-work, must provide evidence of insurability after declining an offer. 	<ul style="list-style-type: none"> ● Costs more initially than FPO.

Additional Features Of The Future Guard Plan

YOUR BENEFITS WILL BE RECEIVED TAX FREE

This is a tax qualified plan under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Premiums, within limits, may be tax deductible and benefits will be tax-free. We recommend that you consult your tax adviser for more information.

NO CANCELLATION FOR ANY REASON

As long as you keep paying your premiums and you haven't received benefits up to your lifetime maximum, your coverage cannot be cancelled.

COVERAGE IS COMPLETELY PORTABLE

Even when in the future you are no longer employed by your current employer, your coverage will continue for as long as you continue paying your premiums, with no change in premiums unless there is a plan-wide change.

LEVEL PREMIUM RATES DO NOT INCREASE JUST BECAUSE YOU GROW OLDER

Since your premium is based on a fixed daily benefit and on your age at the time you apply, CNA can predict the appropriate premium to charge you. As a result, premiums are expected to remain level over your lifetime. CNA reserves the right to change premiums for the entire plan if necessary based on experience, but you can never be singled out for a rate increase because you get older, become ill, or file claims. If, in the future, you elect to increase your benefits with the Future Purchase Option (FPO), your premiums will be increased at that time to pay for the additional benefits.

COVERAGE FOR PRE-EXISTING CONDITIONS

If you are approved for coverage, all conditions are covered immediately, starting on your coverage effective date.

COVERAGE FOR ALZHEIMER'S DISEASE

After you are accepted for coverage, benefits are payable for Alzheimer's Disease and similar diseases of aging, subject to the other provisions of the policy.

NO TIME LIMIT ON BENEFITS

There is no time limit on the benefits you receive. Instead, you are credited with a Lifetime Maximum Benefit Amount selected by you at the time of enrollment, and if you choose the Automatic Benefit Increase (ABI) Option this amount will increase each year. You can continue to collect benefits until your Lifetime Maximum Benefit Amount is exhausted. Think of it as a special savings account reserved for your long-term care expenses.

LIFETIME MAXIMUM BENEFIT

Partial plan benefits may be used several different times during your lifetime as long as you are still covered by the plan. Your Lifetime Maximum Benefit is the total amount of benefits the plan will pay during your lifetime.

FREEDOM TO CHOOSE THE CARE YOU NEED

Your Lifetime Maximum Benefit Amount may be used for any combination of Nursing Home or Community Based Care benefits available under the plan.

BENEFITS ARE PAYABLE IN ALL 50 STATES AND U. S. POSSESSIONS

You can move to a different state and still be covered because benefits are payable for any level of care from any qualified provider in any state, the District of Columbia, and all U. S. possessions.

Additional Features Of The Future Guard Plan

LIBERAL BENEFIT ELIGIBILITY

To qualify for benefits, you must be certified as Chronically Ill by a physician, registered nurse, or licensed social worker, which means you meet one of the following two requirements:

1. You are unable to perform (without human assistance or substantial supervision from another individual) at least two Activities of Daily Living. The Activities of Daily Living are bathing, continence, dressing, eating, toileting, and transferring (moving into or out of a bed, chair, or wheelchair); **or**
2. You require substantial supervision to protect yourself from threats to health and safety due to a Severe Cognitive Impairment, such as Alzheimer's Disease.

WAIVER OF PREMIUM

While you are receiving long term care benefits, no premiums are due. If you have just paid your premium when your claim payments start, a pro-rata refund will be made to you. Waiver of premium will continue until you have not received any benefits for six months, and you will never have to pay those premiums back.

A 30-DAY FREE LOOK PERIOD

Once you receive your Certificate of Insurance, you have a full 30 days to decide if this plan is right for you. If you are dissatisfied for any reason, in any way, simply return the Certificate for a full refund of any premiums paid.

BENEFITS PAYABLE FROM THE 91ST DAY

The waiting period begins on the date you become "Chronically Ill" as described above, and ends 90 consecutive calendar days later. You do not need to receive paid long term care during this period but you must be certified as "Chronically Ill" during the entire waiting period.

A DISCOUNT HOME HEALTH CARE PROGRAM

CNA maintains an extensive list of long-term care service providers that offer discounts to our claimants, usually ranging from 10% to 15%. Use of these providers is voluntary and you may use these discount providers exclusively, on an occasional basis, or not at all.

NO PRIOR HOSPITAL STAY REQUIREMENT

No prior hospital stay is ever required, and a higher level of care is never required before receiving a lesser or different level or type of care.

PAPERLESS CLAIM PROCESS

If you need long term care services, you usually face a number of physical and emotional challenges. Too often, filing an insurance claim can turn into another one of these challenges, but not with CNA. For most claimants, there are no claim forms or in-home assessments required. Claims are handled by means of a telephone interview with a healthcare professional who verifies benefit eligibility and also serves as your care coordinator. At the time of the interview the care coordinator can also answer any questions you have about your coverage, so CNA begins to support you with the very first claim conversation.

Once your claim is established, you will send your bills to CNA for processing and payment of benefits to you. CNA also allows you to assign benefits to your provider, which allows CNA to pay the provider directly, removing you completely from the process of sending in and paying bills.

FREE CARE COORDINATION SERVICES

When the time comes that you need care, you may not know what to do or whom to call. If you choose to use CNA's Care Coordination Services, a Registered Nurse or Licensed Social Worker will be available to help you and your family. In addition to monitoring your plan of care to ensure high quality services, the care coordinator will provide advice to caregivers, referral services, and assistance locating and negotiating with local care providers. When you work with a care coordinator, you are not alone.

This is a voluntary program and you are not required to use these services, nor are you required to accept the care coordinator's recommendations. This is a free service that does not reduce any of your other benefits.

COVERAGE YOU CAN TRUST FROM CNA

The CNA Insurance Companies have been meeting customers' protection needs for over 100 years, and together the CNA Insurance Companies make up one of the ten largest insurance organizations in the country. CNA pioneered the concept of long term care insurance back in 1965 with the first nursing home policy and has proven its commitment to the long term care insurance market. CNA is a registered service mark of the CNA Financial Corporation. The CNA member company that underwrites long term care products is the Continental Casualty Company, which is rated "A-Excellent" by the A. M. Best Company.

The High Cost Of Waiting To Purchase Coverage

Your premium is based on your age on the date you sign your application. 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 don't increase just because you get older, so it makes sense to buy coverage now when you can set your premiums at the lowest possible rate.

Consider how much lower the total premiums paid will be over your lifetime if you purchase coverage at age 40 rather than waiting until age 60 or age 70 to enroll in the plan. The charts below illustrate the amount of coverage you would have to purchase at each age to end up with approximately the same amount of coverage at age 90, and they assume you would still be healthy enough to qualify for coverage at later ages. **Note: Coverage continues for as long as you continue to pay your premiums. The age 90 limit in the charts below is for purposes of these examples only.**

Plan B - Standard Lifetime Maximum With ABI			
Age Entering Plan	Total Years of Coverage To Age 90 (\$100 Plan)	Total Premiums Paid To Age 90 (\$100 Plan)	Available Benefits At Age 90 With ABI Option
40	50	\$15,186	\$1,092,230
50	40	\$17,030	\$ 670,540
60	30	\$27,000	\$ 411,660
70	20	\$37,476	\$ 252,720

Plan B - High Option Lifetime Maximum With ABI			
Age Entering Plan	Total Years of Coverage To Age 90 (\$100 Plan)	Total Premiums Paid To Age 90 (\$100 Plan)	Available Benefits At Age 90 With ABI Option
40	50	\$22,806	\$2,184,460
50	40	\$26,362	\$1,341,080
60	30	\$37,217	\$ 823,320
70	20	\$53,280	\$ 505,440

Enrolling as early in life as possible means that you save money in the long run, you benefit from more years of important protection, and you don't risk becoming uninsurable later in life when you might be unable to obtain coverage at any price due to changes in your health.

PLAN EXCLUSIONS AND LIMITATIONS ***Benefits will not be paid for the following:***

1. Loss due to or resulting from war or an act of war whether declared or undeclared.
2. Long Term Care to the extent that benefits are payable under Worker's Compensation, the Occupational Disease Act or Law or a group health plan. However, the days on which Long Term Care is received will count towards satisfying the Waiting Period and Waiver of Premium Qualification Period, subject to the provisions of the Policy.
3. Long-term care which would be provided without charge in the absence of insurance.
4. Nursing home care received in a hospital or clinic or a rehabilitation hospital, except as provided in the definition of Nursing Home; or in a facility or section of a facility which operates primarily for the treatment of alcoholics or drug addicts or the mentally ill.
5. Long term care received outside the United States and its possessions.
6. Long Term Care to the extent that benefits are payable under Medicare or would be so reimbursable but for the application of a deductible or coinsurance amount.

It's Easy To Apply

1. Choose your Daily Nursing Home Benefit of \$100, \$125, \$150, \$175, \$200, \$225, \$250, \$275, or \$300, and then choose the Future Purchase Inflation Protection Option (FPO) or the Automatic Benefit Increase Inflation Option (ABI). (See page 5 for details).
2. To calculate your premium amount, see the charts on pages 10 and 11 of this brochure. Please note that the amounts shown are **monthly premiums per person** and that each person pays based on his or her own age on the date the application is signed.

If you wish to pay annually, divide the monthly amount shown on the chart by .09 to calculate your premium.

If you wish to pay semi-annually, divide the monthly amount shown on the chart by .09, then multiply by .52.

If you wish to pay quarterly, divide the monthly amount shown on the chart by .09, then multiply by .27.

3. Choose and complete the correct application form according to the instructions on the application form(s). Each applicant should complete and sign a separate application form.
4. If you wish to pay by automatic monthly bank draft, please attach to your application a voided check from the designated bank account.
5. Submit the applications, and voided check if applicable, in the envelope provided.

Mail To: **GLTC Insurance Administrators, Inc.**
P. O. Box 28070
San Diego CA 92198-0070

Or Fax To: **(858) 451-7051**

6. No payment is due with the applications. You will be billed after your coverage is issued.

How To Obtain Help Or More Information

A Plan Administrator whose only business is group long-term care insurance is ready to answer your questions about the plan or to help you complete your application.

GLTC Insurance Administrators, Inc. (GLTC) is CNA's Group Long Term Care Insurance Plan Administrator. CNA hold your premiums, does the health underwriting, and pays the claims. GLTC answers questions from people considering the plan, provides policyholder service for those already insured, and collects all premiums.

When you call our **toll-free LTC Hotline (1-800-603-7999)** or **e-mail us at info@futureguardltc.com** you will reach a representative who will provide friendly, expert, no-pressure information, both before and after your enrollment. Our only business is long-term care insurance and we welcome your questions, whether they are about the coverage in general or about your specific account.

Premium Chart A
Inflation Protection Plan A
Future Purchase Option
Monthly Premiums Per Person

AGE	Standard Lifetime Maximum			High Option Lifetime Maximum		
	\$100/DAY	\$125/DAY	\$150/DAY	\$100/DAY	\$125/DAY	\$150/DAY
18-24	\$ 4.73	\$ 5.91	\$ 7.09	\$ 6.30	\$ 7.88	\$ 9.46
25	5.14	6.42	7.71	7.00	8.75	10.50
26	5.30	6.63	7.95	7.28	9.10	10.91
27	5.48	6.85	8.22	7.58	9.48	11.37
28	5.67	7.09	8.50	7.91	9.88	11.86
29	5.86	7.33	8.79	8.24	10.30	12.36
30	6.07	7.59	9.10	8.61	10.76	12.91
31	6.32	7.89	9.47	9.03	11.29	13.54
32	6.60	8.24	9.89	9.50	11.88	14.25
33	6.93	8.67	10.40	10.05	12.56	15.07
34	7.29	9.11	10.94	10.64	13.30	15.96
35	7.69	9.61	11.53	11.28	14.10	16.92
36	8.13	10.16	12.19	11.98	14.98	17.97
37	8.61	10.77	12.92	12.76	15.95	19.15
38	9.14	11.42	13.71	13.61	17.01	20.41
39	9.70	12.13	14.55	14.52	18.14	21.77
40	10.00	12.50	15.00	15.02	18.78	22.53
41	10.44	13.05	15.66	15.73	19.66	23.60
42	10.91	13.64	16.37	16.50	20.62	24.75
43	11.47	14.34	17.21	17.39	21.73	26.08
44	12.12	15.15	18.18	18.41	23.01	27.62
45	12.91	16.13	19.36	19.63	24.54	29.45
46	13.31	16.64	19.97	20.29	25.36	30.43
47	14.18	17.72	21.27	21.63	27.04	32.45
48	15.12	18.90	22.69	23.17	28.96	34.76
49	16.11	20.14	24.17	24.84	31.05	37.27
50	17.22	21.53	25.83	26.66	33.33	39.99
51	18.66	23.32	27.98	28.84	36.05	43.26
52	19.90	24.87	29.84	30.45	38.07	45.68
53	21.94	27.43	32.92	32.92	41.15	49.38
54	23.97	29.96	35.95	35.02	43.77	52.53
55	26.47	33.08	39.70	37.66	47.07	56.49
56	29.32	36.65	43.98	40.84	51.06	61.27
57	32.22	40.27	48.33	44.34	55.43	66.52
58	35.53	44.42	53.30	48.75	60.94	73.13
59	38.78	48.48	58.17	53.28	66.60	79.92
60	42.34	52.92	63.51	58.36	72.95	87.54
61	46.06	57.58	69.09	63.74	79.67	95.61
62	49.51	61.89	74.27	68.73	85.91	103.10
63	53.79	67.24	80.69	74.86	93.57	112.28
64	57.54	71.93	86.31	80.27	100.34	120.41
65	62.20	77.75	93.29	87.00	108.75	130.50

Premium Chart B
Inflation Protection Plan B
Automatic Benefit Increase Option
Monthly Premiums Per Person

AGE	Standard Lifetime Maximum			High Option Lifetime Maximum		
	\$100/DAY	\$125/DAY	\$150/DAY	\$100/DAY	\$125/DAY	\$150/DAY
18-24	\$ 13.50	\$ 16.88	\$ 20.25	\$ 18.01	\$ 22.51	\$ 27.02
25	14.68	18.35	22.02	20.00	25.00	30.00
26	15.15	18.93	22.72	20.79	25.99	31.19
27	15.66	19.57	23.48	21.66	27.08	32.50
28	16.17	20.21	24.25	22.54	28.18	33.81
29	16.67	20.83	25.00	23.44	29.29	35.15
30	17.20	21.50	25.80	24.39	30.49	36.59
31	17.83	22.29	26.74	25.49	31.86	38.23
32	18.53	23.16	27.80	26.69	33.36	40.04
33	19.39	24.24	29.09	28.10	35.13	42.16
34	20.31	25.39	30.46	29.63	37.04	44.45
35	21.30	26.62	31.95	31.24	39.06	46.87
36	22.34	27.92	33.50	32.93	41.16	49.39
37	23.38	29.22	35.07	34.64	43.31	51.97
38	24.34	30.43	36.51	36.24	45.30	54.36
39	25.24	31.55	37.86	37.75	47.19	56.63
40	25.31	31.64	37.96	38.01	47.51	57.02
41	25.68	32.10	38.52	38.70	48.37	58.05
42	26.16	32.70	39.23	39.55	49.44	59.33
43	26.84	33.55	40.26	40.69	50.86	61.03
44	27.69	34.61	41.54	42.07	52.58	63.10
45	28.81	36.01	43.22	43.83	54.79	65.75
46	29.09	36.36	43.63	44.32	55.40	66.49
47	30.38	37.98	45.57	46.36	57.95	69.53
48	31.90	39.88	47.86	48.88	61.10	73.32
49	33.56	41.95	50.34	51.75	64.68	77.62
50	35.48	44.35	53.22	54.92	68.65	82.39
51	38.02	47.53	57.03	58.78	73.47	88.17
52	40.07	50.09	60.11	61.34	76.68	92.01
53	43.64	54.55	65.46	65.46	81.83	98.19
54	47.07	58.84	70.60	68.77	85.96	103.15
55	51.30	64.12	76.94	72.98	91.23	109.48
56	56.02	70.02	84.03	78.03	97.54	117.05
57	60.63	75.79	90.94	83.45	104.31	125.18
58	65.65	82.06	98.47	90.08	112.60	135.12
59	70.18	87.72	105.26	96.42	120.52	144.63
60	75.00	93.75	112.50	103.38	129.23	155.07
61	80.02	100.02	120.02	110.72	138.40	166.08
62	84.64	105.80	126.96	117.50	146.87	176.25
63	91.04	113.80	136.56	126.68	158.36	190.03
64	96.83	121.04	145.25	135.09	168.86	202.63
65	104.25	130.32	156.38	145.83	182.29	218.75

To calculate rates not illustrated here, see the chart on the next page.

Please call the Plan Administrator toll-free at 1-800-603-7999 for further information or Plan C Rates.

Premium Chart A Inflation Protection Plan A Future Purchase Option Monthly Premiums Per Person						
AGE	Standard Lifetime Maximum			High Option Lifetime Maximum		
	\$100/DAY	\$125/DAY	\$150/DAY	\$100/DAY	\$125/DAY	\$150/DAY
66	\$ 67.14	\$ 83.93	\$ 100.71	\$ 94.20	\$ 117.75	\$ 141.30
67	73.63	92.04	110.45	103.64	129.55	155.47
68	80.82	101.03	121.23	114.16	142.70	171.24
69	89.03	111.29	133.54	126.18	157.73	189.27
70	98.06	122.58	147.09	139.42	174.27	209.12
71	108.58	135.73	162.87	154.79	193.49	232.19
72	120.68	150.85	181.02	172.42	215.52	258.62
73	134.77	168.47	202.16	192.91	241.14	289.37
74	150.66	188.32	225.99	215.98	269.98	323.98
75	168.18	210.22	252.27	241.39	301.74	362.09
76	187.62	234.52	281.42	269.49	336.86	404.23
77	208.29	260.36	312.43	299.28	374.10	448.92
78	230.03	287.54	345.05	330.51	413.14	495.77
79	253.32	316.66	379.99	363.90	454.87	545.85
80	277.67	347.09	416.50	398.73	498.41	598.09
81	303.62	379.52	455.42	435.80	544.75	653.70
82	330.93	413.66	496.39	474.76	593.44	712.13
83	360.32	450.40	540.48	516.66	645.82	774.99
84	392.72	490.90	589.08	562.84	703.55	844.25
85	427.60	534.50	641.40	612.51	765.64	918.76
86	466.05	582.56	699.08	667.25	834.06	1,000.87
87	507.43	634.29	761.15	726.13	907.66	1,089.19
88	551.36	689.20	827.04	788.59	985.74	1,182.89
89	599.09	748.87	898.64	856.43	1,070.54	1,284.65
90	650.96	813.70	976.44	930.11	1,162.64	1,395.17

Premium Chart B Inflation Protection Plan B Automatic Benefit Increase Option Monthly Premiums Per Person						
AGE	Standard Lifetime Maximum			High Option Lifetime Maximum		
	\$100/DAY	\$125/DAY	\$150/DAY	\$100/DAY	\$125/DAY	\$150/DAY
66	\$ 112.10	\$ 140.12	\$ 168.14	\$ 157.27	\$ 196.59	\$ 235.91
67	122.02	152.52	183.03	171.75	214.69	257.63
68	132.40	165.49	198.59	187.01	233.76	280.51
69	143.89	179.86	215.83	203.93	254.91	305.90
70	156.15	195.19	234.23	222.00	277.51	333.01
71	170.11	212.64	255.17	242.51	303.13	363.76
72	186.08	232.59	279.11	265.85	332.31	398.77
73	204.21	255.27	306.32	292.31	365.39	438.46
74	223.69	279.62	335.54	320.69	400.86	481.03
75	244.74	305.92	367.11	351.28	439.10	526.92
76	268.02	335.03	402.03	384.98	481.23	577.47
77	293.39	366.74	440.09	421.55	526.94	632.33
78	320.95	401.19	481.43	461.14	576.43	691.72
79	351.28	439.10	526.92	504.61	630.76	756.91
80	383.71	479.64	575.57	551.01	688.76	826.51
81	419.57	524.46	629.35	602.23	752.79	903.35
82	457.31	571.64	685.96	656.07	820.08	984.10
83	497.92	622.40	746.89	713.97	892.46	1,070.96
84	542.71	678.38	814.06	777.79	972.23	1,166.68
85	586.42	733.03	879.64	840.01	1,050.01	1,260.02
86	630.28	787.85	945.42	902.37	1,127.97	1,353.56
87	676.58	845.72	1,014.87	968.17	1,210.21	1,452.26
88	724.64	905.81	1,086.97	1,036.44	1,295.54	1,554.65
89	775.97	969.96	1,163.96	1,109.29	1,386.61	1,663.93
90	830.75	1,038.44	1,246.13	1,187.00	1,483.75	1,780.50

Premium rates are based on your actual age on the date you sign your application.

To calculate the monthly rate for higher benefit levels, choose the benefit level below and multiply the rate for \$100 per day at your current age by the factor at right.

Daily Benefit Level	Factor
\$175	1.75
\$200	2.00
\$225	2.25
\$250	2.50
\$275	2.75
\$300	3.00

Continental Casualty Company



CNA Plaza
Chicago, Illinois 60685

A Stock Company

Continental Casualty Company
Plan Administrator:
GLTC Insurance Administrators, Inc.
P. O. Box 28070
San Diego CA 92198-0070
1-800-603-7999

TRADITIONAL LONG TERM CARE INSURANCE OUTLINE OF COVERAGE

Policy: 9773 or 9774

THIS OUTLINE OF COVERAGE IS A QUALIFIED LONG TERM CARE
INSURANCE PLAN UNDER THE FEDERAL TAX CODE

THIS POLICY IS NOT APPROVED FOR MEDICAID ASSET PROTECTION UNDER THE ILLINOIS LONG TERM CARE PARTNERSHIP PROGRAM. HOWEVER, THIS POLICY IS AN APPROVED TRADITIONAL LONG TERM CARE POLICY UNDER STATE INSURANCE REGULATIONS. FOR INFORMATION ABOUT POLICIES AND CERTIFICATES APPROVED UNDER THE ILLINOIS LONG TERM CARE PARTNERSHIP PROGRAM, CALL THE SENIOR HELPLINE AT THE DEPARTMENT ON AGING AT 1-800-252-8966.

In this outline of coverage the Continental Casualty Company is referred to as "we," "our" or "us." The insured is referred to as "you" or "your."

Caution: If you complete an application to obtain this coverage, please be advised that issuance of coverage is based upon your responses to the questions in that application. If your answers are incorrect or untrue, we have the right to deny benefits or rescind your coverage.

If your age has been misstated, the benefit will be in an amount that the premiums paid would have purchased at your true age. If coverage would not have been issued, we will refund the premium paid.

A copy of the application or the enrollment form, as applicable, is attached to your certificate. The best time to clear up any questions is now, before a claim arises! If, for any reason, any of your answers are incorrect, contact the Plan Administrator, GLTC Insurance Administrators, Inc., P. O. Box 28070, San Diego CA 92198-0070, 1-800-603-7999.

- 1. TYPE OF POLICY.** The policy is a group policy issued to the National Long Term Care Insurance Trust (Policy 9773) or the Employees Long Term Care Insurance Trust (Policy 9774) in the state of Illinois.
- 2. PURPOSE OF OUTLINE OF COVERAGE.** This outline of coverage provides a very brief description of the important features of your coverage. You should compare this outline of coverage to outlines of coverage for other policies available to you. This is not the insurance contract but only a summary of coverage. Only the actual policy provisions will control. The policy itself sets forth in detail both your rights and obligations and ours. It is therefore important that you **READ YOUR CERTIFICATE CAREFULLY!**
- 3. TERMS UNDER WHICH YOUR COVERAGE MAY BE CONTINUED IN FORCE OR DISCONTINUED.**

RENEWABILITY. THE POLICY IS GUARANTEED RENEWABLE. This means you have the right, subject to the terms of the policy, to continue the policy as long as you pay your premiums on time. Continental Casualty Company cannot change any of the terms of the policy on its own, except that in the future, IT MAY INCREASE THE PREMIUM YOU PAY.

NON-RENEWAL. We will not unilaterally non-renew the policy. The holder may elect not to renew the policy at any time by written notice to us. Coverage may be continued as provided below if the policy is not renewed.

CONTINUATION OF COVERAGE. You become eligible to elect continuation of coverage on the date your coverage under the policy terminates. Coverage will be continued under the continuation of coverage policy with the same benefits and provisions as under your old policy. If you elect continuation of coverage, your coverage under the new policy is effective as of the date your coverage under the old policy terminates. You may not continue coverage if termination is due to nonpayment of premium or to the lifetime maximum benefit being reached.

CONTINUATION OF COVERAGE DUE TO DEATH OR DIVORCE OF SPOUSE. If you are no longer eligible for coverage due to the death of, or divorce from, your spouse, your coverage will continue in force under the policy, subject to its provisions.

WAIVER OF PREMIUM. We will waive premiums starting with the first premium due after you complete the waiting period stated in the attached Benefit Exhibit. We will continue to waive premiums until no benefits have been paid for 6 months.

OUR RIGHT TO CHANGE THE PREMIUM. Your premium is based on your age on your application date. Your premium will not increase because you grow older. It will remain the same unless the rates are increased for everyone in your age group; you cannot be singled out for a rate increase for any reason.

4. TERMS UNDER WHICH THE CERTIFICATE MAY BE RETURNED AND PREMIUM REFUNDED.

You have the right to return your certificate within 30 days for a refund of the initial premium if you are not satisfied with the coverage.

5. THIS IS NOT MEDICARE SUPPLEMENT COVERAGE. If you are eligible for Medicare, review the Medicare Supplement Buyer's Guide available from the insurance company.

Neither we nor our agents represent Medicare, the federal government or any state government.

6. TRADITIONAL LONG TERM CARE COVERAGE. Policies of this category are designed to provide coverage for one or more necessary or medically necessary diagnostic, preventive, therapeutic, rehabilitative, maintenance, or personal care services, provided in a setting other than an acute care unit of a hospital, such as in a nursing home, in the community or in the home.

This policy provides coverage as described in the Benefits Provided by the Policy provision and the attached Benefit Exhibit. They may be limited as provided in the Limitations and Exclusions provisions.

7. BENEFITS PROVIDED BY THE POLICY. Benefits are payable for Qualified Long Term Care services received as part of a plan of care if you are Chronically Ill.

LONG TERM CARE BENEFIT FOR NURSING HOME CARE. The benefit payable for nursing home care is stated in the attached Benefit Exhibit. Nursing home care consists of nursing care and custodial care. It must be received in a nursing home licensed by the state in which it is located and which meets the other requirements stated in the policy. A nursing home may be a free standing facility or a ward, wing, unit or swing bed of a hospital or other institution.

LONG TERM CARE BENEFIT FOR COMMUNITY BASED CARE. The benefit payable for community based care is stated in the attached Benefit Exhibit. Community based care consists of home health care, adult day care, assisted living care and adult foster care. It must be received from a provider which is licensed or certified by the state in which it is located and which meets the other requirements stated in the certificate. We will waive the licensing and certification requirement for adult day care centers in states which do not regulate these facilities, providing they are certified by a recognized accrediting agency.

LONG TERM CARE BENEFIT FOR HOSPICE CARE. The benefit payable for hospice care is stated in the attached Benefit Exhibit. Hospice Care can be received in a Hospice Care Facility or at your home. In order to receive benefits, it must be certified by a physician that you are expected to live less than 6 months. If care is in a facility, it must be a stand-alone facility or ward/wing of a Nursing Home that specializes in hospice care and is licensed by the state in which it is located. If care is received at your home, It must be received from a provider which is licensed or certified by the state in which it is located and which meets the other requirements stated in the certificate.

ALTERNATE CARE FACILITY CARE. The benefit payable for care in an alternate care facility is stated in the attached Benefit Exhibit. This facility provides 24-hour care and qualified long term care services sufficient to support your needs if you are chronically ill. The facility must be licensed or accredited by the appropriate agency to provide such care, if such licensing or accreditation is required by the state I which care is received and which meets the other requirements stated in the certificate.

WAITING PERIOD. To receive the long term care benefit you must first complete the waiting period stated in the attached Benefit Exhibit.

LIFETIME MAXIMUM BENEFIT. We will pay the lifetime maximum benefit shown in the attached Benefit Exhibit. All amounts paid under any benefit provision in or attached to your certificate, including any payments under the Alternate Plan of Care provision, count towards this maximum.

CHRONICALLY ILL. You must be certified by a Licensed Health Care Practitioner as being unable to perform (without substantial assistance from another individual) at least 2 Activities of Daily Living for a period of 90 days due to an Activities of Daily Living Impairment or requiring substantial supervision to protect you from threats to health and safety due to a Severe Cognitive Impairment.

You will not be considered Chronically Ill unless within the preceding 12 months a Licensed Health Care Practitioner has certified that the above requirements have been met.

PLAN OF CARE. This is a program of treatment or care which is initiated and approved in writing by a Licensed Health Care Practitioner.

ACTIVITIES OF DAILY LIVING. Your inability to perform without human assistance or substantial supervision from another person at least two of the Activities of Daily Living listed and defined below.

Bathing. Washing oneself by sponge bath; or in either a tub or shower, including the task of getting into or out of the tub or shower.

Continence. The ability to maintain control of bowel and bladder function; or, when unable to maintain control of bowel or bladder function, the ability to perform associated personal hygiene, including caring for a catheter or colostomy bag.

Dressing. Putting on and taking off all items of clothing and any necessary braces, fasteners, or artificial limbs.

Eating. Feeding oneself by getting food into the body from a receptacle (such as a plate, cup or table) or by a feeding tube or intravenously.

Toileting. Getting to and from the toilet, getting on and off the toilet, and performing associated personal hygiene.

Transferring. Moving into or out of a bed, chair or wheelchair.

SEVERE COGNITIVE IMPAIRMENT. A loss or deterioration in Your intellectual capacity that is measured by clinical evidence and standardized tests that reliably measures impairment in the following areas:

1. Short term or Long term memory,
2. Orientation as to people, places or time, and
3. Deductive or abstract reasoning.

8. LIMITATIONS AND EXCLUSIONS

EXCLUSIONS. We will not pay benefits for the following:

- (a) Loss due to or resulting from war or an act of war whether declared or undeclared.
- (b) Long term care to the extent that benefits are payable under Workers' Compensation, the Occupational Disease Act or Law, or a group health plan. However, the days on which long term care is received will count towards satisfying the Waiting Period and Waiver of Premium Qualification Period, subject to the provisions of the policy.
- (c) Long term care which would be provided without charge in the absence of insurance.
- (d) Nursing Home Care received in a hospital or clinic or a rehabilitation hospital, except as provided in the definition of Nursing Home; or in a facility or section of a facility which operates primarily for the treatment of alcoholics or drug addicts or the mentally ill.
- (e) Long term care received outside the United States and its possessions.
- (f) Long Term Care to the extent that benefits are payable under Medicare or would be so reimbursable for the application of a deductible or coinsurance amount.

THE POLICY MAY NOT COVER ALL THE EXPENSES ASSOCIATED WITH YOUR LONG TERM CARE NEEDS

- 9. **RELATIONSHIP OF COST OF CARE AND BENEFITS.** Because the costs of long term care services will likely increase over time, you should consider whether and how the benefits of this plan may be adjusted. The benefit level is not guaranteed to increase over time unless an automatic benefit increase option or other inflation benefit is elected. (See "Optional Benefits" in this outline).
- 10. **ALZHEIMER'S DISEASE AND SIMILAR DEMENTIAS.** Loss due to Alzheimer's Disease and similar dementias are covered subject to the provisions of the policy.
- 11. **PREMIUM.** Premium rates are shown in the Benefit Exhibit.
- 12. **ADDITIONAL FEATURES.**

UNDERWRITING. All eligible classes may obtain coverage subject to our approval of evidence of insurability.

INTERRUPTION IN CARE. If you have completed the waiting period, we will consider the long term care for the same or for a related condition to be continuing without interruption until 6 months pass during which you receive no long term care due to such condition. When long term care for the same or for a related condition recurs, you must complete the full waiting period before benefits again become payable and premiums are again waived for long term care due to such condition.

ALTERNATE PLAN OF CARE. If you require long term care, we may pay for alternate services, devices or types of care under a written alternate plan of care. It will be developed by or with health care professionals. The plan must be mutually agreeable to you, your physician and us. It must be a medically acceptable option.

TEMPORARY BED HOLDING BENEFIT. We will pay the temporary bed holding benefit stated in the Benefit Exhibit if you are temporarily absent from the nursing home due to hospitalization or other event and continue to incur a charge for a bed in the nursing home. This benefit is payable for up to 21 days per calendar year.

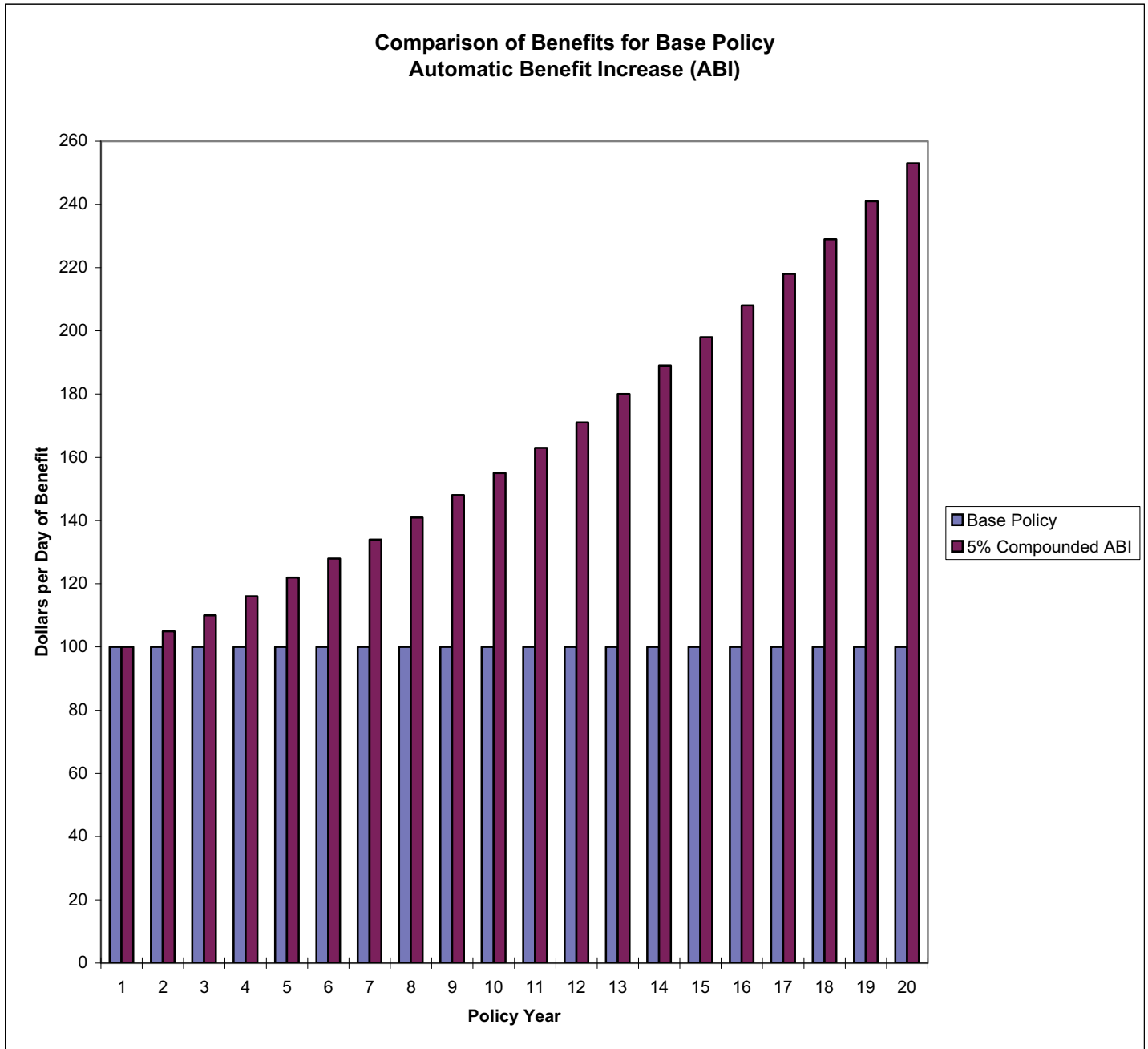
RESPIRE BENEFIT. If this benefit is elected, we will pay the respite benefit stated in the attached Benefit Exhibit. The Respite Benefit pays for care received from a Home Health Care Provider, another informal caregiver or in a nursing home so as to temporarily relieve the informal caregiver of the duties of caring for you.

CAREGIVER TRAINING BENEFIT. We will pay the caregiver training benefit stated in the attached Benefit Exhibit for training necessary for the informal caregiver to care for you in your residence.

EMERGENCY ALERT SYSTEM BENEFIT. We will pay the emergency alert system benefit stated in the attached Benefit Exhibit for the rental or lease of an emergency alert system for your residence while you are receiving benefits for community based care. This is a communication system located in your residence which is used to summon medical attention in case of a medical emergency.

13. OPTIONAL BENEFITS

LIFETIME COMPOUND AUTOMATIC BENEFIT INCREASE--AN OPTIONAL BENEFIT. If this benefit is elected, then on each anniversary of your coverage effective date, we will increase by 5% each benefit amount then in effect.



BENEFIT ACCOUNT. If you have had at least 3 years of coverage then, at lapse, we will continue your coverage in force with the same daily benefit but a shortened benefit period with no further premiums being payable.

Important Notice to Persons on Medicare

This insurance duplicates some Medicare benefits.

Some health care services paid for by Medicare may also Trigger the payment of benefits under this policy.

Federal law requires us to inform you that in certain situations this insurance may pay for some care also covered by Medicare:

- This is long term care insurance that provides benefits for covered nursing home and home health care services.
- In some situation Medicare pays for short periods of skilled nursing home care, limited home health services and hospice care.
- This insurance does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare supplement insurance.

Neither Medicare nor Medicare supplement insurance provides benefits for most long term care expenses.

Before You Buy This Insurance

- ✓ Check the coverage in all health insurance policies you already have.
- ✓ For more information about long term care insurance, review the *Shopper's Guide to Long-Term Care Insurance*, available from the insurance company.
- ✓ For more information about Medicare and Medicare supplement insurance, review the *Guide to Health Insurance for People with Medicare*, available from the insurance company.
- ✓ For help in understanding your health insurance, contact your state insurance department or state senior insurance counseling program.

INFORMATION AND COUNSELING

Some states provide information and counseling programs on long-term care insurance and long-term care services. If you reside in any of the following states, such information and counseling programs are available to you.

Alabama

ElderConnect Alabama is a statewide database of organizations which provide services to older adults and their family members. Please call 1-800-AGELINE (1-800-243-5463) for more information.

Arkansas

Arkansas will help you in choosing a Long term care facility that is suitable for your specific needs. Please write to Arkansas Division of Aging and Adult Services at

P.O. Box 1437 Slot S-530,
1417 Donaghey Plaza South
Little Rock, AR 72203-1437
or call (501) 682-2441.

California

The Health Insurance Counseling and Advocacy Program (HICAP) provides long term care insurance counseling and other health counseling to California Senior Citizens. Please call their toll-free number at 1-800-434-0222 or assessing the Department of Insurance's web site at (www.insurance.ca.gov)

Connecticut

The State of Connecticut has joined forces with private insurance companies to provide CT residents with unbiased information about the need for long term care and way to get needed care without depleting assets. Contact:

Connecticut Department of Aging
Elderly Services Division
25 Sigourney St., 10th floor
Hartford, CT 06106.

Delaware

ELDERinfo provides long term care counseling to Delaware senior citizens. For information on ELDERinfo, call 1-800-336-9500 or write to:

State of Delaware
Department of Insurance
841 Silver Lake Boulevard
Dover, DE 19904
District of Columbia

Nursing Home Services. These programs connect seniors with assisted living facilities and long term care homes specializing in nursing care. Contact:

District Office on Aging
441 4th St. NW Suite 900 S
Washington, DC 20001
or call (202) 724-5622.

Illinois

The Illinois Senior Health Insurance Program provides information and counseling to Illinois senior citizens. For information on the Illinois Seniors Health Insurance Program, contact:

Senior Health Insurance Program
Illinois Division of Insurance
320 West Washington
Springfield, IL 62767
1-800-548-9034

Kansas

The Kansas Department on Aging and the Kansas Department of Insurance have senior programs available to Kansas senior citizens. For information on these programs, contact:

Kansas Department on Aging
New England 503 S Kansas
Topeka KS 66603-3404
1-800-432-3535

Kansas Department of Insurance
420 SW 9th Street
Topeka KS 66612
1-785-296-3071

Kentucky

The Kentucky Benefits Counseling Program provides information and counseling service for persons age 60 or older.

To schedule an appointment with a benefit specialist, contact the Kentucky Division of Aging Services at: 1-502-564-6930

Louisiana

The Louisiana Senior Health Insurance Program (SHIIP) provides information and counseling to Louisiana senior citizens. For information on SHIIP, contact:

Louisiana Department of Insurance
P.O. Box 94214
Baton Rouge, LA 70804
1-800-259-5301

Maryland

The Eldercare Locator at the Administration on Aging (AOA) connects older Americans in MD and their caregivers with sources of information on senior services. You may call 1-800-677-1116 or contact the Maryland Department of Aging at:

Maryland Department of Aging
301 West Preston Street, Suite 1007
Baltimore, MD 21201
Phone: 410-767-1100
Toll Free: 1-800-243-3425
FAX: 410-333-7943

Maine

The Maine Bureau of Insurance provides assistance or information about Long Term Care insurance to Maine residents.

You may contact the Maine Bureau of Insurance at 1-800-300-5000. You may also contact them by mail at the following address or you can visit their website at maineinsurancereg.org.

Maine Bureau of Insurance
34 State House Station
Augusta, ME 04333

Massachusetts

To assist consumers and caregivers as well as professionals seeking information and resources on eldercare services, please contact:

Office of Elder Affairs
One Asburton Place, 5th Floor
Boston, MA 02108
Phone: 617-727-7750
Toll Free:
1-800-882-2003 (MA only)
1-800-872-0166 (TTY)
Fax: 617-727-9368

For questions regarding Elder Affairs programs and/or services, please call: 1-800-AGE-INFO (1-800-243-4636)

Michigan

The Michigan Office of Services to the Aging is dedicated to educating Michigan's seniors on programs and services available in Michigan to enhance the lives of its senior population. You may contact them at:

Michigan Office of Services to the Aging
7109 West Saginaw, First Floor
Lansing, MI 48917, or

You may also contact Michigan's Department of Community Health at:

Sixth Floor, Lewis Cass Building
320 South Walnut Street
Lansing, Michigan 48913
Phone: 517-373-3740

Minnesota

Department of commerce:
651-296-4026
(TTY) 651-296-2860

MN Senior Federation:
800-365-8765 or
651-221-0599
www.mnseniorfed.org

Minnesota Board on Aging:
(TTY) 1-800-627-3529
651-296-2770
www.mnaging.org

LinkAGE Line:
1-800-333-2433

Minnesota Health Information
Clearinghouse:
1-800-657-3793 or
(TDD) 651-215-8980
www.health.state.mn.us/clearinghouse

Mississippi

The Mississippi Department of Human Services, Division of Aging and Adult Services is dedicated to keeping pace with the needs of the state's older citizens and to improving their quality of life. The Mississippi Insurance Counseling and Assistance Program (MICAP), also known as the State Health Insurance Assistance Program (SHIP), is a counseling program designed to answer the elderly adult's questions about health insurance. For Information and Assistance contact:

Mississippi Dept. of Human Services
Division of Aging and Adult Services
750 N. State St.
Jackson, Mississippi 39202
Phone: 601-359-4929
Toll Free: 800-948-3090

Missouri

The state of Missouri provides free insurance counseling for senior citizens. Please contact CLAIM (Community Leaders Assisting the insureds of Missouri) at 1-800-390-3330.

Montana

If you have questions or concerns regarding senior and/or long term care, or related local services, you may directly contact the DPHHS/Senior and Long Term Care Division or at the Area Agency on Aging office in your community at:

Senior and Long Term Care Division
111 North Sanders, Room 210
Helena, Mt 59604
Phone: 406-444-4077
Fax: 406-444-7743

Aging Hotline (toll-free in Montana):
1-800-332-2272

Nebraska

The Nebraska Senior Health Insurance Information Program (SHIIP) provides information and counseling to older Nebraskans regarding Medicare, Medicaid, and health insurance. For more information, contact:

Department of Health & Human
Services
Division of Aging & Disability Services
301 Centennial Mall South
Lincoln, NE 68509
Phone: 402-471-4623
Toll Free: 800-942-7830
Fax: 402-471-4619

Nevada

The State Health Insurance Assistance Program (SHIP) volunteers offer FREE one-on-one assistance and counseling with respect to many problems seniors encounter regarding Medicare, supplemental health insurance and long-term care options. You may contact:

Nevada Department of Aging
3416 Goni Road, Building D-132
Carson City, NV 89706
Phone: 775-687-4210
Fax: 775-687-4264

New Hampshire

The Bureau of Elderly and Adult Services provides a variety of social and long-term supports to adults age 60 and older. Contact the:

New Hampshire Department of Aging
State Office Park South
129 Pleasant Street, Brown Bldg. #1
Concord, NH 03301
Phone: 603-271-4680
Fax: 603-271-4643

New Jersey

NJ EASE (New Jersey Easy Access, Single Entry) is the easy way for seniors and their families to get information about and access senior services, and help you learn about and apply for important programs and benefits. Call this toll free phone number: 877-222-3737 or contact:

New Jersey Department of Aging
P. O. Box 360
Trenton, NJ 08625-0360
Phone: 609-943-3345
Fax: 609-943-3343

New Mexico

The programs within the Consumer and Elder Rights Division assure elderly and disabled citizens of New Mexico protection of their rights to adequate standards of care and access to essential benefits, goods and services. For more information, contact the NM Aging and Long Term Services Department at:

Toney Anaya Building
2550 Cerrillos Road
Santa Fe, NM 87505
Phone: 505-476-4799;
Toll Free: 866-451-2901
Resource Center: (toll-free in NM)
1-800-432-2080

New York

Health Insurance Information, Counseling and Assistance Program (HIICAP) provides free, confidential, accurate and unbiased health insurance information, counseling and assistance. Please contact:

New York State Office for the Aging
(NYSOFA)
2 Empire State Plaza
Albany, New York 12223-1251
Hot Line: 800-342-9871

North Carolina

The North Carolina Seniors Health Insurance Information program provides information and counseling to North Carolina senior citizens. For Information on this program, please contact:

North Carolina Senior's Health
Insurance Information Program
c/o North Carolina
Department of Insurance
1201 Mail Service Center
Raleigh NC 27699-1201
1-800-443-9354

North Dakota

The Department of Human Services operates a Senior Information and Assistance Service. Contact the:

North Dakota Department of Aging
600 South 2nd Street, Suite 1C
Bismarck, ND 58504
Phone: 701-328-891
Toll Free: 800-451-8693
TDD (701) 328-8968
Fax: (701) 328-8989

Ohio

The state of Ohio provides free insurance counseling for senior citizens. Please contact the insurance department at 1-800-686-1578 for more information on the Ohio Senior Health Insurance Information Program.

Oregon

The state of Oregon Department of Human Services, among its many departments, operates programs that help seniors and people with disabilities arrange and pay for in-home and other needed services. It also licenses and monitors long-term care facilities, and develops corrective action plans for facilities that are out of compliance.

Oregon Department of Human Services
Seniors and People with Disabilities
500 Summer St. NE E02
Salem, OR 97301-1073
Phone: 503-945-5811
TTY: 800-282-8096

Oklahoma

The state of Oklahoma provides free assistance to its senior citizens at:

Oklahoma Department of Aging
2401 N.W. 23rd St., Suite 40
Oklahoma City, OK 73107-2413
Phone: 405-521-2281 or 521-2327
Fax: 405-521-2086

Pennsylvania

There are many long term care and service options available throughout Pennsylvania. Counselors on the Long Term Care Helpline will be able to provide information and refer the caller to the local agencies that can provide assistance with planning and arranging long term care services.

Long Term Care Helpline:
1-866-286-3636 or contact the following:

Commonwealth of Pennsylvania
Department of Aging
555 Walnut Street, 5th Floor
Harrisburg, PA 17101-1919
Office: 717-783-1550
e-mail: aging@state.pa.us

Rhode Island

The Rhode Island Senior Health Insurance Program (SHIP) offers information and assistance to Medicare beneficiaries and to older adults. Call the Rhode Island Department of Elderly Affairs to find the local SHIP counselor.

The Rhode Island Department of Elderly Affairs provides the services of a long term care ombudsman for residents of assisted living facilities, nursing homes, and home care clients.

Rhode Island
Department of Elderly Affairs
John O. Pastore Center
Benjamin Rush Building #55
35 Howard Avenue
Cranston, RI 02920

South Dakota

The Adult Services and Aging division of the South Dakota Department of Social Services provides opportunities that help disabled adults and older South Dakotans live independent, meaningful, and dignified lives while maintaining close family and community ties. The South Dakota Advisory Council on Aging and the Interagency Coalition on Aging also guide the development of programs and services for older South Dakotans.

Department of Social Services
Adult Services and Aging
700 Governors Drive
Pierre, SD 57501
605-773-3656
1-866-854-5465

Tennessee

The Tennessee Commission on Aging & Disability protects the rights, meets the needs, and preserves the dignity of older Tennesseans and Adults with disabilities needing home and community services through visible and effective advocacy, leadership, and stewardship.

Aging Commission of the Mid-South
Delta Area Agency on Aging
2670 Union Avenue Extended
Suite 1000
Memphis, TN 38112-4428
Tel: 901-324-6333
FAX: 327-7755
Information & Referral
901-324-2670
Web Site:
<http://www.agingcommission.org>

Texas

The Texas Department of Aging and Disability Services has toll-free and helpful numbers:

Aging Programs and Services: 1-512-438-3200
Aging Texas Well: 1-512-438-4347
Area Agencies on Aging: 1-800-252-9240
State Long Term Care Ombudsman
Program: 1-800-252-2412

Utah

The Utah Division of Aging and Adult Services has a Long Term Care Ombudsman Program to advocate for and protect the rights of residents of nursing and care homes. The program's primary purpose is to improve the quality of life, care, and environment of long-term care residents.

Also, one may contact the following:
Utah Division of Aging and Adult Services
120 N 200 W Suite 325
Salt Lake City, UT 84103
Phone: 1-801-538-3910

Vermont

The Department of Aging and Independent Living (Division of Advocacy and Independent Living) helps the resident choose the care options right for them.

There are several organizational units that comprise the Division, namely:

The Independent Living Unit: 802-214-2427
Personal Services Unit: 802-241-2402

Virginia

The Virginia Insurance Counseling and Assistance Program is available for residents of Virginia. For more information, please contact:

Virginia Dept for the Aging
1610 Forest Avenue
Suite 100
Richmond, VA 23229
1-800-552-3402

Washington

The Vision Statement of the Washington Association of Area Agencies on Aging is to provide a comprehensive and coordinated local approach to managing a home, community and residential system of services that are client centered, allow maximum flexibility and promote the efficient use of resources; emphasizing the least restrictive interventions and building on the individuals and their family's strengths and responsibility.

Washington Association of Area Agencies on Aging (W4A)
W4A Headquarters
1501 S Capital Way, #103
Olympia, WA 98501-2293
<http://www.agingwashington.org>
360-570-2239

West Virginia

Available for residents of WV is the following:

West Virginia Bureau of Senior Services
1900 Kanawha Boulevard, East
State Capitol Complex
Charleston, West Virginia 25305-0160
Telephone: 304-558-3317

Wisconsin

Bureau of Aging & Long Term Care Resources
1 W. Wilson Street, Room 450
Post Office Box 7851
Madison, WI 53707-7851
608/267-3203 Bureau Fax
608/267-9880 Bureau TTY

Wyoming

The Wyoming State Health Insurance Assistance Program (WSHIIP) offers information, counseling and assistance on long term care, Medicare supplement and other insurance issues for senior citizens. You may contact WSHIIP at 1-800-856-4398 for more information.

Things You Should Know Before You Buy Long-Term Care Insurance

Long-Term Care Insurance

- A long-term care insurance policy may pay most of the costs for your care in a nursing home and pay for care at home or other community settings. Since policies can vary in coverage, you should read this policy and make sure you understand what it covers before you buy it.
- You should **not** buy this insurance policy unless you can afford to pay the premiums every year. Remember that premiums can increase in the future.
- The personal worksheet includes questions designed to help you determine whether this policy is suitable for your needs.

Medicare

- Medicare does **not** pay for most long-term care.

Medicaid

- Medicaid will generally pay for long-term care if you have very little income and few assets. You probably should **not** buy this policy if you are now eligible for Medicaid.
- Many people become eligible for Medicaid after they have used up their own financial resources by paying for long-term care services.
- When Medicaid pays your spouse's nursing home bills, you are allowed to keep your house and furniture, a living allowance, and some of your joint assets.
- Your choice of long-term care services may be limited if you are receiving Medicaid. To learn more about Medicaid, contact your local or state Medicaid agency.

Shopper's Guide

- Included with this package is a book called the National Association of Insurance Commissioners' "Shopper's Guide to Long-Term Care Insurance." Read it carefully. If you have decided to apply for long-term care insurance, you have the right to return the policy within 30 days and get back any premium you have paid if you are dissatisfied for any reason or choose not to purchase the policy.

Counseling

- Free counseling and additional information about long-term care insurance are available through your state's insurance counseling program. Contact your state insurance department or department on aging for more information about the senior health insurance counseling program in your state.

Long-Term Care Insurance Potential Rate Increase Disclosure Form

Instructions:

This form provides information to the applicant regarding premium rate schedules, rate schedule adjustments, potential rate revisions, and policyholder options in the event of a rate increase.

Insurers shall provide all of the following information to the applicant:

1. **Premium Rate:** The Premium rate that is applicable to You and that will be in effect until a request is made and filed for an increase is shown in the Table of Premium Rates in the Outline of Coverage.
2. The premium for this policy will be shown on the schedule page of Your Certificate.
3. **Rate Schedule Adjustments:**

The company will provide a description of when premium rate or rate schedule adjustments will be effective (e.g., next anniversary date, next billing date, etc.)

4. **Potential Rate Revisions:**

This policy is Guaranteed Renewable. This means that the rates for this policy may be increased in the future. Your rates can NOT be increased due to Your increasing age or declining health, but Your rates may go up based on the experience of all policyholders with a policy similar to Yours.

If You receive a premium rate or premium rate schedule increase in the future, You will be notified of the new premium amount and You will be able to exercise at least one of the following options:

- Pay the increased premium and continue Your policy in force as is.
- Reduce Your policy benefits to a level such that Your premiums will not increase. (Subject to state law minimum standards.)
- Exercise Your nonforfeiture option.

FUTURE GUARD®

GROUP LONG TERM CARE INSURANCE FROM CNA

*If you have questions, please contact our
Plan Administrator:*

**GLTC Insurance Administrators, Inc.
P. O. Box 28070
San Diego CA 92198-0070**

**Phone: (858) 451-7050
Toll-free: (800) 603-7999
Fax: (858) 451-7051
E-Mail: info@futureguardltc.com**

New York residents, please contact:

**GLTC Insurance Agency
P. O. Box 28070
San Diego CA 92198-0070**

**Phone: (858) 451-7050
Toll-free: (800) 603-7999
Fax: (858) 451-7051
E-Mail: info@futureguardltc.com**

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This brochure is for illustrative purposes 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.

