

Premium Comparison

Premiums based on Single, Female, Preferred Non-Tobacco rates.

Traditional Long-Term Care Insurance: \$100,000 Maximum Benefit / 2-Year Plan, \$4,000 Monthly Benefit, 3% Compound Inflation, 90-day Elimination/0-Day Home Care Elimination rider

Minnesota Life CareShield: \$100,000 Death Benefit, \$4,000 Monthly Chronic Illness Benefit

Age	Company A	Company B	CareShield Premium
45	\$1,640	\$1,873	\$1,186
50	\$1,821	\$2,011	\$1,487
55	\$2,047	\$2,058	\$1,791
60	\$2,391	\$2,419	\$2,340
65	\$2,944	\$3,118	\$2,891

Traditional Long-Term Care Insurance: \$150,000 Maximum Benefit / 2-Year Plan, \$6,000 Monthly Benefit, 3% Compound Inflation, 90-day Elimination/0-Day Home Care Elimination rider

Minnesota Life CareShield: \$150,000 Death Benefit, \$6,000 Monthly Chronic Illness Benefit

Age	Company A	Company B	CareShield Premium
45	\$2,459	\$2,810	\$1,776
50	\$2,732	\$3,017	\$2,231
55	\$3,069	\$3,087	\$2,684
60	\$3,586	\$3,628	\$3,510
65	\$4,415	\$4,678	\$4,337

Traditional Long-Term Care Insurance: \$50,000 Maximum Benefit / 2-Year Plan, \$2,000 Monthly Benefit, 90-day Elimination/0-Day Home Care Elimination rider

Minnesota Life CareShield: \$50,000 Death Benefit, \$2,000 Monthly Chronic Illness Benefit

Age	Company A	Company B	CareShield Premium
45	\$359	\$692	\$592
50	\$402	\$716	\$745
55	\$477	\$754	\$895
60	\$604	\$919	\$1,170
65	\$864	\$1,188	\$1,447



Questions? Call GoldenCare at 800-842-7799!
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Eligibility Differences Between Chronic Illness & Long-Term Care:

Chronic Illness:

Minnesota Life Policy Form ICC15-20033 "CareShield," page 9 (benefits) & page 3 (definitions) -
What are the eligibility requirements for the payment of chronic illness benefits?

In order for chronic illness benefits to be payable, the following requirements must be met:

- (1) the insured must be certified by a licensed health care practitioner as being a chronically ill individual and expected to remain so for at least 90 calendar days; and
- (2) the insured must be receiving services covered under this policy which are specified in a plan of care; and
- (3) the plan of care must be submitted to us; and
- (4) the chronic illness elimination period must be satisfied; and
- (5) the policy must be in force.

chronically ill individual

An insured who has been certified by a licensed health care practitioner within the preceding twelve-month period as:

- (1) being unable to perform, without substantial assistance from another person, at least two activities of daily living due to a loss of functional capacity for a period of at least 90 days; or
- (2) requiring substantial supervision to protect the insured from threats to health and safety due to severe cognitive impairment.

Long-Term Care:

Traditional Long Term Care Policy Form ICC13-LTC13-AG-20033, page 8 -

ELIGIBILITY FOR THE PAYMENT OF BENEFITS

To be eligible for the payment of benefits under all provisions of your policy, you must meet the following requirements:

- (a) You must be *chronically ill*; and
- (b) We must receive a written *plan of care* from a *licensed health care practitioner* prescribing *qualified long-term care services*.

Chronically Ill means:

- (a) you are unable to perform at least two *activities of daily living* without *substantial assistance* from another person who is physically present with you, for a period that is expected to last at least 90 consecutive days due to a loss of functional capacity; or
- (b) you require *substantial supervision* to protect yourself from threats to health and safety due to a *severe cognitive impairment*.

You will only meet the definition of chronically ill if, within the preceding 12 months, a licensed health care practitioner has certified that you meet such requirements.

There Is No Difference!

Having alternative options and a strong sales strategy is just as important as having a diverse portfolio and working lead generation system.

Want more information? Call GoldenCare at 800-842-7799!