

GoldenCare - Long-Term Care Product Comparison Grid

	MUTUAL OF OMAHA Custom Solution	GENWORTH Privileged Choice Flex 3 Enhanced	TRANSAMERICA TransCare III	NATIONAL GUARDIAN LIFE (NGL) EssentialLTC	UNITED SECURITY ASSURANCE LifeStyle Solutions
AM Best Rating	A+	B	A+	A-	C
Issue Ages	Ages 30-79	Ages 40-75	Ages 18-79	Ages 40-79 (Age Nearest)	Ages 40-85
Partner/Spouse Discounts	30% both insured, 15% one insured, plus 15% good health	Built into pricing structure, 15% discount if 1 applies/issued	30% both insured, 15% one insured, plus 10% good health	Joint Rates based on female rates at older insured's age; Single rates	20% both insured, 15% one insured, plus 10% good health
Market Niche	First-Day Cash + Traditional Reimbursement in one policy. All benefits paid on a monthly basis, with client-oriented built-in features & benefits that emphasize flexibility, and can fit almost any budget.	Enhancements were made to the existing Privileged Choice Flex 3 plan to improve its competitive position and increase consumer value.	TransCare III is a tax-qualified plan, with a built-in Cash Benefit, 0-Day EP for HHC & ADC, 3-year Rate Guarantee, and ROP before-age 67. It offers valuable protection for life's unexpected events.	The EssentialLTC was designed as a stand-alone Long-Term Care insurance policy with riders that encompass all the benefits of a Combo product. It stands out by including a 10-Pay option and the ability to offer Lifetime coverage.	LifeStyle Solutions ("LSS") is a tax-qualified plan, with 4 underwriting classes. In addition, the LifeStyle Solutions Select "LSS-Select" can provide coverage to clients who may not medically qualify elsewhere.
Cash Availability	Cash = 40% of Monthly HHC No bills to submit. No Elimination Period	None	Cash = 33% of Monthly HHC No Elimination Period	None; Reimbursement Only	None
Informal Care Provided by Friends & Family	Monthly Cash paid, no bills to submit when partner, friends, family provide care. No EP	Informal HHC Option pays Homemaker & Chore Care up to 50% of HHC Maximum	Yes, only if receiving their cash benefit.	Excluded unless family member is licensed or regular employee of HHC agency.	Excluded unless family member is licensed or regular employee of HHC agency.
Benefit Dollar Range	\$1,500-\$10,000 (\$50 Increments)	Daily: \$50 to \$300 or Monthly: \$1,500 to \$9,000	Daily: \$50 to \$500 (\$10 Increments)	Daily: \$50 to \$300 (\$10 Increments)	Daily: \$50 to \$350 (\$10 Increments)
Benefit Period or Maximum Policy Amount	\$50,000-\$500,000 (\$500 Increments, equalling between 2.08 and 8.33 years)	1, 2, 3, 4 or 5 Years	1, 2, 3, 4, 5, or 6 years, OR \$18,250-\$1,095,000 (\$500 Increments)	2 and 3 years - Optional Benefit Extension Riders available resulting in 4, 5, 6 year, or Lifetime).	1, 2, 3, 4, or 5 years
Elimination Period Options	0, 30, 60, 90, 180 or 365 days Calendar Day	30, 90, 180 or 365 days Service Day, Optional Calendar Day Rider	0, 30, 60, 90, 180, or 365 days Calendar Day	0, 30, 90, 180 days, Service Day	40, 90, 120, or 180 Calendar Day
Inflation Options	Lifetime: 1% - 5% Compound in .25% increments 10, 15, 20 Year with Buy-Up	2%, 3%, 4%, 5% Compound 5% Simple, 3% FPO, Increase Coverage Option	Deferred, Step-Rated 3% or 5%, Tailored, Compound 5%	3% or 5% Compound, or 3% or 5% Step-Rated	Compound: 3% or 5% Simple: 3% or 5%
Optional Riders	0-Day HHC EP Waiver, 200% Prof. HHC, Nonforfeiture, Shared Care, Joint Waiver of Premium, Survivorship, Security (Uninsured Partner), ALF & HHC Options: 50%, 75% Return of Premium Death Benefit (Less Claims): 3x MMB, Death Before Age 65, Death at Any Age	0-Day HHC EP Waiver, Nonforfeiture, Monthly Benefits, Calendar Day EP Rider, ALF & HHC Options: 50%, Increase Coverage Option, Informal HHC Option, Optional Waiver of Premium, Shared Benefit Rider: includes Shared Care and Joint Waiver of Premium	EP Credit Rider, Monthly Benefits, Nonforfeiture, Full Restoration of Benefits, Shared Care, Joint Waiver of Premium, Return of Premium Death Benefit	Premium: Single-Pay, 10-Pay, Lifetime, Benefit Extension Riders (extends 3-year to 4, 5, 6 year or Lifetime), Waiver of Premium, (for HHC), First Day HCCS Rider, Shared Benefit Amount, Return of Premium (Full or Limited), Facility-Only or Comprehensive, Nonforfeiture	Nonforfeiture (HHC & ADC: 100% of Daily Benefit) <u>LSS-Select:</u> \$50 to \$150/day (\$10 Increments) 1 year: 90, 120 or 180 EP 1 or 2 year: 120 or 180 EP 1, 2 or 3 year: 180 EP HHC & ADC: 50% of Daily Benefit
State Availability (Benefits & Options may vary by state)	All 50 States	All States Except: CA, FL, HI, MA, NH, VT	All States Except: AZ, CT, DE, IN, MT, ND, NY, SD	All States Except: CA, FL, HI, MT, NJ, NY	Only Available In: AZ, CO, GA, IL, IN, KY, LA, MD, MO, NC, ND, NE, OK, PA, SC, SD, TX, WA