

Talking with your clients about the need to plan for long-term care is a critical conversation about their future, yet it's not always easy getting people to open up about this potentially sensitive subject. This guide will help you start the long-term care insurance conversation with your customers, and also help address some of the potential objections you may receive.

Start With Open-Ended Questions

Asking simple, open-ended questions can be a good way to get people talking about their families, their finances and their plans for the future.

Who do you know?

"You probably know someone who's needed long-term care services. Maybe you've been a caregiver yourself. It can take an emotional, physical and financial toll on the family. Let's make sure that doesn't happen to yours."

What's your plan?

"Most people tell me their plan is to live a long life, but oftentimes they fail to consider what that means. As people age, they typically need help at some point. Let's talk about how your plan to live a long life could impact your family. Have you thought about who will take care of you or where you will live?"

How will you pay?

"Many people believe Medicare will cover all their long-term care needs, but Medicare is health insurance, and is limited only to helping people get back on their feet after an illness or injury. Does your plan for retirement include paying for long-term care services out of your own pocket?"

Anticipate Common Objections

Many of the people you talk with may have preconceived ideas about long-term care. Here are six ways you can set the record straight and engage your clients in a meaningful conversation.

"What happens if I never need long-term care?"

No one thinks they will need help as they get older. However, the longer you live, the more frail you become. In fact, it's estimated over 70% of people who reach age 65 will need some form of long-term care services during their lifetime.

"I can't afford long-term care insurance."

When it comes to paying for long-term care expenses, most people find they can't afford not to have a policy. Especially when you consider the cost of home health care is approaching \$60,000* a year and a nursing home costs nearly \$112,000* a year. On the other hand, the monthly cost of a policy can be affordable. Let's talk about your budget.



"I'm already covered by Medicare or Medicaid."

Medicare may not cover what you think it does. Many people mistakenly believe Medicare will pay for long-term care services. However, Medicare offers only limited coverage for a period of time and Medicaid is for the impoverished and requires you to spend down your assets to qualify for benefits.

"Long-term care is only for older people."

Accidents and illnesses requiring long-term care services can happen to people of any age. In fact, research shows that the age of claimants is lowering, with 40 percent of caregivers are caring for someone age 50 to 74.** So, purchasing a long-term care insurance policy when you're young and in good health not only saves you money on your premium, but it also helps to ensure you can qualify for coverage.

"My family will take care of me."

Your family loves you and they'll do their best to help, but your kids have their own careers, hobbies and family responsibilities to consider. What does that mean for your children's lifestyle? They may not be able to provide all the care you need. Let's discuss how long-term care insurance can balance the care you receive with family and professional services.

"I'll pay for it myself."

Even if you have sufficient assets, you may not have easy access when you need them. Have you thought about which assets you would consider liquidating to pay for long-term care services? What were those assets originally earmarked for? Were they for traveling the world or leaving a legacy to your family?

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^{*}Mutual of Omaha's Cost-of-Care Study, Conducted by LTCG, 2020, Released April 2021

^{**} https://www.aarp.org/content/dam/aarp/ppi/2020/05/full-report-caregiving-in-the-united-states.doi.10.26419-2Fppi.00103.001.pdf, page 22