*Not Contracted Yet? Call us today to boost YOUR sales!* **800-842-7799**
marketing@goldencareusa.com | www.goldencareagent.com

# WELCOME!

Thank you for joining us!

*For audio, use your computer's speakers, OR dial in using the number on your screen.*

## Why GoldenCare?

- Perfect Portfolio of Products
- Superior, Personal Backend Support
- Product and Sales Training
- LTC CEO Selling Tools Software
- GoldenCare Rewards Program
- CSG Actuarial Comparison Tools
- StrateCision Comparison Tools
- Discounted E&O Coverage
- Exciting Promotions On Various Products
- CareOptions Health and Wellness Hub

# *PIVOT - Part I: Intro to the Pivot Concept*

1

GOLDENCARE
Planning Today For A Secure Tomorrow
AN INTEGRITY COMPANY

**Your Presenter Today:**

**Tom Randall**
National Marketing Director
GoldenCare

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| (C) Pre-Qualification, Medical Information & Exclusions | Applicant 1 | Applicant 2 |
|---|---|---|
| **If any applicant answers "YES" to any questions 1, 2 or 3 A-H below, that applicant does not qualify for this coverage:** | | |
| 1. Is any applicant currently eligible for Medicaid or on early Medicare due to disability (prior to age 65) or disabled? | Yes☐ No☐ | Yes☐ No☐ |
| 2. In the past 10 years has any applicant been treated or diagnosed by a medical professional as having acquired immune deficiency syndrome (AIDS), AIDS related complex (ARC) or human immunodeficiency virus (HIV) infection? | Yes☐ No☐ | Yes☐ No☐ |
| 3. In the past 24 months, has any applicant: | | |
| A. Required the assistance or supervision of any kind to perform activities of daily living such as bathing, dressing, eating, toileting, getting in or out of bed or chair; have an inability to control bowel or bladder function; or need or use a wheelchair, walker, walking aids, scooter, or multi-pronged cane? | Yes☐ No☐ | Yes☐ No☐ |
| B. Been confined or advised to enter a rehabilitation facility, nursing facility or assisted living facility; or received home health care services? | Yes☐ No☐ | Yes☐ No☐ |
| C. Had a stroke, Transient Ischemic Attack (TIA); or congestive heart failure, heart or valve surgery or organ transplant (other than corneal)? | Yes☐ No☐ | Yes☐ No☐ |
| D. Been diagnosed with, or treated for, insulin dependent diabetes or diabetes with neuropathy or with eye or kidney complications? | Yes☐ No☐ | Yes☐ No☐ |
| E. Been diagnosed or treated for Alzheimer's disease, dementia, memory loss, Parkinson's disease, psychotic disorders, systemic lupus, Multiple Sclerosis, Muscular Dystrophy, cerebral palsy, ALS (Lou Gehrig's disease), or had an amputation due to a disease? | Yes☐ No☐ | Yes☐ No☐ |
| F. Been diagnosed or treated for Chronic Obstructive Lung or Pulmonary disease; chronic bronchitis or emphysema; respiratory disease requiring the use of oxygen; kidney failure, renal insufficiency, or kidney dialysis; or chronic liver disease? | Yes☐ No☐ | Yes☐ No☐ |
| G. Been diagnosed or treated for cancer (other than skin cancer), leukemia, lymphoma or malignant melanoma or cancer that has spread from its original site; or alcohol or drug abuse or crippling or rheumatoid arthritis? | Yes☐ No☐ | Yes☐ No☐ |
| H. Been advised to have tests or medical treatment or surgery that has not been performed or for which results have not been given? | Yes☐ No☐ | Yes☐ No☐ |

This is GTL's "Recover Cash STC"

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| Medical Condition | Underwriting Decision |
|---|---|
| ADL Deficit | Decline |
| AIDS/ARC | Decline |
| Alcohol Abuse | Within 24 months Decline<br>-In Recovery up to the 3 years NH only<br>-In Recovery over 3 years NH/ HHC |
| ALS (Lou Gehrig's disease) | Decline |
| Alzheimer's disease | Decline |
| Amputation | Due to Disease Decline |
| Arthritis (Crippling) | Decline |
| Cancer | Within 24 months Decline |
| Cerebral Palsy | Decline |
| Chronic Bronchitis | Decline |
| Congestive Heart Failure | Within 24 months Decline<br>Over 24 months No Home Health Rider |
| COPD | Decline |
| Dementia | Decline |
| Diabetes | Insulin Dependent or Any Complication Of Neuropathy, Retinopathy, Nephropathy Decline |
| Disabled | Decline |
| Drug Abuse | Within 24 months Decline<br>-In Recovery up to 3 years NH Only<br>-In Recovery over 3 years NH HHC |
| Emphysema | Decline |
| HIV | Decline |

| Medical Condition | Underwriting Decision |
|---|---|
| Incontinence | Within 24 months Decline<br>Over 24 months No Home Health Rider |
| Kidney Failure or Dialysis | Decline |
| Leukemia | Within 24 months Decline |
| Liver Disease (Chronic) | Decline |
| Lupus (Systemic) | Decline |
| Lymphoma | Within 24 months Decline |
| Malignant Melanoma | Within 24 months Decline |
| Medicaid | Decline |
| Medicare Disability | Decline |
| Memory Loss | Decline |
| Metastatic Cancer | Decline |
| Multiple Sclerosis | Decline |
| Muscular Dystrophy | Decline |
| Organ Transplant | Within 24 months Decline<br>Over 24 months No Home Health Rider |
| Oxygen Use | Decline |
| Parkinson's disease | Decline |
| Psychotic Disorders | Decline |
| Renal Insufficiency | Within 24 months Decline<br>Over 24 months No Home Health Rider |
| Rheumatoid Arthritis | Decline |
| Stroke | Within 24 months Decline<br>Over 24 months No Home Health Rider |
| Transient Ischemic Attack (TIA) | See Stroke |

This is GTL's "Recover Cash STC"

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**Answer all questions.**

**If any answers to questions in section 3 are "yes", the application will be declined.**

*This is Aetna's "Recovery Care STC"

1. Are you currently:
   - A. confined to a hospital or nursing facility? ○ Y ○ N
   - B. bedridden or receiving any type of home health care? ○ Y ○ N
   - C. dependent on a walker, cane, wheelchair, or motorized mobility device? ○ Y ○ N
   - D. require assistance in performing everyday acitivities such as walking, eating, dressing, shopping, housekeeping, toileting, or bathing? ○ Y ○ N
2. Within the past 36 months have you been diagnosed or treated by a medical professional or had surgery for any of the following:
   - A. congestive heart failure, kidney disease, Cirrhosis, Paget's disease, lupus or any connective tissue disorder? GTL = Dialysis
   - B. internal cancer (including breast cancer and prostate cancer), leukemia, lymphoma or melanoma? ○ Y ○ N
   - C. Alzheimer's disease, dementia, Parkinson's disease, cerebral palsy, multiple sclerosis, or any other neurological or neuromuscular disorder? ○ Y ○ N
   - D. acquired immune deficiency syndrome (AIDS), AIDS related complex (ARC), or tested positive for the Human Immunodeficiency Virus (HIV)? ○ Y ○ N
3. Within the past 24 months have you:
   - A. been prescribed the use of oxygen by a medical professional? ○ Y ○ N
   - B. had any type of amputation caused by disease? ○ Y ○ N
   - C. been treated for transient ischemic attack (TIA), CVA or stroke? ○ Y ○ N
   - D. been hospitalized three or more times for any reason? ○ Y ○ N (Not in GTL)
   - E. had any lung or respiratory disorder requiring the use of a nebulizer or oxygen, or 3 or more medications for lung or respiratory disorder? ○ Y ○ N (Not in GTL)
   - F. been diagnosed or treated by a medical professional for mental or nervous disorder excluding anxiety or mild depression? ○ Y ○ N (Not in GTL)
4. Do you have diabetes:
   - A. that requires the use of 50 or more units of insulin? ○ Y ○ N (GTL = ANY Insulin)
   - B. with any complications resulting from the diabetes (including neuropathy, heart or artery blockage, retinopathy)? ○ Y ○ N
   - C. Do you have insulin dependent diabetes in conjunction with a heart disorder (other than high blood pressure)? ○ Y ○ N
5. Within the past 12 months, have you:
   - A. been advised by a medical professional to have treatment, further evaluation, diagnostic testing,or have test results pending? ○ Y ○ N (GTL = 24 Mos.)
   - B. been diagnosed or treated by a medical professional for any type of seizure? ○ Y ○ N (Not in GTL)
6. Within the last 12 months have you been advised by a medical professional that surgery may be required within the next year for any existing health condition including joint replacement? ○ Y ○ N (GTL = 24 Mos.)
7. Within the past 12 months, have you been recommended or advised by a medical professional to have treatment or counseling for alcohol or drug abuse? ○ Y ○ N

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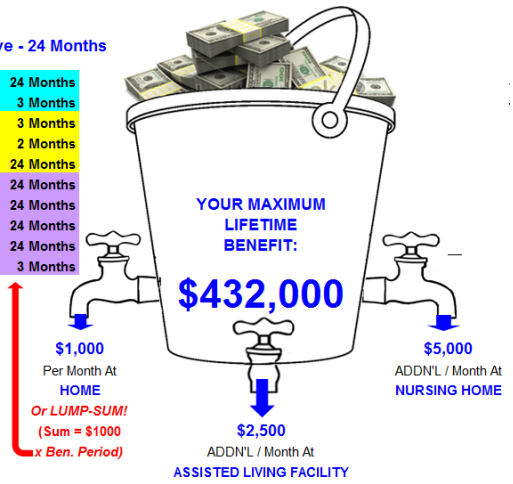
# A Quick Glance At GTL's Critical Cash…

*Plan:* **Plan A - Comprehensive - 24 Months**

*Benefits for:*

| | |
|---|---|
| Cancer | 24 Months |
| Cancer-In-Situ | 3 Months |
| Heart Attack | 3 Months |
| Coronary Artery Bypass | 2 Months |
| Stroke | 24 Months |
| Alzheimer's Disease | 24 Months |
| Kidney Failure | 24 Months |
| Major Organ Transplant | 24 Months |
| Paralysis | 24 Months |
| Coma | 3 Months |

*Allows for potential of multiple claims over the life of the policy. See the Critical Care sales brochure for details.*

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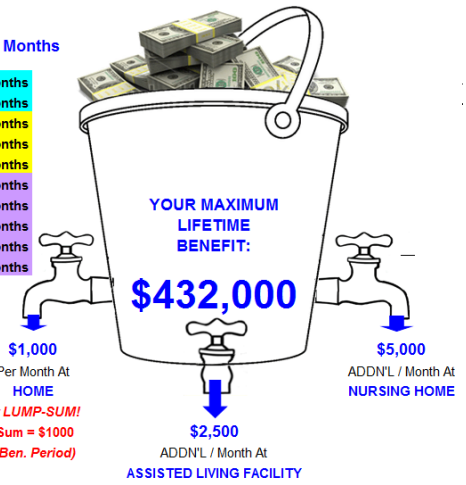
# Huge Crossover of Claims w/ LTCi…

*Plan:* **Plan A - Comprehensive - 24 Months**

*Benefits for:*

| | |
|---|---|
| Cancer ✓ | 24 Months |
| Cancer-In-Situ | 3 Months |
| Heart Attack | 3 Months |
| Coronary Artery Bypass | 2 Months |
| Stroke ✓ | 24 Months |
| Alzheimer's Disease ✓ | 24 Months |
| Kidney Failure | 24 Months |
| Major Organ Transplant | 24 Months |
| Paralysis | 24 Months |
| Coma | 3 Months |

*Allows for potential of multiple claims over the life of the policy. See the Critical Care sales brochure for details.*




Those 3 Represent 70% of LTCi Claims Paid!*

*5th Intercompany Report, Society of Actuaries, 2011

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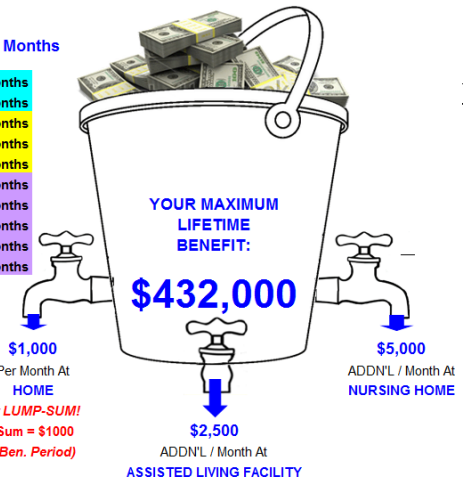
# Huge Crossover of Claims w/ LTCi…

*Plan:* **Plan A - Comprehensive - 24 Months**

*Benefits for:*

| | |
|---|---|
| Cancer ✓ | 24 Months |
| Cancer-In-Situ | 3 Months |
| Heart Attack ✓ | 3 Months |
| Coronary Artery Bypass | 2 Months |
| Stroke ✓ | 24 Months |
| Alzheimer's Disease ✓ | 24 Months |
| Kidney Failure | 24 Months |
| Major Organ Transplant | 24 Months |
| Paralysis | 24 Months |
| Coma | 3 Months |

*Allows for potential of multiple claims over the life of the policy. See the Critical Care sales brochure for details.*




Cancer, Heart Attacks & Strokes Represented 80% of New CI Claims!*

*Society of Actuaries Report & Genworth Claims Data, 2011

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## GTL Critical Cash - Where LTCi Won't Go

- No 2 of 6 ADL's
- No 90 Day Care Expectation
- No Elimination Period
- No documentation of expenses in order to be reimbursed
- No care provider definitions or licensing required
- No "chronic illness" – pays if recover or die

**Hit the Diagnosis Trigger, Get Paid Now!**

- **"Base" Benefits paid upon *Diagnosis***
- **"Facility" Benefits like LTC - need to be confined**

**Easier Triggers than LTCi**

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## GTL Critical Cash Underwriting

| Acceptable Conditions | |
|---|---|
| Social Security Disability | Mental Disorders |
| Auto-immune Disease | Depression |
| Lupus | Anxiety |
| Scleroderma | Bi-polar |
| Connective Tissue Dis. | Schizophrenia |
| Walking Aid | Memory Issues |
| ADL Limitations | (not diagnosed with dementia/Alzheimer's) |
| Severe Back Pain | |
| (unless tied to Central Nervous system) | |
| Narcotic Pain Meds | |
| (Unless ties to a covered condition) | |

**Typically not eligible for LTCi**

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## GTL Critical Cash Underwriting

**Acceptable Conditions**

- Severe Osteoporosis (even with fractures)
- Diabetes, more the 50 units & more than 20 years
- (eligible for Cancer Care Plus)
- Physical Therapy, even current and ongoing
- Joint Pain Injections
- Cancer - recent and or severe (Cardiac Care Plus)
- Pacemaker/defibrillator
- Rheumatoid Arthritis, Prednisone /Methotrexate OK
- Fibromyalgia, Narcotic Pain Meds OK
- IADL Impairments (not in a facility)
- Post Traumatic Stress Disorder

**Typically not eligible for LTCi**

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## GTL Critical Cash Underwriting

**Restricted Conditions**

- Cardiovascular impairment including Diabetes
- Limited to Plan B
- Cancer/Leukemia/Hodgkins/Melanoma
- Limited to Plan C
- **How do we address these gaps?**

**Typically ineligible for LTCi**

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# A Quick Glance At GTL's HHC Plan…

**Step 3: Pre-Qualification and Medical Information**

*If any answer to questions 1-2 is YES (or 1-3 if applying for Option C), do not submit the application.*

| | Applicant 1 | Applicant 2 |
|---|---|---|
| 1. Is the applicant currently in a nursing home/assisted living facility or receiving home health care or similar type of benefits? | ☑ Yes ☐ No | ☐ Yes ☐ No |
| 2. Is the applicant unable to perform routine Activities of Daily Living (bathing, dressing, eating, continence, toileting or transferring to or from a bed or chair without physical assistance) or cognitively impaired? | ☑ Yes ☐ No | ☐ Yes ☐ No |
| **If applying for Option C:** | | |
| 3. In the next 60 days, does the applicant expect to be admitted to a hospital, nursing home/assisted living facility or require home health care services or have surgery? | ☑ Yes ☐ No | ☐ Yes ☐ No |

VERY Light Underwriting & Powerful Benefits….

For agent use only. Not for use in sales presentations.

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# A Quick Glance At GTL's HHC…

| | Plan A | Plan B | Plan C |
|---|---|---|---|
| Skilled nursing care, RN | $75 | $150 | $200 |
| General nursing care, (LPN/LVN) | $60 | $120 | $200 |
| Physical Therapy | $75 | $150 | $200 |
| Speech Pathology | $75 | $150 | $200 |
| Occupational Therapy | $75 | $150 | $200 |
| Chemotherapy Specialist | $60 | $120 | $200 |
| Enterostomal Therapy | $50 | $100 | $200 |
| Respirational Therapy | $50 | $100 | $200 |
| Medical Social Services | $100 | $200 | $300 |
| **Combined Max. Daily:** | **$150** | **$300** | **$450** |
| **Max. Period 360 Days:** | **$54K** | **$108K** | **$162K** |

## HHC Aide Benefit* –
Max. Period 60 Days

| Plan A | Plan B | Plan C |
|---|---|---|
| $40 | $80 | $120 |
| *Per Day* | *Per Day* | *Per Day* |
| $2,400 | $4,800 | $7,200 |

## Five Optional Riders Available –

1) Accident & Sickness HI ($100, $200 or $300/Day for 3 or 6 Days)
2) Critical Accident (Max. of $5,000 or $10,000 for death or accidents)
3) Ambulance Benefit ($200/Trip, Up To $2,500 Max.)
4) Return of Premium (Less claims, prior to age 86)
5) Dental/Vision ($400, $800 or $1,200 per Year)

Flexible & Affordable… PLUS Built-In Rx Drug Benefit!

For Agent Use Only – Plan Availability & Benefits May Vary By State

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## PLUS… Don't Forget The True Freedom HC Plans

**TRUE FREEDOM PLANS:**

- no medical underwriting
- rates not age related
- no claim forms
- no age limits
- available nationwide

**MEAL PLANNING/PREPARATION**
**GROCERY SHOPPING**

**ASSISTANCE WITH DRESSING**
**LIGHT HOUSEKEEPING**

**ASSISTANCE WITH BATHING**
**MONITOR DIET AND FOODS**

**ASSISTANCE WITH TOILETING**
**ACCOMPANY TO CHURCH, DR'S APPOINTMENTS…**

**GROOMING AND HYGIENE**
**LAUNDRY, IRONING… AND MORE…**

*This is not an insurance policy and it does not cover skilled care.

NO Underwriting… and Significant Savings for Care!

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## PLUS… Don't Forget The True Freedom HC Plans

**PLATINUM PLAN** = 10,000 hours lifetime membership
10 benefit periods separated by 90 days
**$250,000 "current lifetime retail value"**

**GOLD PLAN** = 6,000 hours lifetime membership
10 benefit periods separated by 90 days
**$150,000 "current lifetime retail value"**

**SILVER PLAN** = 3,000 hours lifetime membership
10 benefit periods separated by 90 days
**$75,000 "current lifetime retail VALUE"**

**BRONZE PLAN** = 1,500 hours lifetime membership
10 benefit periods separated by 90 days
***$37,500 "current lifetime retail value"***

NO Underwriting… and Significant Savings for Care!

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## In Short…

# 0

zero, zilch, nada…. OR

## Spread the Net Wider…

Help More People…

Make More Money…. ??

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## "Financially Attractive"

61 year-old female

**Traditional LTC**
$4,500 a month
Pool of $150K
3% Compound
**Premium: $4154**

**Alternative Combo**
GTL CC - 18 Mos. Ben Per.
$1,000 Base
$5,000 Facility
Pool of $324K
Premium- $1143
GTL HHC – Plus Package*
Premium- $1254
**Total Premium: $2397**

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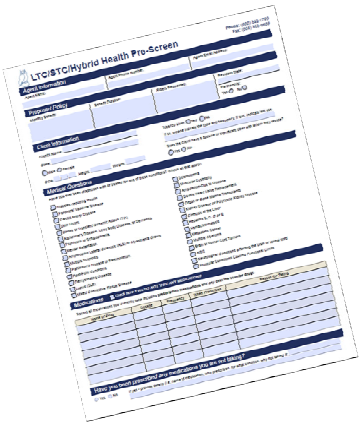

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## Can You Qualify For Coverage?

- First… remember to relax. Regardless of your health, there is probably a product for you.
- Are you currently living in a Nursing Home or Assisted Living Facility or receiving HHC?
- Are you unable to perform Activities of Daily Living?

*If "No" – We Can Get You Protection!*

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## Ever or In The Last Ten Years?

- AIDS/ARC/HIV
- ALS
- Alzheimer's Disease
- Central Nervous System Disease
- Cirrhosis
- Crohn's Disease/Ulcerative Colitis
- Cystic Fibrosis
- Dementia
- Hepatitis B, C or Chronic
- Huntington's Disease
- Kidney Dialysis
- Kidney Disease, Chronic
- Liver Disease, Chronic
- Major Organ Transplant
- Mental Retardation
- Motor Neuron Disease
- Multiple Sclerosis
- Muscular Dystrophy
- Paralysis
- Parkinson's Disease
- Respiratory/Lung Disease, Chronic (Besides Controlled Asthma)
- Spinal Cord Injury, w/ Residuals
- Drug or Alcohol Issues (Last 5 Yrs.)

GTL HHC | GTL CC | GTL STC | Aetna STC

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## RESOURCES….

Financial Suitability
LTCi Disclaimer Form
LTCi Rate Stability
Ins. Daily – MoQ Stands Apart
LTCi – Too Legit To Quit
LTCi Insider – Rate Increases
Filial Laws

Medicaid Spending By State
Medicaid Spending By Service
CMS Spousal Impoverishment
Partnership Program Overview
Veteran's Benefits Overview

LtcUnderwriter.com
LifeHappens.com
GTL Short-Term HHC Video
Mutual of Omaha Cost of Care
Genworth Cost of Care
Agent Product and Sales Training Videos
GoldenCareAgent Website

Strategicision Comparison Login
Quoting Software Downloads
Mutual e-App Login Required
Mutual Quick Start Guide
Mutual e-App FAQ
Mutual e-App Video
Thrivent Online Quoting
NGL e-App Login Required
GTL HHC e-App Login Required
GTL Critical Cash Login Required
GTL e-App Video
GTL e-App User Guide
GTL Voice Sign FAQ
GTL Submit New Business
Aetna e-App Login Required
True Freedom e-App
True Freedom e-App User Guide

Mutual LTCi UW Guide
GTL Recover Cash UW Guide
AETNA Recovery Care App/UW
GTL Critical Cash UW
GTL ST-HHC UW
True Freedom Enrollment

Tax Individuals
MoQ Agent Tax Guide
Consumer Tax Flyer
Business Owner Tax Guide

Inflation Concepts Calc.
Mutual of Omaha Inflation Calc.
Critical Cash Bucket Calc.
Medicaid Spenddown Calc.

LAST SLIDE

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Why GoldenCare?
• Perfect Portfolio of Products
• Superior, Personal Backend Support
• Product and Sales Training
• LTC CEO Selling Tools Software
• GoldenCare Rewards Program
• CSG Actuarial Comparison Tools
• StrateCision Comparison Tools
• Discounted E&O Coverage
• Exciting Promotions On Various Products
• CareOptions Health and Wellness Hub
Thank you for joining us today!
For attending, we will send the CE Voucher, copy of these presentation slides, and more!
Watch your inbox for our email!
PIVOT - Part I:
Intro to the Pivot Concept

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