

SHORT-TERM NURSING HOME CARE INDEMNITY INSURANCE SOLUTION

- + NURSING HOME FACILITY COVERAGE
- + ASSISTED LIVING FACILITY COVERAGE
- + HOME HEALTH CARE RIDER
- + CHOICE OF INFLATION PROTECTION RIDERS



RECOVER CASH[®]
Short-Term Nursing Home Care
Indemnity Insurance

UNDERWRITTEN BY:
Guarantee Trust Life Insurance Company
ADH22-12-TN

GUARANTEE TRUST LIFE INSURANCE COMPANY
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WHY RECOVER CASH?

Coverage to help pay for care needed as a result of:

- Surgery
- Accident
- Sudden Illness

DID YOU KNOW?

According to the American Health Care Association, the average length of a stay for short term care in a skilled nursing center is approximately 27 days.⁽¹⁾

+ WHY SHORT-TERM NURSING HOME CARE

THE NEED FOR SHORT-TERM CARE MAY BE GREATER THAN YOU THINK...

Based upon the National Average Monthly Costs, a one-year stay in a double occupancy room for one person is \$80,304 or \$91,248 for single occupancy.⁽²⁾

No matter what type of insurance you have, Guarantee Trust Life Insurance Company's (GTL) Recover Cash insurance policy can help protect you from out-of-pocket medical expenses. You can focus on what really matters — your recovery.

+ RECOVER CASH HIGHLIGHTS

+ **Pays Benefits Directly To You** when you need it the most

+ **Nursing Home & Assisted Living Facility Coverage** provides for a daily benefit amount to be payable up to 360 days

+ **Receive a 10% Spousal Discount** when you and your spouse apply for coverage

+ **Optional Short Term Home Health Care Rider** gives you the option to recover at home with assistance

+ **Optional Simple or Compound Increasing Inflation Protection Rider** can help your policy benefit keep pace with rising medical expenses

+ **Zero-Day Elimination Period** allows benefits to begin immediately (*Subject to benefit qualifications on page 2*)

(1) American Health Care Association, 2013 Quality Report, 2013

(2) SkilledNursingFacilities.org, Nursing Home Costs, 2015

+ BENEFITS AND FEATURES

NURSING HOME AND/OR ASSISTED LIVING FACILITY BENEFIT	
Once the one-time Elimination Period has been met under the policy, GTL will pay the Daily Maximum Benefit Amount for each day you are confined in a qualified nursing home or assisted living facility.	
Issue Ages	40 - 84 years
Daily Benefit (<i>per person</i>) Levels of Care: 1. Custodial Care 2. Intermediate Care 3. Skilled Care	\$50 - \$300 <input type="radio"/> : _____ (In \$10 increments)
Elimination Period (the number of days of covered care that must be met for benefits to be payable)	<input type="radio"/> 0 Day <input type="radio"/> 20 Days
Benefit Period Options (Lifetime Maximum Benefit equals 2 times the Benefit Period)	<input type="radio"/> 30 <input type="radio"/> 90 <input type="radio"/> 45 <input type="radio"/> 180 <input type="radio"/> 60 <input type="radio"/> 360 (Days)
To Qualify For Benefits: See Qualifications Below	

+ BENEFITS QUALIFICATIONS

To qualify for benefits, you must satisfy your Elimination Period, if any, and follow the guidelines below, which are detailed in your policy.

Benefits will be paid when you have been certified by a Licensed Health Care Practitioner as needing help due to:

1. The inability to perform at least two (2) Activities of Daily Living without human assistance or supervision, such as:

- Bathing Eating Contenance
- Toileting Dressing Transferring

- OR -

2. You have suffered a Cognitive Impairment and require substantial supervision.

HOME HEALTH CARE RIDER	
The Home Health Care Rider will pay the Home Health Care Daily Benefit Amount per visit up to the maximum number of days selected, when you receive qualified care at home.	
Issue Ages	40 - 84 years
Home Healthcare Benefit Amount (<i>per person</i>), for care from a Licensed Home Health Care Practitioner.	<input type="radio"/> \$25 <input type="radio"/> \$50 <input type="radio"/> \$75 (Per visit)
Elimination Period (the number of days of covered care that must be met for benefits to be payable)	<input type="radio"/> 0 Day <input type="radio"/> 20 Days
Benefit Period Options	<input type="radio"/> 90 <input type="radio"/> 180 (Visits)
To Qualify For Benefits: See Qualifications Below	

+ OPTIONAL INFLATION RIDERS

The Inflation Protection Riders were designed to help protect you from increasing health care costs.

Simple Increasing Inflation Protection Benefit Rider 5%

Daily Maximum Benefit

For each year your policy is in force, your Daily Maximum Benefit Amount will be increased automatically by 5% of the original amount.

Compound Increasing Inflation Protection Benefit Rider 5%

Daily Maximum Benefit

The Daily Maximum Benefit will automatically increase by 5% compounded annually, for the lifetime of the policy.

+ PREMIUM CALCULATION WORKSHEET

+ STEP 1: DETERMINE THE PLAN THAT SUITS YOUR CLIENT'S NEEDS:

- Recover Cash Basic Rates Recover Cash With Simple Inflation Recover Cash With Compound Inflation

+ STEP 2: DETERMINE IF YOUR CLIENT IS A TOBACCO USER: Non-Tobacco Tobacco

+ STEP 3: USING THE APPROPRIATE RATE SHEET, DETERMINE YOUR RATE AMOUNT:

Applicant Age: _____ Enter Selected Benefit Period: _____ Enter Elimination Period: _____ **= RATE AMOUNT**
 \$ _____ (A)

+ STEP 4: CHOOSE A DAILY BENEFIT AMOUNT

BETWEEN \$50 AND \$300 (in \$10 Increments): _____ divide by 10 = _____ (Daily benefit amount factor)
 (Use the Rate Amount from Box (A) and multiply by the Daily Benefit Amount Factor)

= ANNUAL PREMIUM \$ _____ (B)

+ STEP 5: (OPTIONAL) DETERMINE THE HOME HEALTH CARE RIDER PREMIUM

- Choose Home Health Care Benefit amount (\$25, \$50, \$75 per visit): _____
- Choose Elimination Period (0 or 20 Days): _____
- Choose Benefit Period (90 or 180 visits): _____

= HOME HEALTH CARE RIDER \$ _____ (C)
= (Add box B and C) SUBTOTAL \$ _____ (D)

+ STEP 6: TO CALCULATE THE SPOUSAL DISCOUNT, MULTIPLY BOX (D) BY 0.9

= SUBTOTAL WITH DISCOUNT
 \$ _____ (E)

+ STEP 7: ADD \$25 ANNUAL POLICY FEE

\$ 25.00 (F)

+ STEP 8: ADD BOX (E) AND BOX (F)

= TOTAL ANNUAL PREMIUM
 \$ _____ (G)

+ STEP 9: TO DETERMINE THE TOTAL MODAL PREMIUM MULTIPLY BY THE MODAL FACTOR:

(Monthly= 0.084 Quarterly= 0.26 Semi-Annual= 0.515)

= TOTAL MODAL PREMIUM
 \$ _____ (H)

CALCULATION WORKSHEET	APPLICANT 1	
Annual Premium		
(Optional) Home Health Care Rider	+	
Subtotal	=	
Subtotal With Discount <i>(if client has a Spouse/Domestic Partner multiply subtotal by 0.9)</i>	x	0.9
Annual Policy Fee	+	\$25
Total Annual Premium	=	
Modal Factor (Monthly = 0.084 Quarterly = 0.26, Semi-Annual = 0.515)	x	
Total Modal Premium	=	

CALCULATION WORKSHEET	APPLICANT 2	
Annual Premium		
(Optional) Home Health Care Rider	+	
Subtotal	=	
Subtotal With Discount <i>(if client has a Spouse/Domestic Partner multiply subtotal by 0.9)</i>	x	0.9
Annual Policy Fee	+	\$25
Total Annual Premium	=	
Modal Factor (Monthly = 0.084 Quarterly = 0.26, Semi-Annual = 0.515)	x	
Total Modal Premium	=	

+ RECOVER CASH PAYS BENEFITS DIRECTLY TO YOU

GOOD NEWS! Due to medical advancements, more procedures are being performed on an outpatient basis. Hospital stays are shorter and recovery times may be quicker, but many people will still need some medical care during their recovery. Whether that additional care takes place in a nursing home or at home, many people rely on Medicare to cover those additional out of pocket expenses. Unfortunately, many don't realize Medicare coverage is limited, and specific requirements must be met first. **Recover Cash** was developed to help during those critical times when you need to focus on your well being and not worry about medical expenses.

WHAT YOU CAN EXPECT...	*FROM MEDICARE	FROM RECOVER CASH
When you go to the Nursing Home	Medicare will pay for the first 20 days if you have been an inpatient in the hospital for at least 3 days. <i>Medicare doesn't cover all long-term care or custodial care expenses.⁽³⁾</i>	RECOVER CASH pays benefits without any prior inpatient hospital stay.
While you're in the Nursing Home	Medicare will pay as long as you are receiving skilled care on a daily basis. <i>Medicare does not pay the largest part of long-term care services or personal care—such as help with bathing, or for supervision often called custodial.⁽⁴⁾</i>	RECOVER CASH benefits are paid for all levels of care, skilled, intermediate or custodial.
Your Benefit Limits	Medicare will stop paying when you no longer require skilled care, stop showing improvement or hit the maximum benefit of 100 days. (Which ever comes first) <i>At the median in 2013, Medicare-covered SNF (Skilled Nursing Facility) days made up 12 percent of total patient days.⁽⁵⁾</i>	RECOVER CASH Daily Benefit Amounts can be paid with plan choices up to 360 days.

Footnotes:

- (3) Centers for Medicare and Medicaid Services, Medicare and You, 2016
- (4) Centers for Medicare and Medicaid Services, Medicare and You, 2016
- (5) Medicare Payment Advisory Commission, Report to the Congress—Medicare Payment Policy, March 2015

**Guarantee Trust Life Insurance Company and their licensed agents are not in any manner affiliated with or sponsored by the federal government, the social security administration, the centers for Medicare and Medicaid services, or the department of health and human services.*

+ EXCLUSIONS

PLEASE SEE YOUR INSURANCE POLICY FOR SPECIFIC DETAILS. THE EXCLUSIONS AND LIMITATIONS LISTED BELOW ARE TYPICAL, BUT YOUR STATE MAY HAVE SLIGHT DIFFERENCES.

This policy won't pay for treatment, care, services or supplies which are:

1. Due to war or act of war whether declared or not;
2. Due to intentionally self-inflicted Injury while sane or insane;
3. For services or supplies provided by a member of the Immediate Family; an individual who normally resides with you on a regular basis; or in a facility owned or operated by a member of the Immediate Family;
4. For services and supplies not included in your Plan of Care;
5. For which no charge is customarily made in the absence of insurance;
6. For personal, comfort or convenience items furnished at the Insured's request, such as television, radio, or telephone;
7. For care received outside the United States or its territories; or
8. For alcoholism, drug addiction, or chemical dependency, unless as a result of a medication prescribed by a Doctor.

+ PRE-EXISTING CONDITIONS LIMITATION

Pre-existing conditions are those medical conditions disclosed or not disclosed on the application for which medical advice or treatment was recommended or received from a Licensed Healthcare Practitioner within 6 months prior to the Effective Date of your coverage. Any loss due to a pre-existing condition isn't covered unless the loss begins more than 6 months after the Effective Date of coverage.

Recover Cash[®], Short-Term Nursing Home Care Indemnity insurance is issued on Policy Form Series G1181-TN, Rider Form Series RG11HHC, RG11IPB, & RG11IPG by Guarantee Trust Life Insurance Company. This product, its features, and riders are subject to state availability and may vary by state. Certain exclusions and limitations may apply. For cost and complete details of coverage, please refer to the outline of coverage.



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GUARANTEE TRUST LIFE INSURANCE COMPANY

Experience You Can Trust - With more than 80 years of experience in the insurance industry, Guarantee Trust Life Insurance Company has a proud heritage of providing excellent service and insurance products. Guarantee Trust Life is a mutual legal reserve company located in Glenview, Illinois and licensed to conduct business in 49 states and the District of Columbia.