

Help protect your future from life's uncertainties



Your Group Long Term Care Insurance Program

Haverford College Voluntary benefits include group long term care insurance. Under this Program, long term care insurance may be more affordable than you think.

The need

Long term care insurance enhances your benefit offerings by meeting a largely unrecognized need many of us may have. It helps pay covered expenses for long term care services whether they are received at home, in the community or in a nursing facility. Here are a few points to consider:

- These expenses aren't typically covered by either disability or health insurance.
- Relying on government programs may not be a viable solution.
- Without insurance, the costs of these services may have to come out of savings.

The cost

Today, a private room in a Pennsylvania nursing facility is about \$105,850 a year and costs are rising.¹ Since the average long term care claim lasting longer than a year is 4.1 years, a long term care situation could cost \$433,985.²

Newly hired employees

As a newly hired employee, you have the opportunity to get coverage, with streamlined underwriting* depending on your age, during the first 30 days after becoming benefit eligible.

Active or Retired Employees

As an active Haverford College employee, you and your spouse and other eligible family members can now buy this coverage at competitive group rates with full medical underwriting, depending on your age.

*Reduced underwriting offered to eligible employees only.

¹Genworth Cost of Care Survey 2020, conducted by CareScout®, August 2020. CareScout® is a Genworth Company.

²Genworth Life Insurance Company, business operations information, 12/1974 through 12/2019

Group Long Term Care Insurance underwritten by
Genworth Life Insurance Company

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For more
information
or to apply:

Go to:

genworth.com/haverford

or Call: **800 416.3624** to speak
with a program specialist.



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Haverford Updated 05/07/21

What are your basic choices?

1 Choose a Monthly Benefit

This is the maximum amount you'll be reimbursed each month for covered long term care expenses. You have the following choices.

Monthly Benefit Choices	Will reimburse up to this amount for covered:		
	Home Care	Assisted Living Care	Nursing Facility Care
<input type="checkbox"/> \$1,500/month	\$1,500/month	\$1,500/month	\$1,500/month
<input type="checkbox"/> \$3,000/month	\$3,000/month	\$3,000/month	\$3,000/month
<input type="checkbox"/> \$4,500/month	\$4,500/month	\$4,500/month	\$4,500/month
<input type="checkbox"/> \$6,000/month	\$6,000/month	\$6,000/month	\$6,000/month
Pennsylvania cost of care ³	\$4,576/month	\$4,300/month	\$8,821/month

2 Select a Coverage Maximum

Choose from one of the Coverage Maximums that corresponds to the Monthly Maximum you selected above. The Coverage Maximum is the total amount of money available to reimburse you for covered expenses for the life of your coverage. The Coverage Maximum corresponds to your Monthly Benefit selection above.

Monthly Benefit Choices	Coverage Maximum Choices		
\$1,500/month	<input type="checkbox"/> \$36,000	<input type="checkbox"/> \$54,000	<input type="checkbox"/> \$72,000
\$3,000/month	<input type="checkbox"/> \$72,000	<input type="checkbox"/> \$108,000	<input type="checkbox"/> \$144,000
\$4,500/month	<input type="checkbox"/> \$108,000	<input type="checkbox"/> \$162,000	<input type="checkbox"/> \$216,000
\$6,000/month	<input type="checkbox"/> \$144,000	<input type="checkbox"/> \$216,000	<input type="checkbox"/> \$288,000

3 Choose a Benefit Increase Option

This program offers 2 Benefit Increase Options to help you protect against the rising cost of care:

Automatic 3% Increase for Life – Compound

Your Monthly Benefit and Total Coverage Maximum (less any claims paid) will automatically increase by 3% compound every year.

Automatic 5% Increase for Life – Compound

Your Monthly Benefit and Total Coverage Maximum (less any claims paid) will automatically increase by 5% compound every year.

None

Your Monthly Benefit and Total Coverage Maximum do not change.

A simple solution can fit your needs and budget

It's easy to apply for coverage – and it may be more affordable than you think. You can tailor a plan to meet your individual needs and your budget. Go to the dedicated website to get a personalized quote.

	A sampling of available plans for a 45 year old. ⁴		
Monthly Benefit	\$3,000	\$4,500	\$6,000
Total Coverage	\$72,000	\$108,000	\$144,000
Monthly Premium	\$35.81	\$53.71	\$71.61

For more information or to apply:



Go to: genworth.com/haverford



or Call: **800 416.3624** to speak with a program specialist

⁴ Assumes no Benefit Increase Option is included. The optional Non-Forfeiture Benefit is not included. These premiums are not guaranteed, and the insurer has the right to change rates in the future. While Genworth Life Insurance Company reserves the right to change future premiums for the Group Policy, your premiums will never increase solely due to changes in your age or your health status.

Benefit Eligibility, Limitations and Exclusions

To understand the benefits and features available to you under this Program go to genworth.com/haverford or call 800 416.3624. The limitations and exclusions that apply to this coverage are listed below.

Premiums are not guaranteed and the insurer has the right to change rates in the future.

Eligibility for Benefits: Your Group Program can reimburse you, up to your plan limits, for the costs of covered long term care services. You qualify for reimbursement when you need assistance with 2 or more everyday activities which include bathing, continence, dressing, eating, toileting, and transferring out of a bed, chair or wheelchair, and the need is expected to last for at least 90 days; or when you need substantial supervision due to a cognitive impairment, such as Alzheimer's disease. A licensed health care professional must confirm your condition. The services must be part of your plan of care from a licensed health care professional.

Limitations and Exclusions: As with any insurance program, certain limitations apply.

Charges that are not covered include those for services:

- for which no charge is made
- received outside of the United States, unless included in another benefit
- provided by your immediate family except as covered under the Informal Care benefit
- for which benefits are payable by a Worker's Compensation or occupational disease act or law
- provided by a Veteran's Administration or other federal government facility, unless a valid charge is made.

Charges are also not covered if they are for services that are required because of:

- war or an act of war
- attempted suicide or self-inflicted injury
- your participation in a felony, riot or insurrection
- service in the armed forces or units auxiliary thereto
- alcoholism or drug addiction.

Pre-Existing Conditions Limitation: Covered expenses incurred for any care or confinement that is a result of a pre-existing condition when the care or confinement begins within twelve months following your initial certificate effective date will not be covered. A pre-existing condition means a condition (illness, disease, injury or symptom) for which medical advice or treatment was recommended by, or received from, a health care professional within 90 days prior to your initial certificate effective date. If you're required to answer questions about your health as part of your application, this pre-existing conditions limitation will not apply to you.

Other Limitations on Benefits: Benefits under the Program coordinate with other long term care insurance meaning that the sum of all benefits you receive will not exceed the actual charges. And, benefits will not duplicate benefits received under another insurance program such as:

- Medicare
- covered by a motor vehicle policy issued or renewed pursuant to the Pennsylvania Motor Vehicle Responsibility Law
- any state or federal worker's compensation, employer's liability, or occupational disease law
- any other federal, state or government health care or long term care program, or law except Medicaid.

This is a summary of the limitations and exclusions. State variations may apply to these exclusions and limitations. The specific language may vary or change the impact of the exclusion. Check your Outline of Coverage for complete details and any state variations that apply.

Details about benefits, costs, limitations and exclusions can be found in the outline of coverage.

Group Long Term Care Insurance underwritten by
Genworth Life Insurance Company

A complete rate schedule is available by contacting the company. This material is part of a solicitation for group long term care insurance for policy form 7053POL PA. Form numbers can vary by state, including a state specific variation. For example, in Pennsylvania, the certificate form number may read 7053CRT PA.

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