

CONNECTICUT PARTNERSHIP LONG TERM CARE CONTRACT FEATURES

Feature	GENWORTH Privileged Choice	GENWORTH Classic Select	MetLife Ideal VIP 2	John Hancock Custom Care II	Penn Treaty Personal Freedom 3	MedAmerica Premier
Qualified Long Term Care Tax Deductible Premiums, 100% Tax Free Benefit	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
How is Home Health Care waiting period satisfied	<i>Waiting period waived (0 day) for home health care, included in policy</i>	<i>Day for Day for home health care. Every day of care received, reduces waiting period by one day. (0 day is a rider)</i>	<i>Day for Day for home health care. Every day of care received, reduces waiting period by one day. *One day of covered services in a calendar week satisfies 7 days of waiting period is a rider (0 day is a rider)</i>	<i>One day of covered services in a calendar week satisfies 7 days of waiting period. (0 day wait) is a rider</i>	<i>Day for Day for home health care. Every day of care received, reduces waiting period by one day. (0 day wait) is a rider</i>	<i>Day for Day for home health care. Every day of care received, reduces waiting period by one day.</i>
Waiver of Premium	<i>Immediately after waiting period for nursing home only, immediately (0 day) for home health care</i>	<i>Immediately after waiting period for nursing home and home health care. If 0 day wait rider is purchased for HHC, then waiver of premium is immediate for home health care</i>	<i>Immediately after waiting period for both nursing home and home health care. If 0 day wait rider is purchased for HHC, then waiver of premium is immediate for home health care</i>	<i>Immediately after waiting period for both nursing home and home health care. If 0 day wait rider is purchased for HHC, then waiver of premium is immediate for home health care</i>	<i>Immediately after waiting period for both nursing home and home health care. If 0 day wait rider is purchased for HHC, then waiver of premium is immediate for home health care</i>	<i>Immediately after waiting period for nursing home only; premium waived on 91st day for HHC</i>
ADL Requirement (Activities of Daily Living)	<i>2 out of 6 ADL's, Substantial Assistance, Hands-On or Standby</i>	<i>2 out of 6 ADL's Substantial Assistance, Hands-on or Standby</i>	<i>2 out of 6 ADL's, Substantial Assistance, Hands-On or Standby</i>	<i>2 out of 6 ADL's, Substantial Assistance, Hands-On or Standby</i>	<i>2 out of 6 ADL's, Substantial Assistance, Hands-On or Standby</i>	<i>2 out of 6 ADL's, Substantial Assistance, Hands-On or Standby</i>
Cognitive Trigger	<i>Substantial Supervision</i>	<i>Substantial Supervision</i>	<i>Substantial Supervision</i>	<i>Substantial Supervision</i>	<i>Substantial Supervision</i>	<i>Substantial Supervision</i>
Home Health Care Payout	<i>Monthly</i>	<i>Daily Pays the actual expense up to the daily maximum benefit Monthly benefit is a rider</i>	<i>Monthly</i>	<i>Daily Pays the actual expense up to the daily maximum benefit Monthly benefit is a rider</i>	<i>Monthly</i>	<i>Daily Pays the actual expense up to the daily maximum benefit Monthly benefit is a rider</i>
Home Health Care Agency Requirement	<i>No— hire your own help (neighbor, friend, or nurse of your choice, do not have to be licensed or certified) with approval of a G.E. care coordinator or use a licensed home health care agency</i>	<i>No— hire your own help (neighbor, friend, or nurse of your choice ,do not have to be licensed or certified) with approval of a G.E. care coordinator or use a licensed home health care agency</i>	<i>No-hire your own help, however they must be state licensed or use a home health care agency</i>	<i>Yes-service must be provided by a licensed home health care agency. (Insured is able to choose licensed home health care agency)</i>	<i>Yes-service must be provided by a licensed home health care agency. (Insured is able to choose licensed home health care agency)</i>	<i>Yes-service must be provided by a licensed home health care agency. (Insured is able to choose licensed home health care agency)</i>

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Feature	GENWORTH Privileged Choice	GENWORTH Classic Select	METLIFE Ideal Plan VIP 2	John Hancock Custom Care II	Penn Treaty Personal Freedom 3	MedAmerica Premier TQ
Alzheimer's, Senility and Parkinson's Covered (Organic)	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Mental and Nervous Disorders (Inorganic)	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Survivorship Benefit	<i>Yes</i>	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>
Bed Reservation	<i>Yes-up to 60 days per policy year for any reason</i>	<i>Yes-up to 30 days per policy year for any reason</i>	<i>Yes-up to 50 days per policy year for any reason</i>	<i>Yes-up to 60 days per coverage year for any reason</i>	<i>Yes-up to 60 days per policy year for any reason</i>	<i>Yes-up to 21 days per policy year for any reason</i>
Homemaker Services	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Assisted Living Facilities	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Alternate Plan of Care (ex: home modifications)	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Informal Caregiver Training	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Inflation Protection 5% Compounding All ages on both Daily Benefit and Total Benefit	<i>Yes-under age 65 Options, ages 65 and older 5% compound on daily benefit only or 5% compound on both daily benefit and total benefit</i>	<i>Yes-under age 65 Options, ages 65 and older 5% compound on daily benefit only or 5% compound on both daily benefit and total benefit</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes-under age 65 Options, ages 65 and older 5% compound on daily benefit only or 5% compound on both daily benefit and total benefit</i>	<i>Yes-under age 65 Options, ages 65 and older 5% compound on daily benefit only or 5% compound on both daily benefit and total benefit</i>
How is 5% Compounding Inflation Protection Calculated while on claim	<i>5% Compounding calculated on Original benefit pool No Claims offset</i>	<i>5% Compounding calculated on balance after claim payment</i>	<i>5% Compounding calculated on balance after claim payment</i>	<i>5% Compounding calculated on balance after claim payment</i>	<i>5% Compounding calculated on balance after claim payment</i>	<i>5% Compounding calculated on balance after claim payment</i>
Restoration of Benefits	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>
Return of Premium	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	<i>Not Available</i>	<i>Optional</i>
CT Medicaid Asset Protection	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>