

GETTING STARTED WITH LONG-TERM CARE

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70% of people over age 65 will eventually need long-term care.

Long-term Care insurance helps with medical and non-medical needs for those with chronic illnesses or disabilities. It provides coverage in the event that your client may someday not be able to take care of themselves. Long-term Care insurance helps cover costs for care providers and support services. Below is the national average for costs. Medicare does not pay for non-skilled assistance and with daily living expenses. Medicare only pays for Long-term care if your client requires skilled services or rehabilitative care.

- Women require more long-term care than men 69% to 31%.
- 52% of people choose to receive their long-term care services at home, while 26% choose assisted living and 22% in a nursing home.

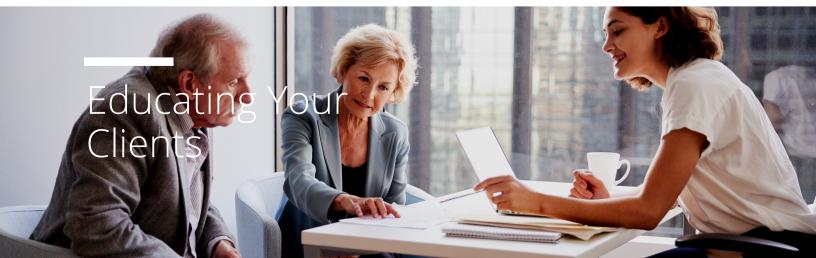
*Source: U.S. Department of Health & Human Services

 7.6 million individuals currently receive care at home because of acute illnesses, long-term health conditions, permanent disability or terminal illness. By comparison, there are just over 1.8 million individuals in nursing homes.

*Source: American Association for Long-Term Care Insurance

Cost of Care Statistics for 2022 <u>Nursing Home - Private Room</u> \$113,529.60 <u>Nursing Home - Semi-Private Room</u> \$99,410.40

Home Health Aide \$61,936.16 Assisted Living Facility \$57,916.08



PAGE | 03

When it comes to Long-term Care products, there are many factors that go into evaluating applications, and whether or not the applicant will be eligible for coverage. The more informed you are about your client's health, the better equipped you'll be to determine if they're insurable.

- Review the pre-submission Underwriting Considerations.
- Review the Disqualifying Conditions.
- Discuss your client's health in detail to uncover any red flags.
- Consider submitting a health pre-qualification form before submitting the actual application. This will give you insight as to whether your client is insurable and what rate class and benefits they will receive.
- Discuss the underwriting process with your client and what is entailed during the health interview.
- Review the product options available for your client. One size does not fit all.

Underwriting Factors

lf Your Client	Wait to Submit Their Application
Receives joint injections within the last 6-12 months.	Until 6-12 months have passed.
Is currently undergoing physical or occupational therapy.	Until they are released from care or can function at 100% again.
Has any invasive tests, labs, x-rays, MRIs, ultrasounds, or other scheduled procedures.	Until testing is completed, and your client no longer needs to see care for the condition.
Has been advised to have surgery.	Until surgery is completed, and your clients has fully recovered.
Is undergoing evaluation for an undiagnosed medical condition.	Until all evaluations have been completed and a benign or insurable condition has been diagnosed.
Has sleep apnea noted in their medical records and is not accepting treatment.	Until your client has completedtreatment outlined by their physician for at least 3 months.
Has applied for long-term care insurance and has been declined.	Until the reason for the decline has been handled, appropriate time has passed or no longer exists.

