

**LOS RIOS COMMUNITY COLLEGE DISTRICT #145431-003
PLAN HIGHLIGHTS/SCHEDULE OF BENEFITS**

Your Long Term Care (LTC) insurance plan is listed below.

Elimination Period: Your plan's Elimination Period of 90 consecutive days is the amount of time you must wait before benefits become payable. This time period can be accumulated over a period of 730 days and needs to be satisfied only once during the life of your plan.

Medical Underwriting Effective Date: The effective date for those applicants requiring medical underwriting is the later of the Plan Effective Date or the Medical Underwriting Approval Date. *Medical Underwriting means that you must answer all questions on a medical questionnaire. In some cases, an interview may also be necessary*

Delayed Effective Date – If you are absent from work because you are injured, sick, temporarily laid off or on a leave of absence, your coverage will not begin on your otherwise expected effective date.

Medical Underwriting: You may choose from the plans listed below. The Long Term Care Insurance Application (medical questionnaire) and the Benefit Election Form must be completed and approved in order to enroll in this Long Term Care Plan. **All** Medical Questionnaires must accompany a signed Authorization to Request Medical Information Form #6720-03-CA located in the enrollment kit.

Benefit Duration	2 Years	5 Years	Lifetime Duration
Facility Benefit Amount In Increments of \$1,000	\$3,000 to \$9,000	\$3,000 to \$9,000	\$3,000 to \$9,000
Assisted Living Facility Percent	100%	100%	100%
Home and Community Based Care	50%	50%	50%
Home and Community Based and Immediate Family Member Care - Option	50%	50%	50%
Inflation Protection * - Option	5% Simple	5% Simple	5% Simple

** If you selected an inflation option, and you terminate that inflation option at a future date, you can purchase the inflated coverage amount at your original age.*

Lifetime Maximum: The Lifetime Maximum is the maximum benefit dollar amount Unum will pay over the life of your coverage. This dollar amount is based on the Facility Benefit Amount and Benefit Duration. *For Example: If you choose \$3,000 Facility Monthly Benefit Amount & 2 Year Duration, your Lifetime Maximum is calculated as follows, \$3,000 per Month X 12 Months X 2 Years = \$72,000 Lifetime Maximum*

Insurance Age: Final cost of coverage will be based on your Insurance Age. If you enroll for coverage on or before the group policy effective date, Insurance Age is your age on the group policy effective date. If you enroll for coverage after the group policy effective date, Insurance Age is your age on the date you sign the enrollment form.

Questions: Please call 1-800-227-4165 with questions regarding your Long Term Care Insurance.