

Policy Comparison

Information supplied by AdvisorNet Insurance

12-13-2011

	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
OVERVIEW OF PLAN									
Parent Company	American International Group, Inc.	Genworth Financial, Inc.	Genworth Financial, Inc.	Manulife Financial Corporation	N/A	N/A	N/A	AEGON	Mutual of Omaha Insurance Company
First date sold	02/2010	8/2011	7/2003	05/2011	4/2008	06/2009	03/2005	05/2011	06/2009
First write comprehensive LTC	2010	1989	1989	1987	2000	1987	1999	1989	2006
Inforce LTC Premium (in millions)	.155	1,977*	1,977*	1846	158	166*	173	511	166*
Company Assets (in millions)	41,583	112,395*	112,395*	218,858*	141,102	5,239	539,854	106,888	15,120
Facility Only Policy	None	None	None	None	A Facilities Only option is available.	None	None	None	None
Home Care Only Policy	None	None	None	None	None	None	None	None	None
Last review by insurer	11/2011	11/2011	11/2011	10/2011	10/2011	07/2011	11/2011	11/2011	07/2011
Tax Qualified	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Partnership Plans	AL AR AZ CO GA IA ID KS LA ME MD MN MO MT NE NH NJ ND OH OK OR PA RI SC SD TN TX VA WI WY.	AL AR CO GA ID IA IN KS KY LA ME MD MO MT NE NJ ND OH OK OR PA RI SC SD TN TX WI WY	AL AR CO FL GA ID IN KS LA ME MD MO MN MT NE NJ ND OH OK OR PA RI SC SD TN TX VA WI WY	AL AR CO FL GA IA ID KS LA ME MN NE NJ OH RI SC TN TX VA WI WY	AL AR AZ CO CT FL GA IA ID IN KS KY LA ME MD MN MO MT NE NH NJ ND NE NV NH NJ NY OK OR PA RI SC SD TN TX VA WI WY	AL AR AZ CO FL GA ID IA KS LA ME MD MN MO MT NE NH NJ ND OH OK OR PA RI SC SD TN TX VA WI WY	AL AR AZ CO FL GA IA ID IN KS KY LA ME MD MN MO MT NE NV NH NJ NC ND OH OK OR PA RI SC TN TX VA WV WI WY.	AL AZ AR CO GA ID IA IN KS KY LA ME MD MN MO MT NE NV NH NJ NC ND OH OK OR PA RI SC TN TX VA WV WI WY	AL AR AZ CO FL GA ID IA KS LA ME MD MN MO NE NH NJ ND OH OK OR PA SC SD TX VA WI WY
Issue ages	18-84	18-79	18-79	18-79	18-84. Age at Nearest Birthday	18-79	18-79	18-79	18-79
FINANCIAL RATINGS									
Standard and Poors Rating	A+	A	A	AA-	AA+	A+	AA-	AA-	A+
Moody Rating	A2	A2	A2	A1	Aa2	Aa3	A2	A1	Aa3
A.M. Best Rating	A	A	A	A+	A++	A+	A+	A+	A+
Fitch Rating	A	A-	A-	AA-	AA+	AA-	A+	AA-	AA-
TheStreet.com Rating	C+	B-	B-	B	A	B+	B	B-	B+
Percentile Rating	23	22	22	49	78	50	42	44	50
PREMIUMS & DISCOUNTS									

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Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Premium Classes	Preferred(10% discount), Standard	Preferred, Standard Preferred discount is 20% but limited to 10% if insured also qualifies for couples discount.	Preferred, Standard Preferred discount is 20% but limited to 10% if insured also qualifies for couples discount.	Preferred, Select, Class I, II. Preferred discount is 10%. Combination of good health and partner discount limited to 35%.	Ultra Preferred (85%), Select Preferred (100%), Preferred (125%)	Preferred (0.85), Select(1.00), Class I (1.25), Class II (1.50).	Preferred (0.85), Standard I (1.00), Standard II (1.25), Standard III (1.50) Preferred rate discount not available with Employer Sponsored Plans.	Preferred (10%), Standard, Class 1,2,3,4 If one partner is SubStandard rate class, the healthy partner cannot have a higher daily benefit or benefit period than the maximum allowed to the SubStandard partner.	Preferred (0.85), Select(1.00), Class I (1.25), Class II (1.50).
Spousal discount (2/2;2/1;1/1)	30%/15%/15%	40%/25%/0%	40%/25%/0%	30%/0%/0% Combination of good health and partner discount limited to 35%.	35%/5%/5% Discount is for 2 people living together for 3 consecutive years in a committed relationship as partners or family members.	35%/15%/15%	30%/15%/15%.	30%/15%/15% Above discounts apply to Standard rate class. Spouses must apply for same benefits to receive discount.	35%/15%/15%
Disc for unrelated live together	30%/15%/15%	40%/25%/0%. Couples discount applies to 2 people living together in committed relationship unless they are from different generations of same family.	40%/25%/0%. Couples discount applies to 2 people living together in committed relationship unless they are from different generations of same family.	30%/0%/0%. Partners discount applies to partners of same or opposite sex and family members of same generation who have lived together 3 yrs or longer. Combination of good health and partner discount limited to 35%.	35%/5%/5% Discount is for 2 people living together for 3 consecutive years in a committed relationship as partners or family members.	10%/0%/0% Applies to 2 adults 18 years or older living together for at least 12 months.	30%/15%/15%. Applies to partners of same or opposite sex, living together at least 12 months.	30%/15%/15% Above discounts apply to Standard rate class. Spouses must apply for same benefits to receive discount.	10%/0%/0% Applies to 2 adults 18 years or older living together for at least 12 months.

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Disc for family live together	0%/0%/0%	40%/25%/0%. Couples discount applies to 2 people living together in committed relationship unless they are from different generations of same family.	40%/25%/0%. Couples discount applies to 2 people living together in committed relationship unless they are from different generations of same family.	30%/0%/0%. Applies to family members of same generation who have lived together 3 yrs or longer. 5% family discount will apply in addition to partners discount if 3 members of family own policy. Combination of good health and partner discount limited to 35%.	35%/5%/5% Discount is for 2 people living together for 3 consecutive years in a committed relationship as partners or family members.	10%/0%/0% Applies to 2 adults 18 years or older living together for at least 12 months.	30%/15%/15%. Applies to siblings, parent/child and other familial relationships.	0%/0%/0%	10%/0%/0% Applies to 2 adults 18 years or older living together for at least 12 months.
Endorsed Group Discount	None	5% for small business	5% for small business	5%	10%	5% Assoc./5 or 10% Multi-Life	5% Employer Sponsored/5% Affil.	5%,10%,15%,20%	5% Assoc./5 or 10% Multi-Life
Minimum Group Size	na	4	4	5; 10/Association	3; 10/Association	1-Association/ 3-Multi-Life	2 Employer Sponsored/ 2 Affil.	5	1-Association/ 3-Multi-Life
Other Discounts	None	None	None	There is a 5% loyalty credit for existing customers who have a prior LTC policy series in force for at least 2 years. There is a 5% Valued Client Discount for customers who already own an annuity contract or life insurance policy.	A Loyal Customer Discount of 5% is available when the insured purchases another type (DI, Life or Annuity) of MassMutual policy.	5% discount to Mutual of Omaha and affiliates Medicare Supplement policy holders.	None	None	5% discount to Mutual of Omaha and affiliates Medicare Supplement policy holders.
Rate Guarantee	No	No	No	No	No	Optional 5 year rate guarantee	No	5 years.	5 years built-in. 6-10 years optional
Max Company Premium Increase (%)	No increase	18	18	13	No increase	40	28	196	No increase
Max Prem Increase since 1/1/2003	No increase	No increase	No increase	No increase	No increase	No increase	No increase	No increase	No increase

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Accelerated Payment Options	10 years, to age 65 Paid-up Premium Rider cannot be sold with Joint Survivor Benefit Rider after age 55.	10 years, to age 65	10 years, to age 65	20 years, to age 75	3 options: 10 year Paid up at 65 Discounted Renewals: first year premium is 365% of first year standard premium; subsequent premiums, starting in the second year, are 25% less than standard premium.	10 years 20 years To age 65	3 options: 10 years Paid up at age 65 Premium Reduced at age 65 - insured pays more than regular premium up to age 65, then pays half pre-age 65 premiums after age 65.	1 year 10 years To age 65	10 years 20 years To age 65 Flex to age 85 (Premiums initially reduced. Later premiums increase and become fixed at age 65 and fully paid up at age 85.) Only available ages 18- 60. Limited Pay options are not available with GPO inflation.
Application Fee	None	None	None	None	None	None	None	None	None
BENEFIT TYPE									
Facility benefit type	Reimbursement	Reimbursement	Reimbursement	Reimbursement	Reimbursement, Indemnity with Rider	Reimbursement	Reimbursement	Reimbursement	Reimbursement
HomeCare benefit type	Reimbursement or Flexible Care Benefit (Cash Option)	Reimbursement	Reimbursement	Reimbursement; Cash rider for HHC available.	Reimbursement, Indemnity with Rider	Reimbursement or Cash Benefit of 35% of HCMB.	Reimbursement; Cash option built-in 2 Cash riders withdrawn 4/5/2011	Reimbursement; Cash Benefit option	Reimbursement; Built-In Cash Benefit option.
HomeCare Cash Benefit	Flexible Care Benefit	na	na	Additional Cash Benefit Rider.	na	A Cash Benefit of 35% of HC Monthly Benefit can be elected at time of claim in lieu of all other benefits. The elim period does not need to be satisfied to receive the Cash Benefit.	Built-In Cash Alternative Benefit.	Cash Benefit	Built-in Cash Benefit option

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HC Cash with Reimbursement	None	na	na	Additional Cash Benefit Rider provides a separate pool of money monthly equal to 15% of monthly benefit or 4.5x DB to assist you to stay at home while receiving HHC. Benefit paid does not reduce policy maximum.	na	na	na	na	na
HC Cash Instead of Reimbursement	Flexible Care Benefit pays 40% of monthly benefit instead of reimbursement for home care. Insured can receive Flexible Care Benefit and Stay at Home Benefit simultaneously.	na	na	na	na	A Cash Benefit of 35% of HC monthly benefit can be elected at time of claim in lieu of all other benefits. The elim period does not need to be satisfied to receive the Cash Benefit.	Built-In Cash Alternative Benefit pays 40% of HCDB on monthly basis in lieu of reimbursement. Insured selects reimbursement or cash monthly while on claim. Available with either Daily or Monthly Home Care payment options.	Cash Benefit pays 10X DB each month in cash in lieu of all other benefits. Cash Benefit has no elimination period.	Built-in Cash Benefit option pays 40% of HCMB as cash with optional increase to 50%. While receiving cash benefit, no other benefits are payable. Elimination Period does not apply to Cash Benefit option but days in which Cash Benefit option is utilized do not count toward elimination period for reimbursement benefits.
Cash Benefit unavailable with	na	na	na	Not available with International Coverage.	na	na	na	na	na
NURSING HOME BENEFITS									

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NH daily/monthly benefit	2,000-12,000/month	1,500-12,000/month in \$100 increments 50-400/day in \$5 increments	1,500-12,000/month	50-500/day or 1,500-15,000/month	50-400/day	1500-15,000/month in \$100 increments.	50-500/day. 150% HC Benefit only available with Facility Daily Benefit up to \$350/day.	50-400/day For Class 1 and Class 2, maximum daily benefit is \$150 and the maximum pool of money is \$275,000. For Class 3 and Class 4, maximum daily benefit is \$100 and the maximum pool of money is \$125,000 If one partner is SubStandard rate class, the healthy partner cannot have a higher daily benefit than the maximum allowed to the SubStandard partner.	1500-15,000/month in \$100 increments
Total NH benefit	100K, 250K, 400K, 500K, 600K, 750K, 1MM	2,3,4,5,6,8,10 yrs, Life	2,3,4,5,6,8,10 yrs, Life	2,3,4,5,6,10 yrs	2,3,4,5,6,10 yrs,Life	2,3,4,5,6,8 yrs., Life	1,2,3,4,5,6,10 yrs (Lifetime withdrawn 4/5/2011)	Pool of money \$18,250 - Unlimited	2,3,4,5,6,8 yrs, Life
Elimination periods, NH	30,90,180,365 days	30,90,180,365 days	30,90,180 days	30,60,90,180,365 days	30,60,90,180 days	0,30,60,90, 180, 365 days	30,60,90,120,180, 365 days	0,30.60.90.180 days	0,30,60,90, 180, 365 days
Accumulation period	Lifetime	Lifetime	Lifetime	Lifetime	Lifetime	Lifetime	Unlimited	Lifetime	Lifetime
Elimination one-time	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
NH Waiver of Premium	Premiums are waived when benefits begin.	Premiums are waived when benefits begin. Does not apply if receiving international coverage benefit.	Premiums are waived when benefits begin. Does not apply if receiving international coverage benefit.	Premiums are waived when benefits begin.	Premiums are waived when benefits begin.	Premiums are waived when benefits begin.	Premiums are waived the day following the day elimination period is satisfied.	Premiums are waived after elim period is satisfied and benefits are received.	Premiums are waived when benefits begin.
Bed Reservation for Hospital	30	60	60	60	60	30	60	60	30
Bed Reservation for Any Reason	30	60	60	60	60	30	60	60	30
ASSISTED LIVING BENEFIT									
% for Assisted Living Facility	100%	50, 100%	100%	100%	100%	50, 75, 100%	100%	100%	50,75,100%
ALF Elimination Period	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home

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ALF Waiver of Premium	Premiums are waived when benefits begin.	Premiums are waived when benefits begin. Does not apply if receiving international coverage benefit.	Premiums are waived when benefits begin. Does not apply if receiving international coverage benefit.	Premiums are waived when benefits begin.	Premiums are waived when benefits begin.	Premiums are waived when benefits begin.	Premiums are waived the day following the day elimination period is satisfied.	Premiums are waived after elim period is satisfied and benefits are received.	Premiums are waived when benefits begin.
HOME CARE COVERAGE									
Home health care covered	Policy	Policy	Policy	Policy	Policy	Policy	Policy	Policy	Policy
Adult day care %	100%	100%	100%	100%	100%	100%	100%	100%	100%
Respite care days per year	Under Stay at Home Benefit	30 @100% of NH or HHC DB	up to monthly max/yr	None	30 @100%	30 @100% NHDB	21 @100% of FDB	30@100% with Care Coord	30 @100% NHDB
Hospice care %	Under Stay at Home Benefit	100%	100%	100%	100%	100%	100% FDB	100%	100%
Equipment amount	Provided under Stay at Home Support Benefit, up to 10% of lifetime maximum,	3X Monthly or 90X Daily NHB under Home Assistance Benefit	2X Monthly maximum	Provided under built-in Stay at Home Benefit, with 30X NHDB lifetime maximum.	May be covered under Alternate Plan of Care provision.	Pays up to 2X HHC MB with Care Coordination under Stay at Home Benefit.	Home Support Services Benefit offers lifetime max of 50X FDB for assistive devices, home modifications, durable medical equipment, emergency response system, caregiver training and transportation services. Home Support Services Benefit can be paid without regard to elim period. Reimbursement for these services can be made in addition to payments for care without regard to daily or monthly maximums.	Therapeutic devices and technology, up to 60X DB lifetime maximum, paid under Remain at Home Benefit, with care coordination.	Pays up to 2X HHC MB with Care Coordination under Stay at Home Benefit.
Drugs/meds amount	None	None	None	None	1X DB per month while in NH or ALF.	None	If the built-in Cash Alternative Benefit is exercised, these funds can be used to purchase drugs.	None	None

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Other home care benefits	Stay at Home Support Benefit pays 10% of current lifetime maximum benefit for Caregiver Training, Home Modifications, Durable Medical Equipment, Respite Care and Hospice Care. This benefit is not subject to the elimination period.	Home Assistance Benefit pays expenses for Home Modifications, Assistive Devices, Supportive Equipment, Emergency Medical Response Systems and Caregiver Training. Total payment maximum is 3X Monthly or 90X Daily NH benefit. Not subject to elimination period.	Chore Services; In-home safety devices; home delivered meals; rental of emergency medical response devices may be covered under Alternate Plan of Care.	Under Stay at Home Benefit (a built-in feature), expenses paid for home modifications, durable medical equipment, caregiver training, home safety checks, provider care checks and medical alert systems. The amount paid is equal to 30x DB on a lifetime basis. The benefit is not subject to the elim period and does not reduce policy limit.	Emergency Response System Benefit pays 1/2 DB per month if receiving benefits for HC. This benefit is payable in addition to the Daily Benefit amount. Ambulance Services Benefit for permanent transfer to a Facility or temporary transfer to/from a Facility for Respite Care. Maximum Benefit is 4X Daily Benefit. This benefit is payable in addition to the Daily Benefit amount.	The Stay at Home Benefit of 2X HHC MB (available when use Care Coordination) pays for Caregiver Training, Durable Medical Equipment, Home Modifications, and Medical Alert Systems.	Home Support Services Benefit offers lifetime max of 50X NHDB for assistive devices, home modifications, durable medical equipment, emergency response system, caregiver training and transportation services. Home Support Services Benefit can be paid without regard to elim period. Reimbursement for these services can be made in addition to payments for care without regard to daily or monthly maximums.	Remain at Home Benefit includes payment for Home Modifications, Caregiver Training, Therapeutic Device or Technology, and Medical Alert System. Maximum lifetime benefit is 60X DB. Benefits must be approved by Care Coordinator. Remain at Home Benefit not subject to, nor will it satisfy, elim period. Waiver of Premium - Cash Benefit rider is built in to the policy. It waives the premium when insured is receiving the Cash Benefit.	The Stay at Home Benefit of 2X HHC MB (available when use Care Coordination) pays for Caregiver Training, Durable Medical Equipment, Home Modifications, and Medical Alert Systems.
HHC daily benefit % of NH	100%	50, 100%	100%	100%	100%	50,75, 100%	50,75,100, 150%	100%	50%, 75%, 100%
HHC daily benefit \$ range	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home	Same as Nursing Home	% of NH	% of NH	% of NH	% of NH
HHC Daily Weekly Monthly	Monthly	Choice of Daily or Monthly	Monthly	Benefits paid on daily or monthly basis chosen at time of application. Monthly benefits of \$1500 to \$15000 available.	Daily; Monthly with Rider Monthly Home Care Rider N/A with Indemnity Benefit Rider.	Monthly	Home Care benefits paid on a daily basis unless Monthly Benefit Rider is chosen.	Daily; Monthly with Rider.	Monthly
Combined ben for HHC+NH	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
HHC total benefit	Pooled with NH benefit	Pooled with NH benefit	Pooled with NH benefit	Pooled with NH benefit	Pooled with NH benefit	Pooled with NH benefit	Pooled with NH benefit	Pooled with NH benefit	Pooled with NH benefit
HHC Elimination periods	Same as NH/waived with Rider	Same as NH/waived with Rider	0	Same as NH/waived with Rider	Same as NH/ waived with Rider	Same as NH/Waived with rider. Cash Benefit -always 0 day elim	Same as NH/waived with Rider	0	Same as NH/Waived with rider. Cash Benefit -always 0 day elim
Calendar or service days/wk elim	Calendar days	7 Service Days; Calendar Days with Rider	na	7	7**	Calendar days	Calendar days	7	Calendar days
HOME CARE PAYMENT									

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HHC Waiver of Premium	Premiums are waived when benefits begin.	Premiums waived when Home Care benefits begin. Waiver of Premium does not apply if receiving international coverage benefit.	Premiums waived when Home Care begins if use Privileged Care Coordinator. If Privileged Care Coordinator is not used, then premiums are waived after you receive HC services for the number of days equal to the Facility elimination period. Waiver of Premium does not apply if receiving international coverage benefit.	Premiums are waived when facility elimination period is satisfied.	Premiums are waived when benefits begin. Must receive HC Benefits at least once every week.	Premiums are waived when benefits begin. To qualify for Waiver of Premium for HHC, must receive HHC at least 8 days/month. If receiving Cash Benefit, there is no elimination period so waiver of premium begins immediately.	Premiums are waived the day following the day elimination period is satisfied.	Built-In. Premiums are waived after elim period is satisfied and benefits are received.	Premiums are waived when benefits begin. To qualify for Waiver of Premium for HHC, must receive HHC at least 8 days/month. If receiving Cash Benefit, there is no elimination period so waiver of premium begins immediately.
Copayment Provision	None	None	None	None	None	None	None	None	None
CAREGIVER OPTIONS									
Homemaker covered	Yes,See Comments	Yes	Yes	Yes,if incidental to ADLs	Yes	Yes	Yes	Yes	Yes
Care by Friends/Unlicensed	Paid with Flexible Care Benefit	Included	Included	If provider is certified home health aide, in nurse aide registry, shows proof of training in ADL assistance, or is assessed as a independent care provider by company. Care by independent HHC provider only reimbursed if no HHC agency within 40 miles of home. Maximum reimbursement is 75% of NHDB.	No. Home Care can be provided by an independent not affiliated with a HC Agency but must be licensed/certified.	Payable with Cash Benefit	Payable under Cash Alternative Benefit	Cash Benefit may be used to pay for care by friends or unlicensed providers.	Payable with Cash Benefit

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Care by Family Members	Paid with Flexible Care Benefit. Otherwise excluded unless family member is regular employee of organization providing services.	Excluded unless family member is regular employee of organization providing services.	Excluded unless family member is regular employee of organization providing services.	Excluded unless family member is licensed nurse, physical, occupational, speech, or respiratory therapist, licensed social worker or registered dietitian and regular employee of facility or HHC agency providing services.	Excluded	Excluded except under Cash Benefit provision.	Payable under Cash Alternative Benefit	Excluded unless family member is regular employee of organization providing services and the organization receives payment. Cash Benefit may be used to pay for care by family members.	Excluded except under Cash Benefit provision.
Care by Spouse	Paid with Flexible Care Benefit. Otherwise excluded unless spouse is regular employee of organization providing services.	Excluded unless spouse is regular employee of organization providing services.	Excluded unless spouse is regular employee of organization providing services.	Excluded unless spouse is licensed nurse, physical, occupational, speech, or respiratory therapist, licensed social worker or registered dietitian and regular employee of facility or HHC agency providing services.	Excluded	Excluded except under Cash Benefit provision.	Not Excluded	Excluded unless family member is regular employee of organization providing services and the organization receives payment. Cash Benefit may be used to pay for care by family members.	Excluded except under Cash Benefit provision.
Exclude if Live With Insured	Not excluded	Excluded if normally lives in home	Excluded if normally lives in home	Excluded if normally lives in home	Not excluded	Not excluded	Not excluded	Not excluded	Not Excluded
Percent of HC Ben for Unlic Care	40%	100%	100%	100%	na	35%	40%	10X DB monthly	40% or 50%

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Caregiver training	Provided under Stay at Home Support Benefit which pays up to 10% of lifetime maximum benefit.	3X Monthly or 90X Daily NHB under Home Assistance Benefit	20% monthly ben life max	Provided under built-in Stay at Home Benefit, with 30X NHDB lifetime maximum.	5X DB lifetime max	Pays up to 2X HHC MB with Care Coordination under Stay at Home Benefit.	Home Support Services Benefit offers lifetime max of 50X FDB for assistive devices, home modifications, durable medical equipment, emergency response system, caregiver training and transportation services. Home Support Services Benefit can be paid without regard to elim period. Reimbursement for these services can be made in addition to payments for care without regard to daily or monthly maximums.	Paid up to 60X DB, lifetime maximum, under Remain at Home Benefit if receiving Care Coordination.	Pays up to 2X HHC MB with Care Coordination under Stay at Home Benefit.
Paid from care benefit pool	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
Agency Required	No	No	No	Yes	No	No	No	Yes	No
COUPLES BENEFITS									

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	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Surviving spouse paid up	Rider Not available with limited pay options.	Survivorship Benefit - Surviving spouse's policy is paid-up if both policies and riders have been in force at least 10 years and there were no benefits paid in first 10 years of coverage. Enhanced Survivorship Benefit Rider- Surviving spouse's policy is paid-up if both policies and riders have been in force at least 7 years. The 7 year Rider has no restriction if benefits were paid for either spouse.	Survivorship Benefit (built-in) - Surviving spouse's policy is paid-up if both policies and riders have been in force at least 10 years and there were no benefits paid in first 10 years of coverage. Enhanced Survivorship Benefit Rider- Surviving spouse's policy is paid-up if both policies and riders have been in force at least 7 years. The 7 year Rider has no restriction if benefits were paid for either spouse.	Survivorship and Waiver of Premium Rider- when both partners have held a policy for 10 years with no claims and one partner dies, the other will not have to pay future premiums or if one partner accesses benefits and has premium waived, the other's premium is waived. Not available with limited pay options. the Guaranteed Purchase Option or the Guaranteed Increase Option.	Rider. Paid-up Survivorship Rider provides for paid-up policy after 10 years and the death of one insured. If one insured dies prior to 10th year, surviving spouse must pay individual premium based on original issue age for balance of 10 year period and then policy will be paid in full. Not available with limited pay plans.	Rider	Rider Not available with Shared Care.	None	Rider
Years held for paid up	10	7,10	7,10	10	10	10	10	na	10
Survivorship if claims paid	No	Survivorship is available regardless of claims paid only with Enhanced, Full or 7 year Survivorship rider	Survivorship is available regardless of claims paid only with Enhanced, Full or 7 year Survivorship rider	No	Yes	Yes	No	na	Yes

Policy Comparison

Information supplied by AdvisorNet Insurance

	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Joint Premium Waiver	Rider	Included with Shared Benefit Coverage	Included with Shared Benefit Coverage	Survivorship and Waiver of Premium Rider- when both partners have held policies and riders for 10 years with no claims and one partner's premium is waived, the other's premium is waived or if one partner dies, the other will not have to pay future premiums. Not available with limited pay options, Guaranteed Purchase Option or Guaranteed Increase Option.	Waiver of Premium for Covered Partner Rider waives premium during any period when covered partner's premium is waived. Both partners must have Rider.	Rider	Rider Not available with Shared Care.	Rider. Not available with Substandard rating or Single pay policy.	Rider
Share Benefit with Spouse	Shared Care Benefit Rider provides separate pool of money equal to one lifetime maximum. Partners must choose identical coverage.	Shared Benefit Coverage for Couples -two policies with identical coverages for each person allows access to benefits separately or together. Couple shares one pool of money. Premiums for both will be waived if one receiving benefits. The Shared Benefit account remains available after one person dies but premiums for rider are no longer included. There is no lifetime benefit multiplier offered with shared policies.	Joint Policy. Shared Benefit Coverage for Couples -one policy with identical coverages for each person allows access to benefits separately or together. Couple shares one pool of money. Premiums for both will be waived if one receiving benefits. The Shared Benefit account remains available after one person dies but premiums for survivor become 125% of premium applicable to survivor's premium (unless premiums waived by optional Survivorship Rider). Elim periods and daily maximums apply to each individual.	Rider to share Benefits. Must choose same benefit period, benefit amount and inflation option. Elim period and other riders can be different.	Shared Care Rider offers a third pool of money equal to the Maximum Benefit amount. If a Covered Partner dies, the Shared Total Benefit Amount will remain available.	Rider to Share Benefits. Coverage must be identical. If either spouse dies while both policies are in force, the surviving spouse will receive the deceased spouse's remaining maximum lifetime benefit with no effect on the surviving spouse's premium.	Rider to Share Benefits. Identical benefits required.	Rider to Share Benefits. Identical benefits required.	Rider to Share Benefits. Coverage must be identical. If either spouse dies while both policies are in force, the surviving spouse will receive the deceased spouse's remaining maximum lifetime benefit with no effect on the surviving spouse's premium.
Share Extra benefit pool	Yes	No	No	No	Yes	No	No	No	No

Policy Comparison

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	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Residual benefit for spouse	None	There is a guaranteed minimum of 50% of original coverage maximum, if the total benefits paid for the insured's covered expenses are less than the guaranteed minimum.	None	None	None	1 Year Residual	None	None	1 Year Residual
Spouse can buy more	No	None	None	If one partner uses all benefits, other can purchase an additional 2 years at attained age with no underwriting if insured has not been eligible for benefits in the past 2 years and is not over 90.	None	None	If one spouse's benefits are used up by the other, he/she can purchase additional 2 year benefit at attained age.	If one spouse's benefits are used up by the other, he/she can purchase additional 2 year benefit at attained age. This option is not available after 91st birthday or if currently eligible for benefits.	None
Survivor continues paying Rider	Optional, if want benefits	No	Yes	No	Yes	Yes	No	No	Yes
Shared care not available if	None	Not available with Refund of Premium Riders Not available with Restoration of Benefits Rider. Not available with Lifetime Benefit period.	Not available with 10 pay or pay to 65 Not available with Return of Premium Riders Not available with Restoration of Benefits Rider. Not available with Lifetime Benefit period.	None	Not available with lifetime benefit.	Not available to Class II or to Class I with benefit period greater than 3 years. Not available with Spouse Security Benefit Not available with Full Return of Premium rider or Return of Premium less Claims rider. Not available with Lifetime Benefit.	None	Not available with Substandard Class 3-4, Lifetime Benefit option or Return of Premium.	Not available to Class II or to Class I with benefit period greater than 3 years. Not available with Spouse Security Benefit Not available with Return of Premium less Claims rider. Not available with Lifetime Benefit.
OTHER BENEFITS									
Alternate Plan of Care	Yes	Yes	Yes	Yes	Yes	With Care Coordination	Yes	Yes	With Care Coordination

Policy Comparison Information supplied by AdvisorNet Insurance

	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Care management	Optional. Care Coordination assesses insured's needs, determines services needed, develops Plan of Care and helps insured arrange care. Does not reduce maximum benefits.	Optional. Privileged Care Coordinator assesses need, develops plan of care, helps choose and monitor care. Use does not reduce maximum benefits.	Optional. Privileged Care Coordinator assesses need, develops plan of care, helps choose and monitor care. Benefits enhanced if Priv Care Coordinator used: elim period for NH or ALF reduced by # of days HHC received, premiums waived while receiving HHC. Use does not reduce maximum benefits.	Optional. Care Advisory Services will assist in determining care and treatment plan. Paid up to 10X DB or 1/3 monthly benefit per year. Benefit can be paid before elim period satisfied. Does not reduce maximum benefits.	Optional. Personal Care Advisor helps assess need and coordinate care, provides assistance in developing Plan of Care, coordinates appropriate services and monitors delivery of services. Does not reduce maximum benefits.	Optional. Care Coordinator may assess needs, develop Plan of Care, coordinate delivery of LTC services and monitor care. If use Care Coordinator, benefits may include Alternate Care Benefits and Stay at Home Benefits including Caregiver Training, Durable Medical Equipment, Home Modification, and Medical Alert System. Facility Assessment is included to provide an annual assessment of the quality of care provided in a nursing home or assisted living facility. Use of Care Coordinator does not reduce benefits.	Optional. Toll free telephone line offers free information, referral services and process assistance. May be used during elim period. Private Care Consultant acts as advocate for insured. Licensed practitioner, not associated with Prudential, develops Plan of Care, arranges for delivery of services, provides counseling and education and monitors services. Must meet Benefit Eligibility Criteria to use Private Care Consultant. Paid up to 20X FDB annually. Does not reduce maximum benefits.	Optional. Care Coordinator develops Plan of Care, reassesses Plan of Care and provides list of care providers. Care Coordination is required for Remain at Home Benefit. Use of Care Coordinator does not reduce maximum benefits.	Optional. Care Coordinator may assess needs, develop Plan of Care, coordinate delivery of LTC services and monitor care. If use Care Coordinator, benefits may include Alternate Care Benefits and Stay at Home Benefits including Caregiver Training, Durable Medical Equipment, Home Modification, and Medical Alert System. Facility Assessment is included to provide an annual assessment of the quality of care provided in a nursing home or assisted living facility. Use of Care Coordinator does not reduce benefits.
Restoration of benefits	Rider	Rider	Rider	No	Rider. Maximum amount that can be restored is equal to original Total Benefit amount.	Rider	Included. Limited to one time.	Full Restoration of Benefits rider restores all benefits, except Global Coverage Benefits, one time only if insured is no longer benefit eligible for 180 days.	Rider
Dividend	None	None	None	None	See Comments	None	None	None	None

Policy Comparison

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	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Other Riders	None	<p>Transition Benefit Rider pays 20% on Monthly Maximum or 5X DB for covered expenses received during elim period. Not subject to elimination period. Not available with 0 day elim period for HHC Rider.</p>	<p>Shared Benefit Coverage for Couples -one policy with identical coverages for each person allows access to benefits separately or together. Premiums for both will be waived if one receiving benefits. The Shared Benefit account remains available after one person dies but premiums are reduced for survivor to 125% of premium applicable to survivor's portion (unless premiums waived by optional Survivorship Rider). Elim periods and monthly maximums apply to each individual.</p> <p>There is no lifetime benefit multiplier offered with shared policies. Options are 4,6,8,10,12,16,20 years.</p>	None	<p>Enhanced Elimination Period Rider - If Facility or HC services are received at least one (1) day in a week, seven (7) days are credited toward satisfaction of the elimination period.</p>	<p>Spouse Security Benefit Rider pays 60% of insured's MB in addition to policy benefits. Will not be paid if insured receiving benefits under Cash Benefit Rider. Does not reduce Maximum Lifetime Benefits.</p> <p>Spouse Security Benefit Rider not available over age 69 or with Class 1 or Class 2 health rating.</p> <p>Additional Benefit for Injury Rider pays an additional benefit up to 2X MB for eligible expenses if insured sustains an injury prior to the policy anniversary coinciding with insured's 65th birthday which results in the need of LTC services. Only available to issue age of 60. Does not reduce Maximum Lifetime Benefits.</p> <p>Christian Science Provider Rider pays an Alternate Care Benefit for services provided by an accredited Christian Science nurse and incurred in a Christian Science facility.</p>	None	None	<p>Spouse Security Benefit Rider pays 60% of insured's MB in addition to policy benefits. Will not be paid if insured receiving benefits under Cash Benefit Rider. Does not reduce Maximum Lifetime Benefits.</p> <p>Christian Science Provider Rider pays an Alternate Care Benefit for services provided by an accredited Christian Science nurse and incurred in a Christian Science facility.</p>
NONFORFEITURE/ RETURN OF									

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	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Nonforfeiture on lapse Rider	Shortened Benefit Period after 3 years Benefit is greater of 100% of premiums paid or the monthly maximum in effect at time of lapse.	Shortened Benefit Period after 3 years. Benefit is greater of premiums paid or 30X NHDB at time of lapse.	Shortened Benefit Period after 3 years. Benefit is greater of premiums paid or 30X NHDB at time of lapse.	Shortened Benefit Period after 3 years or after 1 year if limited pay option chosen. Benefit is greater of premiums paid or 30X NHDB at time of lapse.	Shortened Benefit Period after 3 years. Benefit is greater of premiums paid or 30X NHDB at time of lapse.	Shortened Benefit Period after 3 years.	Shortened Benefit Period after 3 years. Benefit is greater of premiums paid less claims paid or 30X FDB at time of lapse.	Shortened Benefit Period after 3 years. Benefit is greater of premiums paid or 30X NHDB at time of lapse.	Shortened Benefit Period after 3 years.
Percent prem returned at lapse	0	0	0	0	0	0	0	0	0
Return of Premium on death Rider	Return of Premium at Death Benefit Rider returns premiums paid minus claims paid at death. Not available over age 64.	2 Options: Refund of Premium on Death after 10 Years returns premiums paid less claims paid if you have been insured for at least 10 years and die. Graded Refund of Premium on Death returns a percentage of premiums paid less claims paid ranging from 100% if death at age 65 or younger to 0% if death occurs at or after age 75. On the policy anniversary following your 75th birthday, the rider terminates, its benefits cease and insured is no longer charged additional premium for Refund of Premium rider. Neither Refund of Premium Rider is available if Shared Care is chosen. Graded Refund of Premium not available to age 65 or over.	2 Options: Return of Premium on Death after 10 Years returns premiums paid less claims paid if you have been insured for at least 10 years and die. Graded Return of Premium on Death returns a percentage of premiums paid less claims paid ranging from 100% if death at age 65 or younger to 0% if death occurs at or after age 75. On the policy anniversary following your 75th birthday, the rider terminates, its benefits cease and insured is no longer charged additional premium for Return of Premium rider. Neither Return of Premium Rider is available if Shared Care is chosen. Graded Return of Premium not available to age 65 or over.	Return of Premium on Death benefit included. Returns premiums paid minus claims paid if death occurs before age 65.	2 Options: Return of Premium on Death Rider returns premiums paid, less claims paid. Full Return of Premium on Death Rider returns premiums paid, regardless of claims.	3 Options: Full Return of Premium at death Return of Premium less Claims at death Return of Premium less claims if death occurs before age 65	Return of Premium on Death Rider returns premiums paid less claims paid.	Return of Premium on Death Benefit included if death occurs before age 67. Returns premiums paid minus claims paid. Return of Premium on Death Rider returns premiums paid minus claims paid. Not available with Substandard rated policies, Shared Care Rider or limited pay policies.	Return of Premium less Claims at death
Percent prem returned at death	100%	100%; 100% @65-0% @75	100%; 100% @65-0% @75	100%	100%	100%	100%	100%	100%

Policy Comparison

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Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Contingent nonforfeiture	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
BENEFIT INCREASE OPTIONS									
Simple inflation % per yr	None	5%	5%	None	5%	5%	5%	None	5%

Policy Comparison

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Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Compound inflation % per yr	<p>3% Compound 5% Compound Graded Premium to age 65 Option - depending on the inflation option selected, premiums increase by 3% or 5% annually until age 65. After age 65, benefits continue to inflate but premiums remain constant. Graded Premium for Life Option - premiums and benefits increase by 3% or 5% for life of policy.</p>	3, 5%	3, 5%	<p>3 Compound Inflation Protection options: 5% Compound</p> <p>CPI Compound Inflation Coverage with Guaranteed Increase Option - Compound annual inflation increases based on CPI (Consumer Price Index). Increases apply to both daily or monthly benefit and pool of money. Future CPI increases will be offset by prior year decreases, if any.</p> <p>CPI Compound Inflation Coverage through age 75 with Guaranteed Increase Option - Compound annual inflation increases based on CPI (Consumer Price Index) through age 75. Increases apply to both daily or monthly benefit and pool of money. Future CPI increases will be offset by prior year decreases, if any.</p> <p>Guaranteed Increase Option (GIO) - Option to increase current benefit amount and remaining pool of money by 5% every 3 years through age 75 in addition to annual CPI increases. No additional underwriting required. Offer is not available if Chronically ill in the two years prior to offer date, if 2 previous offers were declined or if insured is over age 76. Premiums for GIO increases are at attained age. The GIO option is not available with Limited Pay options or Survivorship and Waiver of Premium Rider</p>	3, 5%	<p>4 Options: 3%, 4%, 5% Compound Inflation for life. 5% compound for 20 years.</p>	<p>5 Options: 2% compound 3% compound 4% compound 5% compound 5% compound with 2X Cap.</p>	<p>4 Options: 3% Compound 5% Compound 3% or 5% Step-rated Compound Benefit Increase Option - premiums increase each year as benefits increase using original issue age. Increases may be stopped on any anniversary.</p>	<p>9 Options: 5% compound for life 3%, 3.5%, 4%, 4.5% compound for life with guaranteed buy-up option 5% compound (2X, 3X, 4X maximum increase) 5% compound for 20 years</p>

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	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Inflation reduced by claims paid	Not reduced	Not reduced	Not reduced	Reduced	Reduced	Reduced	Reduced by claims paid in prior years, except most recent year.	Reduced	Reduced
Increase coverage later	None	Future Purchase Option offers option to purchase additional coverage every 3 years equivalent to 5% compounded annually, if not benefit eligible. If decline 3 times, no future offers.	No	Guaranteed Purchase Option included if no inflation rider chosen. Before age 76, every 3rd anniversary, can increase DB or MB by 10% of current amount. Not available if chronically ill in prior 2 years or if 2 previous offers declined. Includes one time offer to switch to CPI Compound Inflation coverage on 65th birthday, if not chronically ill in prior 2 years. Not included with limited pay options or Survivorship and Waiver of Premium Rider.	No	Future Purchase Option is included if no inflation protection selected. Future Purchase Option provides insured with opportunity to purchase either 3% or 5% Compound Inflation Protection- Lifetime Benefit Rider on or before 5th policy anniversary for increase in premium. Cannot be exercised if premium is being waived or if insured is Chronically ill or has received benefits in most recent 2 years.	Guaranteed Purchase Option - At least every 3 yrs, DB increases by 5% compound annually. Increases are deemed accepted unless declined in writing. Offers continue while in benefit status. Guaranteed Purchase Option Rider not available in combination with Accelerated Payment Options, Joint Waiver of Premium, or Survivor Waiver of Premium.	Deferred Benefit Increase Option (included if no other Benefit Increase Option selected) allows insured to add Compound Benefit Increase Option without evidence of insurability if not on claim or claim-eligible. Offer extended on 1st, 3rd and 5th policy anniversary.	Future Purchase Option is included if no inflation protection selected. Future Purchase Option provides insured with opportunity to purchase either 3% or 5% Compound Inflation Protection- Lifetime Benefit Rider on or before 5th policy anniversary for increase in premium. Cannot be exercised if premium is being waived or if insured is Chronically ill or has received benefits in most recent 2 years. Guaranteed Buy-Up option included with inflation options of 3%, 3.5%, 4% and 4.5% compound for life. Insured can increase to any other compound lifetime inflation option prior to age 85 without underwriting. Multiple increases are allowed to a max of 5% compound. Cannot be exercised if premium is being waived or if insured is Chronically ill or has received benefits in most recent 2 years.
BENEFIT TRIGGERS									
Med Necessity covered	No	No	No	No	No	No	No	No	No
ADL's needed for NH benefits	2/6	2/6	2/6	2/6	2/6	2/6	2/6	2/6	2/6
ADL's needed for HC benefits	2/6	2/6	2/6	2/6	2/6	2/6	2/6	2/6	2/6
Do ADLs include mobility	No	No	No	No	No	No	No	No	No
ADL includes supervision	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Mental illness (non-org) covered	Excluded in Mental Care facilities	Excluded in Mental Care facilities	Excluded in Mental Care facilities	Excluded in Mental Care facilities	Excluded in Mental Care facilities	Not excluded	Not excluded	Excluded in Mental Care facilities	Not excluded
LIMITATIONS									

Policy Comparison

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Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Benefits for Age 80+	For ages 80-84, lifetime max benefit amount capped at \$250,000.	Not applicable	Not applicable	Not applicable	All options available.	Not applicable	Not applicable	Not applicable	Not applicable
Limits for Substandard class	No substandard rate class	No substandard rate class	No substandard rate class	Only 2 and 3 year benefit period allowed with Class I or Class II.		<p>For Class I and Class II rate - maximum benefit period is 5 years; minimum elim period is 90 days.</p> <p>For Class I and Class II rate - Spouse Security Benefit, Spouse Waiver of Premium, Survivorship Rider, Waiver of Elim Period for HC are not available.</p> <p>For Class I and Class II rate - Only Lifetime payment option is available.</p> <p>For Class II rate - Spouse Shared Care not available.</p> <p>For Class I rate - Spouse Shared Care not available with benefit period greater than 3 years.</p>	<p>For Standard III: Maximum benefit period is 3 years Maximum daily benefit is \$200 Minimum elimination period is 90 day No cash benefit riders No shared care No restrictions for Standard II</p>	<p>For Substandard Rate Classes 1 and 2, maximum pool of money is \$275,000. For Substandard Rate Classes 3 and 4, maximum pool of money is \$125,000.</p> <p>For Substandard Rate Classes 1 and 2, maximum daily benefit is \$150. For Substandard Rate Classes 3 and 4, maximum daily benefit is \$100.</p> <p>For Substandard Rate Classes 1, 2, 3, and 4, minimum elimination period is 90 days.</p> <p>For Substandard Rate Classes 1, 2, 3, and 4, Waiver of Premium-HHC and Waiver of Premium-Cash are not available.</p> <p>If one partner is Substandard, Joint Waiver of Premium and Return of Premium on Death are not available to either partner.</p>	<p>For Class I and Class II rate - maximum benefit period is 5 years; minimum elim period is 90 days.</p> <p>For Class I and Class II rate - Spouse Security Benefit, Spouse Waiver of Premium, Survivorship Rider, Waiver of Elim Period for HC are not available.</p> <p>For Class I and Class II rate - Only Lifetime payment option is available.</p> <p>For Class II rate - Spouse Shared Care not available.</p> <p>For Class I rate - Spouse Shared Care not available with benefit period greater than 3 years.</p>
Wait for exist condition (mos)	0	0	0	0	0	0	0	0	0
Lookback exist condition (mos)	0	0	0	0	0	0	0	0	0
Reasonable & Customary	No	No	No	No	No	No	No	No	No

Policy Comparison

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	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Care outside US covered	Territories, Possessions, Canada International Benefit is equal to 40% of monthly maximum for up to 2 years outside the United States, its Territories, Possessions, and Canada.	Will pay for Nursing Home outside of the United States, its territories and possessions, up to 50% of NH maximum for care in an out-of-country NH facility and up to 25% of NH maximum for HHC limited to 365 days. No payments will be made under this benefit more than 4 years after the first expense payable under this benefit incurred. Waiver of Premium does not apply if receiving this benefit.	Will pay for Nursing Home outside of the United States, its territories and possessions, up to 75% of monthly maximum for 48 months. Waiver of Premium does not apply if receiving this benefit.	Worldwide-100% of DB or MB up to 1 year International coverage includes all benefits except Hospice Care, Additional Stay at Home Services, Care Advisory Services, Double Coverage for Accident Benefit, and Additional Cash Benefit.	Territories, Canada. Benefits are payable for Facility Services and Home Care services received outside the US, its territories and Canada after satisfying the policy elim period and the Elim Period for Coverage Outside the US. Benefits are paid up to 1/2 the Daily Benefit amount. If the policy has a Lifetime Benefit Period, the maximum amount payable for Care Outside the US is 1825 times the Daily Benefit Amount. Otherwise, the maximum amount payable for the life of the policy is 25% of the Total Benefit Amount. The Elim Period for Care Outside the US is double the regular elim period. Days cannot be accumulated under separate claims in order to satisfy the elim period for care outside the US. While receiving benefits for Care Outside the US, the following are not available: Facility Prescription Drug Benefit, Facility Bed Reservation Benefit, Emergency Response System Benefit, Ambulance Services Benefit, Caregiver Training Benefit, Respite Care Benefit, and the Alternate Plan of Care Benefit.	Territories and Possessions, Canada, United Kingdom. International Benefit of 12X MB, regardless of eligible expenses, paid if in country where payment is not prohibited by US Government.	Reimburses 75% of Facility DB or HCDB for care outside U.S., its territories and possessions. Limited to 365 days. There is no payment for Bed Reservation, Hospice Care, Respite Care, Home Support Services, Alternate Plan of Care or Private Care Consultant when provided outside U.S., its territories and possessions. The insured may select the Cash Alternative Benefit and receive 40% of HCDB on a monthly basis while insured is benefit eligible and outside the U.S., its territories and possessions.	Canada. Global Coverage Benefit provides worldwide coverage for up to 365 days. Payment is 75% of Max DB or Cash Benefit at 10X DB.	Territories and Possessions, Canada, United Kingdom. International Benefit of 12X MB, regardless of eligible expenses, paid if in country where payment is not prohibited by US Government.
SAMPLE BENEFIT & PREMIUMS									
Maximum \$ Benefit \$100DB, 3 yrs	100000	109500	108000	109500	109500	108000	109500	109500	108000
Prem \$100 DB 3yrs 5% Cmpd Age 50	1150	1126	1159	2043	1079	1127	1625	1328	1150
Prem \$100 DB 3yrs 5% Cmpd Age 55	1325	1221	1260	2169	1128	1207	1771	1460	1231

Policy Comparison
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	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Prem \$100 DB 3yrs 5% Cmpd Age 60	1576	1481	1525	2385	1422	1454	1931	1795	1484
Prem \$100 DB 3yrs 5% Cmpd Age 65	2032	1982	2066	2934	1859	1998	2383	2296	2038
Prem \$100 DB 3yrs 5% Cmpd Age 70	2984	2944	2925	3753	2674	3010	3442	3017	3071
Prem \$100 DB 3yrs 5% Cmpd Age 75	4811	4937	4844	5265	4162	4419	5472	4383	4507
Prem \$100 DB life 5% Cmpd Age 50	No Lifetime Benefit	2116	2116	No Lifetime Benefit	2075	2294	No Lifetime Benefit	3324	2340
Prem \$100 DB life 5% Cmpd Age 55	No Lifetime Benefit	2226	2245	No Lifetime Benefit	2169	2410	No Lifetime Benefit	3595	2458
Prem \$100 DB life 5% Cmpd Age 60	No Lifetime Benefit	2953	2993	No Lifetime Benefit	2735	2956	No Lifetime Benefit	4243	2984
Prem \$100 DB life 5% Cmpd Age 65	No Lifetime Benefit	3943	3982	No Lifetime Benefit	3574	4080	No Lifetime Benefit	5426	4161
Prem \$100 DB life 5% Cmpd Age 70	No Lifetime Benefit	5607	5404	No Lifetime Benefit	5142	6038	No Lifetime Benefit	7142	6190
Prem \$100 DB life 5% Cmpd Age 75	No Lifetime Benefit	9092	8778	No Lifetime Benefit	8004	8738	No Lifetime Benefit	10536	8913
COMMENT & INSURER									

Policy Comparison

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	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha	
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ	
State differences short form	<p>N/A as of 11/1/2011 in FL MA NY VT</p> <p>CA: Unique Non-forfeiture rider with unique rates</p> <p>CT: No 180 & 365 day elim</p> <p>IA: Graded PREM Inflation Protection Opts N/A</p> <p>IN: Graded PREM Inflation Protection Opts N/A</p> <p>KS: No 180 & 365 day elim</p> <p>MD: Graded PREM Inflation Protection Opts N/A</p> <p>MN: No 365 day elimination period</p> <p>NC: Graded PREM for Life Inflation Protection N/A</p> <p>NJ: Joint Survivor Benefit Rider N/A</p> <p>NM: Graded PREM Inflation Protection Opts N/A</p> <p>PA: Return of PREM Rider factors unique</p> <p>Graded PREM for Life Inflation Protection N/A</p> <p>Joint Survivor Benefit Rider N/A</p> <p>SD: Min mthly benefit \$4000</p> <p>No 180 & 365 day elim</p> <p>TX: 3% CMPD inflation N/A</p> <p>3% CMPD for Life Funded with Graded PREM Increases N/A</p> <p>3% CMPD for Life Funded with Graded PREM Increases to age 65 N/A</p> <p>WA: Joint Survivor Benefit Rider N/A</p> <p>WI: 365 day elim period N/A</p>	<p>N/A as of 12/1/11 in CA CT FL HI MN VT VA</p> <p>AZ: Shared Rider offers minimum guarantee of 2 years</p> <p>CO: Min issue age 21</p> <p>GA: No 180 & 365 day elim</p> <p>IN: IN Partnership version requires 5% Cmpd IP</p> <p>KS: No 180 & 365 day elim</p> <p>Only 100% ALF</p> <p>MA: Min Benefit period for Shared Care is 4 years each</p> <p>ND: Return of PREM on Death after 4 Yrs</p> <p>NJ: Nonforfeiture included with ltd pay opts</p> <p>SD: Min mthly benefit \$3200; min DB \$105</p> <p>TN: Return of PREM on Death after 4 Yrs</p> <p>WA: 10 yr Survivorship Rider N/A</p> <p>WI: Min mthly benefit \$1800; min DB \$60</p>	<p>Not sold in CA</p> <p>Withdrawn 8/15/2011 in all states except CA CT FL HI IL IN MD MN NV NY OH PA RI VT VA.</p> <p>Withdrawn 11/21/11 in IL IN MD NV NY OH PA RI.</p> <p>CT: 30% couples discount</p> <p>No 180 & 365 day elim</p> <p>3% CMPD inflation N/A as of 9/01/10</p> <p>International coverage N/A</p> <p>FL: 10 yr Survivorship Rider N/A</p> <p>No 365 day elim</p> <p>NY: 35% max discount between Small Business, Preferred Health, and Spousal</p> <p>Min mthly benefit \$1600</p> <p>PA: Return of PREM on Death after 4 yrs.</p> <p>No Small Business discount</p> <p>VT: No 180 & 365 day elim</p>	<p>Not available as of 11/1/2011 in CA CT IN.</p> <p>To be released 12/5/2011 in CT IN.</p> <p>AZ: CPI to age 75 N/A</p> <p>Shared Care 2 and 3 yr benefits N/A</p> <p>CT: No 180 or 365 day elim period</p> <p>CPI to age 75 N/A</p> <p>Additional Cash Benefit N/A</p> <p>Double Accident Benefit N/A</p> <p>DE: CPI to age 75 N/A</p> <p>FL: DB \$50-\$300</p> <p>MB \$1500-\$9000</p> <p>No 365 day elim period</p> <p>Couples disc for married couples only</p> <p>Loyalty discount N/A</p> <p>IN: CPI to age 75 N/A</p> <p>NY: DB min \$70 non-Metro and \$100 Metro area</p> <p>MB \$2200-\$15500 non-Metro and \$3100-\$15500 Metro area</p> <p>No 365 day elim period</p> <p>Partner discount 20%</p> <p>Loyalty discount N/A</p> <p>Family Discount N/A</p> <p>OR: Additional Cash Benefit N/A</p> <p>SD: \$100 Min DB</p> <p>No 180 or 365 day elim period</p> <p>Couples disc for married couples only</p> <p>Family disc N/A</p> <p>VT: No 180 or 365 day elim period</p> <p>Minimum DB is \$75</p> <p>Minimum Monthly Benefit is \$2250.</p> <p>WI: Minimum DB is \$60.</p> <p>Minimum monthly benefit is \$1800</p>	<p>Available in all states. Also available in PR</p> <p>AK: Max DB is \$500 without Indemnity Rider</p> <p>CA: Alt Plan of Care N/A</p> <p>Contingent Non-Forfeiture N/A</p> <p>3% CMPD inflation N/A</p> <p>CT: Max DB is \$500</p> <p>No 180 day elim</p> <p>Contingent Non-Forfeiture N/A</p> <p>FL: Discounted renewals pymt opt is N/A</p> <p>No 180 day elim</p> <p>IN: IN Partnership version requires 5% Cmpd IP</p> <p>NJ: 10 yr, 20 yr & pay to 65 include built in Shortened Benefit Period</p> <p>Non-Forfeiture</p> <p>Discounted renewals pymt opt is N/A</p> <p>Loyal Customer Discount N/A</p> <p>NY: Discounted renewals pymt opt is N/A</p> <p>Covered Partner discount is 25%</p> <p>Min DB \$100</p> <p>Max DB is \$500</p> <p>No 180 day elim</p> <p>Contingent Non-Forfeiture N/A</p> <p>Loyal Customer Discount N/A</p> <p>OR: Facility Services Only N/A</p> <p>PA: Return of PREM opts N/A</p> <p>Facility Services Only N/A</p> <p>TX: Discounted renewals pymt opt is N/A</p> <p>Contingent Non-Forfeiture N/A</p>	<p>Available in all states. Also available in PR</p> <p>AK: Max DB is \$500 without Indemnity Rider</p> <p>CA: Alt Plan of Care N/A</p> <p>Contingent Non-Forfeiture N/A</p> <p>3% CMPD inflation N/A</p> <p>CT: Max DB is \$500</p> <p>No 180 day elim</p> <p>Contingent Non-Forfeiture N/A</p> <p>FL: Discounted renewals pymt opt is N/A</p> <p>No 180 day elim</p> <p>IN: IN Partnership version requires 5% Cmpd IP</p> <p>NJ: 10 yr, 20 yr & pay to 65 include built in Shortened Benefit Period</p> <p>Non-Forfeiture</p> <p>Discounted renewals pymt opt is N/A</p> <p>Loyal Customer Discount N/A</p> <p>NY: Discounted renewals pymt opt is N/A</p> <p>Covered Partner discount is 25%</p> <p>Min DB \$100</p> <p>Max DB is \$500</p> <p>No 180 day elim</p> <p>Contingent Non-Forfeiture N/A</p> <p>Loyal Customer Discount N/A</p> <p>OR: Facility Services Only N/A</p> <p>PA: Return of PREM opts N/A</p> <p>Facility Services Only N/A</p> <p>TX: Discounted renewals pymt opt is N/A</p> <p>Contingent Non-Forfeiture N/A</p>	<p>N/A as of 08/1/2011 in CA</p> <p>CT: No Spouse Security Benefit Rider</p> <p>Cash Benefit optional Rider.</p> <p>No 180 & 365 day elim periods</p> <p>FL: Rate guarantees N/A</p> <p>No 0 & 365 day Elim period</p> <p>Waiver of Elim Period for HHC Rider N/A</p> <p>Additional Benefit for Injury Rider N/A</p> <p>IL: Rate guarantees N/A</p> <p>MA: Additional Benefit for Injury Rider N/A</p> <p>Cash Benefit optional Rider.</p> <p>No 180 & 365 day elim periods</p> <p>MD: No Spouse Security Benefit Rider</p> <p>MT: Spousal Discounts are 30%/10%/10%</p> <p>NJ: 10 yr, 20 yr & pay to 65</p> <p>PREM Payment Opt Riders include Non-forfeiture</p> <p>Rate guarantees N/A for LTD pay riders</p> <p>LTD pay riders include Non-Forfeiture</p> <p>NY: Preferred discount is 13%</p> <p>Discounts for Couples are 25%/15%/15%</p> <p>Two person household discount N/A</p> <p>Rate guarantees N/A</p> <p>No 365 day elim periods</p> <p>Min NHMB is \$3100</p> <p>Additional Benefit for Injury Rider N/A</p> <p>No Spouse Security Benefit Rider</p> <p>PA: No Rate Guarantees</p> <p>No Return of Premium Riders</p> <p>TX: No Spouse Security Benefit Rider</p> <p>No Flex to Age 85 Rider</p> <p>No Domestic Partner Discounts</p> <p>VA: Domestic Partners Amendment Rider N/A</p>	<p>Sold in all states as well as Guam, VI</p> <p>New Options (1 year benefit, 2% compound and 4% compound inflation) and new rates not available as of 12/1/2011 in CA CO CT FL HI IN KS MD MA MO NV NC OH SC TX VA WA.</p> <p>AZ: 150% HC N/A with 2 yr benefit period</p> <p>Shared Care Rider N/A</p> <p>CA: \$100 min DB</p> <p>Waiver of HC Elim Period Rider N/A</p> <p>Cash Alt is 50% instead of 40%</p> <p>3% CMPD inflation N/A</p> <p>INTL coverage paid at 100% of DB</p> <p>FL: No accelerated pymt</p> <p>ESP and Affiliation plans N/A</p> <p>No 2 yr BP</p> <p>Waiver of HC Elim Period Rider N/A</p> <p>3% CMPD inflation N/A</p> <p>IL: No 1 yr BP</p> <p>LA: No 1 yr BP</p> <p>NJ: If select accelerated pymt, must include SBP NonForfeiture</p> <p>ESP discount 10%</p> <p>NY: Spousal discounts are 25%/10%/10%</p> <p>ESP discount 10%</p> <p>\$70 Min DB NY upstate, \$100 min NY Metro area</p> <p>No 365 day elim</p> <p>No Return of PREM on Death Rider</p> <p>INTL coverage paid at 100% of DB</p> <p>OR: No 1 yr BP</p> <p>PA: No accelerated pymt except Prem reduction at 65</p> <p>No 180 or 365 day elim</p> <p>No Return of PREM on Death Rider</p> <p>SBP NonForfeiture not reduced by claims paid</p> <p>TX: No accelerated pymt</p> <p>VT: No 120 180 & 365 day elim \$80 min DB</p>	<p>Available as of 12/01/11 in all states except CA FL HI SD.</p> <p>To be released in CA 12/13/2011.</p> <p>AZ: Minimum pool of money is \$36,500.</p> <p>Minimum benefit period with Shared Care is 3 years.</p> <p>CT: No rate guarantee</p> <p>No elim period greater than 100 days</p> <p>ID: Spousal disc only for legally married couples.</p> <p>IN: 3% or 5% Step-rated Compound Benefit Increase Option N/A</p> <p>3% Cmpd inflation protection N/A</p> <p>IN Partnership requires 5% Cmpd IP</p> <p>KS: No elim period greater than 100 days</p> <p>LA: Spousal disc only for legally married couples.</p> <p>MD: Minimum pool of money is \$36,500.</p> <p>MA: Minimum pool of money is \$36,500.</p> <p>MN: Step-Rated BIO not available for multi-life sales.</p> <p>NV: Minimum pool of money is \$36,500.</p> <p>NY: No rate guarantee</p> <p>Single Premium Payment N/A</p> <p>20% group disc N/A in NY; 15% group disc only available to age 64.</p> <p>Married Preferred discount cannot exceed 35%</p> <p>Min DB is \$100</p> <p>Minimum BP is 2 yr</p> <p>365 day elim N/A</p> <p>Minimum benefit period with Shared Care is 3 years.</p> <p>OR: Minimum pool of money is \$36,500.</p> <p>VT: Minimum DB \$75</p> <p>Minimum pool of money is \$27,375.</p> <p>No elim period greater than 100 days</p> <p>VA: Spousal disc only for legally married couples.</p> <p>WI: Minimum pool of money is \$21,900; Min BD is \$60.</p>	<p>N/A as of 08/1/2011 in CA NY</p> <p>CT: No 180 & 365 elim</p> <p>Accelerated pymt opt N/A</p> <p>Rate guarantees N/A</p> <p>5% CMPD Inflation Protection for 20 yrs</p> <p>No Spouse Security Benefit Riders</p> <p>FL: 0 day elim period N/A</p> <p>No 365 day elim</p> <p>Waiver of Elim Period for HHC Rider N/A</p> <p>Flex to age 85 accelerated pymt opt N/A</p> <p>Rate guarantees N/A</p> <p>HI: Rate guarantees N/A</p> <p>IL: Rate guarantees N/A</p> <p>IN: 5% CMPD Inflation Protection with 2x, 3x and 4x maximum increase N/A</p> <p>5% CMPD Inflation Protection for 20 yrs</p> <p>KS: No 180 & 365 elim</p> <p>KY: Rate guarantees N/A</p> <p>MA: No 180 & 365 day elim periods</p> <p>MD: Flex to age 85 accelerated pymt opt N/A</p> <p>ALF benefit must be 100%</p> <p>MT: Spousal Discount is 30%/10%/10%</p> <p>NJ: Accelerated pymt opts include Non-forfeiture</p> <p>Rate guarantees N/A</p> <p>PA: Rate Guarantees N/A</p> <p>Return of Premium Riders N/A</p> <p>SD: Discounts for Domestic Partners N/A</p> <p>No 180 & 365 elim</p> <p>Min NHMB is \$3000</p> <p>TX: No Spouse Security Benefit Rider</p> <p>No Flex to Age 85 Rider</p> <p>No Domestic Partner Discounts</p> <p>WI: Min NHMB is \$2000</p> <p>Rate guarantees N/A</p> <p>Simple Inflation rider N/A</p>

Policy Comparison

Information supplied by AdvisorNet Insurance

	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Comments	Homemaker Benefits paid with Flexible Care Benefit.	None	Home Care includes Homemaker and Chore service coverage that does not require the services of a trained aide or attendant and can be provided by individuals who are not affiliated with a Home Care Agency.	<p>Advantage Provider Program is network of 90,000+ providers offering discounts of 7-35%. Care Advocacy Program assists when new services are needed and negotiates discounts for providers chosen by insured.</p> <p>Double Coverage for Accidents Benefit pays 2X DB or MB if claim is result of accidental injury that occurs prior to age 65. This benefit is subject to additional underwriting. Not available to certain professions or people who participate in certain sports. Benefits paid in excess of the Benefit Amount will not be deducted from the policy limit.</p> <p>Assets reported are those for Manulife Financial Corporation, the parent company of John Hancock Life Insurance.</p>	This policy may be credited with dividends. Dividends will be used first to reduce premium payments and, if policy not in premium paying status, to increase future benefits. Dividends are not anticipated to be credited before the later of either the policy anniversary after the insured turns 65 or the 10th policy anniversary date. Dividends are not guaranteed.	<p>Home Health Care can be provided by an independent not affiliated with Home Health Care agency. Independent providers must be licensed/certified and qualified by training and experience to provide care.</p> <p>Mental and Nervous Disorder Exclusion removed from policies in Nov 2009. Single Premium Payment option withdrawn 2/2011.</p> <p>Amount of in-force LTC premiums quoted are in combination with United of Omaha policies.</p>	Rates changed to reflect Refreshed 2011 rates.	<p>Accident Benefit Endorsement included. If an accident result in the need for LTC, insured may receive up to 2X MDB. However, only 1X MDB will be deducted from Policy Pool of Money. The accident must occur before 67th birthday and insured was not currently benefit eligible. The Cash Benefit, Global Coverage Benefit, Remain at Home Benefit and Extension of LTC Facility Benefit not available through the Accident Benefit.</p>	<p>Mental and Nervous Disorder Exclusion removed from policies in Nov 2009. Single Premium Payment option withdrawn 2/2011.</p> <p>Amount of in-force LTC premiums quoted are in combination with Mutual of Omaha policies.</p>

Policy Comparison

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	American General	Genworth	Genworth	John Hancock	Massachusetts Mutual	Mutual of Omaha	Prudential	Transamerica	United of Omaha
Policy Name or ID number	American General LTC TQ	Privileged Choice Flex	Privileged Choice	Custom Care III	Signature Care MM-500-P	MutualCare Plus LTC09	LTC3	TransCare II	Assured Solutions Gold TQ
Insurer Statement	<p>American General Life Companies, a leading issuer of life insurance in North America, is proud to introduce long term care insurance, issued by American General Life Insurance Company. American General LTCSM features a built-in cash benefit; a Shared Care Benefit Rider, which creates a separate third pool of benefits; and graded premium options to make inflation protection more affordable - all backed by a company that has been protecting American families since 1926.</p>	<p>Privileged Choice Flex is a tax qualified reimbursement policy that covers qualified long term care in nursing facilities at 100% of the daily or monthly benefit maximum and the option to select either 50% or 100% of the NF maximum for Home Care and ALFs.</p> <p>The addition of NOW benefits is a new feature that provides a comprehensive wellness program. Live+Well, for the insured and his or her spouse or partner. This collaboration with Mayo Clinic provides on-line and phone access to extensive wellness resources. Participation is strictly voluntary and does not affect premium.</p> <p>Caregiver Support Services are also provided for the insured and family. This program, provided through CareScout, provides assistance in finding and providing care for loved ones, insured or not.</p> <p>Both Live+Well and Caregiver Support are available as soon as the policy is issued and do not require the insured to be claim eligible to take advantage of these features.</p>	<p>Privileged Choice is Genworth's premier LTCI product. Built-in features include survivorship benefits, waiver of premium, first day home care, and coverage for informal, unlicensed and uncertified caregivers. Homemaker services are covered even when they are not provided during the same visit as health care services.</p> <p>Privileged Choice is a tax qualified, reimbursement policy that covers qualified long term care expenses for home and community care, assisted living facilities and nursing facilities at 100% of the monthly benefit maximum. Home care and facility care benefits are pooled. The compound inflation protection option does not reduce benefit increases due to claims paid, resulting in a larger claims pool compared to other carriers' plans.</p> <p>Discounts up to 50% are available for couples in good health applying together when both are issued policies. Singles in good health can receive a 20% discount.</p> <p>Shared coverage is available for couples. Both policyholders sharing a single lifetime benefit amount. Joint waiver of premium is included with shared coverage. The daily maximum and elimination period apply to each policyholder separately.</p> <p>Privileged Choice provides an international facility benefit of 75% of the monthly maximum for up to 48 months.</p> <p>Riders are available for Enhanced 7 Year Survivorship, Restoration of Benefits, and Return of Premium (two options).</p> <p>Policy is available to AARP members, their spouses, and domestic partners. This policy is endorsed by AARP when sold through AARP Authorized Agents.</p>	<p>For producer use only, not for use with the public.</p> <p>Premiums shown include 100% home care. No 50% option offered. Premiums are not guaranteed and are subject to change.</p> <p>This hypothetical illustration is a general description of coverage and is not a contract.</p> <p>Refer to the outline of coverage for an explanation of features and options. Only the policy contains governing contractual provisions.</p> <p>We assume that the client is in good health and meets our underwriting guidelines.</p> <p>Rating refers only to the overall financial status of the company, and is not a recommendation of the specific policy provisions, rates, or practices of the insurance company.</p> <p>Individual long-term care insurance is underwritten by John Hancock Life Insurance Company, Boston, MA 02117 and in New York by John Hancock Life & Health Insurance Company, Boston, MA 02117.</p> <p>Caregiver Support Services: Provides policyholders and their families with access to provider discounts, care provider quality reports and expert advice when they are called on to be caregivers or care planners for aging parents, a spouse, partners, children, and relatives. Coupled with the Double Coverage for Accidents benefit and Return of Premium before 65 benefit, Caregiver Support Services gives Custom Care III the strongest package of built-in "boomer-oriented" benefits on the market today.</p> <p>Additional Consumer Protection Provisions: Designed to give clients the reassurance they need at time of purchase and at time of claim; includes provisions such as: Alternate Services Benefit for emerging care services Independent Third-Party Review option Lifestyle Benefit Changes to adjust policy coverage when needs change</p>	None	None	None	<p>This individual LTC product is also available on a multi-life platform with Modified Guarantee Issue/Simplified underwriting. Call the Home Office for details. 0 Day Elimination Period included for Home Health Care, Cash Benefit, Remain at Home Benefit, and Adult Day Care. The Remain at Home benefit provides payment directly to the client for out of pocket expenses incurred under the recommendation of a care coordinator. Benefit Increase Options available are Compound and Step-Rated Compound at 3% or 5%. If neither is selected, the deferred benefit increase option is automatically included at no extra cost. Step-Rated Inflation Benefit is based on the original issue age. Limited pay options are available. Depth in underwriting experience, including six rate classes, is provided.</p>	None

Policy Comparison
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*= See Comments in table. **= See Other Riders. Information as of 12/1/2011. Premiums are for least expensive premium class, but do not reflect couples or group discounts. **WARNING:** premiums of different policies may not be comparable, because benefit levels may differ. All options not available in all states, or over age 79. Abbreviations: FBP=Facility Benefit Period, FDB=Facility Daily Benefit, HBP=Home Care Benefit Period, HDB=Home Care Daily Benefit. na=not applicable, N/A=Not Available. Some states may prohibit agents from showing this information to customers. Check with your state insurance department before doing so. Policy information is believed accurate as of the above date. Policy issuers are asked to review their data in all cases. However, no warranties of accuracy or completeness are made by StrateCision or insurers, and the policy issuer should be consulted for final determination of features and premiums.