Long Term Care Insurance for Federal Employees

New and Newly Eligible Employees: Take Advantage of Your Special 60 Day Application Period! You (and, if married, your spouse) gain the following advantages:

- **ANSWER FEWER QUESTIONS**
  You will fill out an application that asks only a few health questions.

- **SAVE MONEY**
  You may save money — because premiums are based on your age at the time your application is received. The younger you are when you apply, the lower your premiums!

- **HELP PLAN FOR YOUR FUTURE**
  By applying now, you could avoid the risk of having a future change in health disqualify you from obtaining coverage.

You can apply online! Applying will never be easier.

See Inside For:
- What is long term care?
- Eligibility, including qualified relatives
- How to get more info & personalized advice
The Federal Long Term Care Insurance Program was designed specifically for members of the Federal Family, and that includes YOU. Sponsored by the Federal Government, this Program is designed to protect enrollees against the high costs of long term care. Unlike some other Federal benefits, the FLTCIP is medically underwritten. You will have to apply for coverage. However, as a new or newly eligible employee, you have the opportunity to apply with abbreviated underwriting within the first 60 days of becoming eligible. (This is your Special 60 Day Application Period.) This means you will only have to answer a few questions about your health.

Who’s Eligible for this Special 60 Day Application Period?

The following persons can apply for coverage with abbreviated underwriting within 60 days from the date they become eligible for this Program:

- Newly hired or newly eligible Federal and U.S. Postal Service employees
- Newly active members of the uniformed services
- Newly hired or newly eligible:
  - DC Courts employees
  - BUPERS NAF employees
  - Tennessee Valley Authority employees
- Current spouses of eligible persons in the groups described above
- The newly married spouses of eligible employees and active members of the uniformed services (within 60 days from the date of marriage)

Federal and U.S. Postal Service employees must be in positions that convey eligibility for the Federal Employees Health Benefits Program (whether enrolled or not). Members of the uniformed services must be in active duty status or National Guard duty for at least 30 days, or be in the Selected Reserve.

After this initial 60 day period, you can still apply for coverage, but you must complete a full underwriting application that asks more questions about your health.

Note: If you have prior Federal Government service in which you had eligibility for this Program (including time in the uniformed services), you must have at least a 180 day break in service to be considered a new employee. If your break in service is less than 180 days, you can still apply with full underwriting.

Qualified Relatives Can Also Apply!*

If you are eligible to apply, your parents, parents-in-law, stepparents, and adult children are eligible to apply too!

They can apply for coverage even if you don’t apply.

*Must complete a different application with full underwriting.
Covered Services

Choose the plan that’s right for you!

A **Facilities-Only Plan** covers all levels of nursing home care, including skilled, intermediate, and custodial care. Care in assisted living facilities and inpatient hospice care are also covered.

A **Comprehensive Plan** covers everything the Facilities-Only Plan covers, plus it covers care provided at home by a nurse, home health aide, therapist, or other authorized provider (including an informal caregiver). Care in adult day care centers and home hospice care are covered as well.

Built-In Features

**Consultative Services** — You have access to experienced and knowledgeable Certified Long Term Care Insurance Consultants (who do not work on commission) who can help guide decision-making, compare plans, provide personalized rate quotes, and assist in completing an application for coverage.

**Informal Care** — Unlike many other plans, the FLTCIP’s Comprehensive Plan covers care provided in the home by friends, family members, and other non-licensed caregivers who didn’t normally live in your home at the time you became eligible for benefits. When informal care is provided by family members, it is covered for up to 365 days in your lifetime.

**Care Coordination Services** — Long Term Care Coordinators (all registered nurses) can arrange for discounted services, monitor the care you’re receiving, and assist with planning, arranging and coordinating your care as your needs change. Access to care coordination services is available not only to enrollees but to their qualified relatives as well.

**Alternate Plan of Care** — Under certain circumstances, Long Term Care Coordinators can authorize benefits for services that are not specifically covered under this Program (for example, making your home wheelchair accessible).

**Competitive Group Rates** — Thanks to negotiations on your behalf by OPM, the FLTCIP has competitive group rates.

**Waiver of Premium** — You do not pay premiums while you are receiving benefits.

**Your Coverage is Portable** — Once you are enrolled, your coverage is portable. You can keep it as long as you continue to pay the required premium and have not exhausted your Maximum Lifetime Benefit. Even if you are no longer a member of an eligible group (e.g., you leave Government service), your premiums and coverage will not change because you left the group.

**Guaranteed Renewable** — Once you are enrolled, your coverage will not be cancelled as long as you pay your premiums on time. Coverage cannot be canceled due to your age or a change in your health. Your premium can only be changed with OPM’s approval and only on a group, not an individual, basis.

**International Benefits** — This Program provides coverage for enrollees who may require care in a country outside the U.S.
If you are under age 35:

In most instances, the younger you are when you apply for long term care insurance, the lower your lifetime premiums will be. When you apply at age 30, the biweekly premium for a plan that covers home and facilities care and helps keep pace with inflation is $14.76.† And while it may take years to accumulate enough investments to pay for long term care needs, long term care insurance can provide support shortly after your coverage becomes effective. That could be very important to your finances should a disabling illness or injury strike.

If you are age 35 to 60:

You can still take advantage of low premiums. When you apply at age 50, the biweekly premium for a plan that covers home and facilities care and helps keep pace with inflation is $28.70.† Plus, if you are in good health now, you could avoid the risk of being turned down later.

If you are over age 60:

Because your odds of needing long term care are higher now, it is a good time to consider purchasing long term care insurance. Doing so can help protect the nest egg you worked so hard to build. You’ll have a greater ability to make your own decisions about your long term care. You can help ensure that you won’t need to rely too heavily on your children or other family members should you ever require this type of care, or spend down your assets to qualify for Medicaid (Medi-Cal in California).

† Comprehensive Plan with $100 daily benefit amount, 3-year benefit period, 90-day waiting period and automatic compound inflation option.

This Program is medically underwritten, which means that you will have to answer questions about your health on your application. Certain medical conditions, or combinations of conditions, will prevent some people from being approved for coverage. You need to apply to find out if you qualify for coverage under this Program.

“It’s important for us all to think about how our future long term care needs may affect us and our families. Although I have five children, I don’t want to depend solely on them to provide the long term care I may need. That’s why I have coverage under the Federal Long Term Care Insurance Program.”

LAURA J. LAWRENCE
CONTRACTING OFFICER FOR THE FEDERAL LONG TERM CARE INSURANCE PROGRAM
U.S. OFFICE OF PERSONNEL MANAGEMENT
What Is Long Term Care?

Long term care is help with activities of daily living (such as eating, dressing and bathing) that someone may need due to an illness, injury, or aging. The person generally needs the help for a long time. Long term care also includes the supervision needed by someone with a severe cognitive impairment (such as Alzheimer’s disease). Although usually associated with the aged, the need for long term care can strike anyone at any time. The cost of long term care can be substantial, so it’s important to prepare now.

There Is A Solution...

Whatever your age, long term care insurance can be one of the best and most economical ways to help pay for long term care, should you require it. Long term care insurance helps give you control over the type of care you receive and where you receive it. It also helps ensure your independence, so you won’t have to worry about becoming overly dependent upon your loved ones.

Here’s Why You Should Consider the Federal Long Term Care Insurance Program

The Federal Long Term Care Insurance Program (FLTCIP) provides protection from the potentially high costs of long term care. Enrollees can count on the FLTCIP’s comprehensive coverage and stability. It’s the largest program of its kind in the nation and is sponsored by the U.S. Office of Personnel Management (OPM). The FLTCIP also reflects the long and careful efforts of OPM and two insurance leaders — John Hancock and MetLife — who have been offering long term care insurance for over 15 years and have a long history of rate stability.

Medical Insurance Doesn’t Cover Long Term Care

Long term care expenses are not covered by traditional medical insurance plans such as the Federal Employees Health Benefits Program, TRICARE, and TRICARE For Life, or by disability income insurance. While Medicare covers some care in nursing homes and at home, it does so only for a limited time, subject to restrictions. The Department of Veterans Affairs provides limited long term care services to veterans with restrictions on who can receive them. Medicaid (Medi-Cal in California), the government health care program to help those who meet their state’s poverty guidelines, won’t pay for long term care services until virtually all of your assets have been depleted to state-required levels. Under Medicaid, you may have little choice or control over the care you receive.

The Federal Long Term Care Insurance Program

☐ YES! Please send me an Information Kit and application for coverage under the Federal Long Term Care Insurance Program.

Name: __________________________________________________________________________________

Address: ________________________________________________________________________________

City: ___________________________ State: ___________________________

Zip: ___________________________ Date of Birth: ________ / _______ / ________

Email address: ____________________________________________________________________________

Phone number: ( _______________) ____________________________________________________________

Signature: X ______________________________________________________________________________

By providing my telephone number and signature, I am giving Long Term Care Partners permission to call me.

Note: Certain medical conditions, or combinations of conditions, will prevent some people from being approved for coverage. You need to apply to find out if you qualify for coverage under this Program.

Reference Code 576

The Federal Long Term Care Insurance Program is administered by Long Term Care Partners, LLC, and offered by John Hancock Life Insurance Company, Boston, MA Metropolitan Life Insurance Company, New York, NY

Sponsored by the United States Office of Personnel Management
Reply today!

Choose one of these three easy options below to request your Information Kit and application:

1. Visit us online at www.LTCFEDS.com
2. Call 1-800-LTC-FEDS (1-800-582-3337) (TTY 1-800-843-3557)
3. Fill out and mail the postage-paid Information Request Card below
Find out more about the Federal Long Term Care Insurance Program

Call 1-800-LTC-FEDS (1-800-582-3337) (TTY 1-800-843-3557)
or visit us online at www.LTCFEDS.com

Our Website contains detailed information on the FLTCIP. You’ll also find:

- Online application
- Premium calculator
- Cost of care calculator
- And much more!

By applying within 60 days of your hire or eligibility date, you (and, if married, your spouse) will have a shorter application.

The Federal Long Term Care Insurance Program™

Sponsored by the
United States Office of Personnel Management

The Federal Long Term Care Insurance Program is administered by Long Term Care Partners, LLC, and offered by John Hancock Life Insurance Company, Boston, MA and Metropolitan Life Insurance Company, New York, NY.