

Design Your Own Plan

What % of the cost do you want to insure? (Average monthly costs are between \$3,500 and \$4,500)

- 100% 90%
 75% 50%

What type of care would you like to cover?

(80% of Long Term Care costs are delivered in the home or non nursing facilities)

- Nursing Home & Home Health Care
 Nursing Home Only
 Home Health Care Only

How much inflation protection do you want?

(long term care costs have been increasing over 8% a year)

- 5% Compound
 5% Simple
 C.P.I. Increase

How many years of benefit would you like the insurance company to pay?

- Unlimited 2 Years 3 Years
 4 Years 5 Years 6 Years

How many months could you comfortably afford to pay the full cost of care?

- 1 Month 6 Months
 2 Months 1 Year
 3 Months

I want my plan to pay for treatment or services provided by non licensed or informal caregivers such as friends or family members.

- This is a must even if it costs more
 It is important but not essential
 Not important

I am interested in a paid up policy (additional cost).

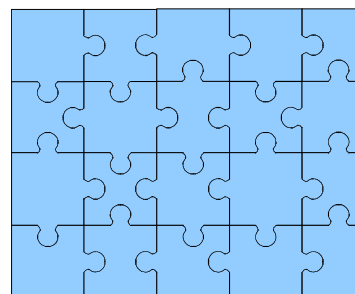
- Single Pay
 Paid up in 15 years
 Paid up in 20 years
 Not important

Want more information?

You	Smoker ?
Name:	
Date of Birth:	
Address:	
City: Zip	State
Phone:	Best Time to call:
Hospitalizations within the last 5 years? (When & What for?)	
Medications taken in the last 5 years? (What for & Dosage)	
Your Spouse	Smoker ?
Name:	
Date of Birth:	
Hospitalizations within the last 5 years? (When & What for?)	
Medications taken in the last 5 years? (What for & Dosage)	

Fax to 817-569-8304

We help you solve the



Long Term Care puzzle

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