Help protect your future from life’s uncertainties

GROUP LONG TERM CARE INSURANCE PROGRAM
Underwritten by Genworth Life Insurance Company

Your Group Long Term Care Insurance Program
University of St. Thomas benefits include Group Long Term Care Insurance for newly hired employees. Under the University of St. Thomas Voluntary Group Long Term Care Insurance Program, coverage to help pay for long term care may be more affordable than you think.

The need
Long term care insurance enhances University of St. Thomas benefit offerings by meeting a largely unrecognized need many of us may have. It pays for covered expenses for long term care services whether they are received at home, in the community or in a nursing facility. Here are a few points to consider:

• These expenses aren’t covered by either disability or health insurance.
• Relying on government programs may not be a viable solution.
• Without insurance, the costs of these services may have to come out of our savings.

The cost
Today, a private room in a Minnesota nursing facility averages $79,935\(^1\) a year and costs are rising. Since a typical stay can average three years\(^2\), a long term care situation could cost almost $239,805.

The opportunity
As a newly hired employee you have the opportunity to get additional coverage, with no underwriting or streamlined underwriting depending on your age and the plan you choose, during the first 30 days after you become benefit eligible.

\(^1\) Genworth 2013 Cost of Care Survey, conducted by CareScout, 03/2013.
\(^3\) National Clearinghouse For Long Term Care Information, “Own Your Future” website, U.S. Department of Health and Human Services, Last Updated October 22, 2008.
What are your basic choices?

**Step 1: Choose a Monthly Benefit**
This is the maximum amount you’ll be reimbursed each month for covered long term care expenses. You have the following choices.

<table>
<thead>
<tr>
<th>Monthly Benefit Choices</th>
<th>Will Reimburse Up to This Amount For Covered:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Home Care</td>
</tr>
<tr>
<td>$3,000/month</td>
<td>$3,000/month</td>
</tr>
<tr>
<td>$4,500/month</td>
<td>$4,500/month</td>
</tr>
<tr>
<td>$6,000/month</td>
<td>$6,000/month</td>
</tr>
<tr>
<td>$7,500/month</td>
<td>$7,500/month</td>
</tr>
<tr>
<td>Minnesota cost of care</td>
<td>$4,767/month</td>
</tr>
</tbody>
</table>

4 Genworth 2013 Cost of Care Survey, conducted by CareScout, 03/2013.

**Step 2: Select Your Total Coverage Amount**
This is the total amount of money available to pay covered long term care expenses for the lifetime of your coverage. You have Total Coverage choices available, depending on the Monthly Benefit you chose.

<table>
<thead>
<tr>
<th>Monthly Benefit Choices</th>
<th>Total Coverage Choices</th>
</tr>
</thead>
<tbody>
<tr>
<td>$3,000/month</td>
<td>$72,000</td>
</tr>
<tr>
<td>$4,500/month</td>
<td>$108,000</td>
</tr>
<tr>
<td>$6,000/month</td>
<td>$144,000</td>
</tr>
<tr>
<td>$7,500/month</td>
<td>$180,000</td>
</tr>
</tbody>
</table>
Step 3: Choose a Benefit Increase Option
This program offers 3 Benefit Increase Options to help you protect against the rising cost of care:

**Buy More Coverage Over Time**
Every three years, you will be offered additional coverage - as long as you’re not in claims status. If you accept the offer, both your Monthly Benefit and your Total Coverage Maximum (less any claims paid) will increase by 5%, compounded annually.

**Automatic 3% Increase for Life - Compound**
Your Monthly Benefit and Total Coverage Maximum (less any claims paid) will automatically increase by 3% compound every year.

**Automatic 5% Increase for Life - Compound**
Your Monthly Benefit and Total Coverage Maximum (less any claims paid) will automatically increase by 5% compound every year.

A simple solution can fit your needs and budget
It’s easy to apply for coverage – and it may be more affordable than you think. You can tailor a plan to meet your individual needs and your budget.

Call the toll-free number and speak with a Program Expert or go to the dedicated website to get a personalized quote.

With the University of St. Thomas Group Long Term Care Insurance Program, a 45 year old can purchase comprehensive coverage starting at $20.41 per month.5

<table>
<thead>
<tr>
<th>Monthly Benefit</th>
<th>$3,000</th>
<th>$4,500</th>
<th>$7,500</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Coverage</td>
<td>$72,000</td>
<td>$162,000</td>
<td>$450,000</td>
</tr>
<tr>
<td>Monthly Premium</td>
<td>$20.41</td>
<td>$34.82</td>
<td>$69.93</td>
</tr>
</tbody>
</table>

While Genworth Life Insurance Company reserves the right to change future premiums for the Group Policy, your premiums will never increase solely due to changes in your age or your health status.

5 Assumes the “Buy more coverage over time” benefit increase option and does not include the optional non-forfeiture benefit. These premiums are not guaranteed, and the insurer has the right to change rates in the future. While Genworth Life Insurance Company reserves the right to change future premiums for the Group Policy, your premiums will never increase solely due to changes in your age or your health status.

Details about benefits, costs, limitations and exclusions can be found in the outline of coverage.

This material is part of a solicitation for Group Long Term Care Insurance under Group Policy number 12033 issued to University of St. Thomas, on policy form series 7046, underwritten by Genworth Life Insurance Company. Form numbers can vary by state, including a state specific variation.
Benefit Eligibility, Limitations and Exclusions

To understand the benefits and features available to you under this Program go to www.genworth.com/groupltc (Group ID stthomas and Access code groupltc) or call 800.416.3624. The limitations and exclusions that apply to this coverage are listed below.

Eligibility for Benefits: Your Group Program can reimburse you, up to your plan limits, for the costs of covered long term care services. You qualify for reimbursement when you need assistance with 2 or more everyday activities which include bathing, continence, dressing, eating, toileting, and transferring out of a bed, chair or wheelchair, and the need is expected to last for at least 90 days; or when you need substantial supervision due to a cognitive impairment, such as Alzheimer’s disease. A licensed health care professional must confirm your condition. The services must be part of your plan of care from a licensed health care professional.

Limitations and Exclusions: As with any insurance program, certain limitations apply. Charges that are not covered include those for services: • for which no charge is made • received outside of the United States • provided by your immediate family except as covered under the Informal Care benefit • for which benefits are payable by a Worker’s Compensation or occupational disease act or law • provided by a Veteran’s Administration or other federal government facility, unless a valid charge is made. Charges are also not covered if they are for services that are required because of: • war or an act of war • attempted suicide or self-inflicted injury • your participation in a felony, riot or insurrection • service in the armed forces or units auxiliary thereto • alcoholism or drug addiction.

Other Limitations on Benefits: Benefits under the Program coordinate with other long term care insurance meaning that the sum of all benefits you receive will not exceed the actual charges. And, benefits will not duplicate benefits received under another insurance program such as: • Medicare • any state or federal worker’s compensation, employer’s liability, or occupational disease law • any other federal, state or government health care or long term care program or law except Medicaid .

This is a summary of the limitations and exclusions. State variations may apply to these exclusions and limitations. The specific language may vary or change the impact of the exclusion. For example, in Oklahoma, the war exclusion is qualified. Check your Outline of Coverage for complete details and any state variations that apply.