

Aetna Group Long Term Care Insurance Benefits Summary – Service Reimbursement Plan

The Greek Orthodox Archdiocese is sponsoring a long-term care insurance plan underwritten by one of the top group carriers, Aetna Life Insurance Company. The chart below outlines some of this Service Reimbursement plan's benefits and features. For term definitions and additional information, please call 1-800-785-4432.

Who's Eligible	Active employees working 20 hours or more per week, as well as spouses, parents, parents-in-law, grandparents and grandparents In-law. All eligible employees must be actively at work on the effective date to be covered under this plan. Retirees, their spouses and surviving spouses are also eligible.																
Premium Contribution	Your premium is based on your current age, the daily benefit, lifetime maximum, inflation protection feature you select and whether or not you choose to include Return of Contributions and/or Benefit Bank. If enrolled, you will receive notification of your monthly premium contribution.																
(Choice of Amount of Coverage Per Day): Amount of Coverage Per Day = Daily Benefit Amount (DBA)	You choose a Daily Benefit Amount (DBA) of \$100, \$200, or \$300 or select anywhere from \$100 to \$350 in \$1 increments. The plan will reimburse you for expenses incurred up to a certain percentage of your DBA (see Expenses Covered). The DBA is the maximum amount of coverage your plan could provide you each day.																
How you Qualify for Claim (Receive Benefits)	You qualify for claim if a licensed health care practitioner annually certifies that you are unable to perform at least two of six activities of daily living: bathing, dressing, eating, transferring, toileting, continence (for at least 90 days) or have a severe cognitive impairment (like Alzheimers). You must also submit a claim form. Aetna decides when a qualifying loss of functional capacity occurs and may consider information from the covered person, his or her attending physician and other health care providers.																
Single Waiting (Deductible) Period of 90 Days	In order to receive benefits, only one consecutive 90-day waiting (deductible) period needs to be met, regardless of how often and for what reason you qualify for claim. The waiting period helps keep plan rates affordable.																
Premiums Waived When in Claim	After the 90-day waiting period, premiums are waived. You pay no premiums while you receive benefits.																
Restoration of Benefits	Your total Lifetime Maximum Benefit is restored to its original value when you recover and resume premium payments.																
(Optional) Automatic Inflation Protection Increases	(Automatic Increase) If you choose to include this feature in your LTC plan, your coverage will automatically be increased every year without proof of good health to help keep pace with the rising cost of long-term care. Your coverage will be increased through this feature even if you are in claim.																
(Optional) Voluntary Inflation Protection Increase	(Voluntary Increase) If you choose to include this feature in your LTC plan, you may increase your coverage every three years without proof of good health to help keep pace with the rising cost of long-term care. You may increase your coverage through this feature even if you are in claim as long as you have not turned down a previous offer.																
30-Day Free Look	Your premiums will be refunded if you cancel your plan within 30 days of receiving your Certificate of Coverage booklet.																
Expenses Covered	<p>The plan will reimburse you for bills submitted for covered expenses up to a percentage of your Daily Benefit Amount (DBA).</p> <table data-bbox="570 1388 1523 1692"> <tr> <td>Nursing Home or Hospice Facility Care:</td> <td>Actual Expenses up to 100% of DBA.</td> </tr> <tr> <td>Assisted Living Facility Care:</td> <td>Actual Expenses up to 100% of DBA.</td> </tr> <tr> <td>Adult Day Care:</td> <td>Actual Expenses up to 50% of DBA.</td> </tr> <tr> <td>Hospice Care:</td> <td>Actual Expenses up to 50% of DBA.</td> </tr> <tr> <td>Home Health Care:</td> <td>Actual Expenses up to 50% of DBA.</td> </tr> <tr> <td>Community Based Care:</td> <td>Actual Expenses up to 50% of DBA.</td> </tr> <tr> <td>Alternate Care:</td> <td>Actual Expenses up to 50% of DBA.</td> </tr> <tr> <td>Bed Reservation:</td> <td>100% of your DBA for 21 days per calendar year to hold the bed in a nursing facility.</td> </tr> </table>	Nursing Home or Hospice Facility Care:	Actual Expenses up to 100% of DBA.	Assisted Living Facility Care:	Actual Expenses up to 100% of DBA.	Adult Day Care:	Actual Expenses up to 50% of DBA.	Hospice Care:	Actual Expenses up to 50% of DBA.	Home Health Care:	Actual Expenses up to 50% of DBA.	Community Based Care:	Actual Expenses up to 50% of DBA.	Alternate Care:	Actual Expenses up to 50% of DBA.	Bed Reservation:	100% of your DBA for 21 days per calendar year to hold the bed in a nursing facility.
Nursing Home or Hospice Facility Care:	Actual Expenses up to 100% of DBA.																
Assisted Living Facility Care:	Actual Expenses up to 100% of DBA.																
Adult Day Care:	Actual Expenses up to 50% of DBA.																
Hospice Care:	Actual Expenses up to 50% of DBA.																
Home Health Care:	Actual Expenses up to 50% of DBA.																
Community Based Care:	Actual Expenses up to 50% of DBA.																
Alternate Care:	Actual Expenses up to 50% of DBA.																
Bed Reservation:	100% of your DBA for 21 days per calendar year to hold the bed in a nursing facility.																

Aetna Group Long Term Care Insurance Benefits Summary – Service Reimbursement Plan

The Greek Orthodox Archdiocese is sponsoring a long-term care insurance plan underwritten by one of the top group carriers, Aetna Life Insurance Company. The chart below outlines some of this Service Reimbursement plan's benefits and features. For term definitions and additional information, please call 1-800-785-4432.

<p>Additional Expenses Covered</p>	<p>Additional benefits that <u>do not</u> deduct from the Lifetime Maximum:</p> <p>Transitional Care: One time payment equal to 3 times your DBA.</p> <p>Choice of: Informal Care: 25% of your DBA for up to 50 or 365 days per calendar year.</p> <p>Informal Care Giver Training: One payment per claim equal to cost of training up to 3 times your DBA.</p> <p>Respite Care: 50% of your DBA for up to 21 days per calendar year</p>
<p>(Choice of Total Coverage)</p> <p>Total Coverage for Life of Plan = Lifetime Maximum Benefit Amount</p>	<p>You may select a 3, 5 or 20 year Lifetime Maximum Benefit. Your Lifetime Maximum Benefit is determined by multiplying the number of days in 3, 5, or 20 years by your Daily Benefit Amount (DBA).</p> <p>To determine the <i>total amount</i> of money that your coverage provides; i.e. "Lifetime Maximum Benefit":</p> <ol style="list-style-type: none"> 1. Multiply the DBA you select by 365 (days in a year) 2. Multiply that result by the number of years your plan is based on (3, 5 or 20 years). <p>Based on when and where you receive care, your Lifetime Maximum Benefit could be paid out in a minimum of 3, 5, or 20 years or in a <i>much longer</i> period of time.</p> <p><i>Example on Calculating the Lifetime Maximum Benefit:</i> <i>DBA = \$250</i> <i>Lifetime Maximum Benefit is based on 5 years.</i> <i>Therefore, your total lifetime Maximum Benefit is: \$250 x 365 = \$91,250 x 5 years = <u>\$456,250.</u></i></p>
<p>(Optional) Return of Contributions (ROC) Feature</p>	<p>If you die while paying premiums, a named beneficiary will receive 100% of premiums you have paid for LTC. However, the following rules apply:</p> <ul style="list-style-type: none"> ▪ For employees, the amount of the refund is reduced by 10% starting at the later of age 65 or retirement. ▪ For all other enrollees, the amount of the refund is reduced by 10% starting at age 65. <p>The reduction will result in no benefit being payable nine years after reduction begins. If you are receiving benefits at the time of your death, no ROC is payable.</p>
<p>(Optional) Non-Forfeiture – Benefit Bank</p>	<p>If you discontinue paying premiums within the first three years of LTC coverage, all premiums paid are forfeited. However, if you discontinue paying premiums after your LTC coverage has been in place for three or more years, Aetna will set aside the greater of the following to pay for your future long-term care needs: 1) 100% of premiums paid, or 2) one month of benefits. This is not a cash value.</p>
<p>Leave Your Job and Continue Coverage</p>	<p>If you leave your current employer you can continue your coverage at the same group rate by paying premiums directly to Aetna.</p>
<p>Choices to Make</p>	<ol style="list-style-type: none"> 1. Tailor your LTC Plan. Choices to make. <ul style="list-style-type: none"> ⇒ Select your Daily Benefit Amount (You may choose \$100, \$200, or \$300 or select any amount from \$100 to \$350 in \$1 increments). ⇒ Select your Lifetime Maximum Benefit (3, 5, or 20 years). ⇒ Select your Inflation Protection feature (Voluntary or Automatic Inflation Protection.) ⇒ Determine whether or not to include 'Return of Contributions' and/or Benefit bank. ⇒ Select your Informal Care Option (25% of your DBA for up to 50 or 365 days per year). 2. Forms to Complete: <ul style="list-style-type: none"> ➤ If you are an employee enrolling during the special enrollment period or if you are a new employee enrolling within your first 45 days of hire, please complete the one page "<u>Employee Enrollment Form.</u>" ➤ If you are a spouse/domestic partner of an employee or if you are an employee enrolling after the special enrollment or after 45 days of hire, please complete the "<u>Employee (Late Applicant) and Spouse of an Employee Long Term Care Medical Questionnaire/Enrollment Form.</u>" ➤ All others must complete the "<u>Group Long Term Care Insurance Medical Questionnaire/Enrollment</u>" form. ➤ EVERYONE MUST complete the "<u>Long Term Care Insurance Personal Worksheet</u>" including the <u>Disclosure Statement</u> portion of the worksheet in order for your enrollment form to be processed. 3. Please return all form(s) directly to The GDC Financial Group, Inc.

For more information please call 1-800-785-4432.