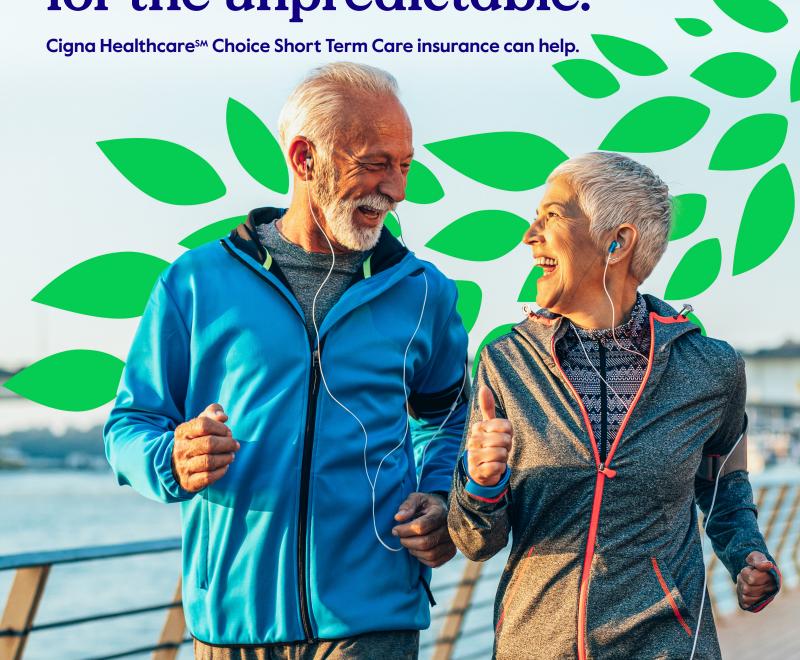


# Predictable coverage for the unpredictable.



The future is unpredictable, but your financial health shouldn't be. Gain peace of mind by protecting yourself from out-of-pocket expenses related to care in-home or in a facility with a Cigna Healthcare Choice Short Term Care insurance policy.

Cigna Healthcare has over 230 years of experience and 189 millions customers worldwide<sup>1</sup>, so you can be confident your Choice Short Term Care plan will be there if you need it. Plus, it pays fixed dollar amounts daily so you can be secure knowing what your benefits will be.<sup>2</sup>

of adults age 65+ get paid in-home care.<sup>3</sup> 6 months
is the average length of in-home care for adults age 70-79.3

of adults age 65+ get at least 90 days of nursing facility care.<sup>3</sup>

- Facility Care and Home Healthcare: Both benefits are included in the policy and they are funded separately, so using one won't impact the other.
- Facility Care coverage: Skilled Nursing, Rehabilitation, Assisted Living and Custodial Care are covered through the Facility Care benefit.
- 15% premium discount: Available when both spouses purchase a policy.
- Care Transition benefit: Up to IO days of immediate Home Healthcare assistance provided by a family member or friend until professional assistance is available.
- **Benefits reset:** Both the Home Healthcare and Facility benefits reset once each per policy lifetime if, after having care, the policyholder recovers and no longer needs or receives care for a period of at least I8O days.
- · 24/7/365 support: U.S.-based live customer service.

With a simple plan design, three policy options – Choice 100, Choice 200 and Choice 300 – and two optional riders,<sup>4</sup> Cigna Healthcare makes it easy for you to select the coverage that best meets your needs and budget.

- Inflation Protection Rider: Increases all benefit amounts by 5% simple interest annually for the life of the policy to help safeguard against increases in the cost of care.
- · Home Care Booster Rider: Doubles the amount of the Home Healthcare benefit.

#### Plan details:

- · Available for ages 18-89.
- · Benefit Period options: 180 and 360 days.
- · Elimination Period options: O and 20 days.
- · There are no network requirements so you can use the home care providers and facilities of your choice.
- · Policy isn't affected by any other insurance you may have.
- Guaranteed renewable for life, so only you can cancel your policy.<sup>5</sup>
- · Benefits are paid directly to you or a person you designate and can be used however you choose.

Benefits schedule exhibit <sup>6</sup>				
Benefits	Benefit amount			
	Choice 100	Choice 200	Choice 300	
Facility Care	\$100 per day	\$200 per day	\$300 per day	
Home Healthcare	\$50 per day	\$100 per day	\$150 per day	
Bed Reservation	Pays the Facility Care benefit for up to 20 days while hospitalized or in a hospital observation unit.			
Care Transition	Pays the Home Healthcare benefit for up to 10 days for anyone providing care – can be a professional, a family member, neighbor or a friend.			
Restoration of Benefits	Both the Facility Care and Home Healthcare benefits reset once each per policy lifetime if, after having care, the policyholder recovers and no longer needs or receives care for a period of at least 180 days.			

## Cigna Healthcare Choice Short Term Care coverage scenario:

Julia slipped on some ice and suffered a serious hip injury that required surgery. Fortunately, she had purchased a Choice Short Term Care policy a year earlier.

**Facility Care:** After discharge from the hospital, she spent 5 days in a professional rehabilitation facility receiving physical therapy. While there she suffered an infection and had to return to the hospital for 4 days of treatment.

**Bed Reservation:** Julia liked the rehabilitation facility and didn't want to risk losing her room while in the hospital so she reserved her bed.

**Facility Care:** After recovering in the hospital, Julia returned to the rehabilitation center where she progressed much faster than expected and was discharged after I2 days. Although she was ready to be discharged from the facility, she still needed help at home with daily activities.

# Cigna Healthcare Choice Short Term Care 200 Policy

Julia received \$5,600 to help pay the costs not covered by her traditional insurance coverage.

Home Healthcare: 9 days  Total	\$900 <b>\$5,600</b>
Care Transition: 5 days	\$500
Bed Reservation: 4 days	\$800
Facility Care: 17 days	\$3,400

Presented for illustration only<sup>7</sup>

**Care Transition:** Unfortunately, no home health agencies were available to provide staff during her first week home, so her granddaughter took time away from work each day to help.

**Home Healthcare:** The home health agency began caring for Julia and she received visits 3 times per week for 3 weeks from an in-home professional.

**Restoration of Benefits:** Once fully recovered, Julia was able to return to her normal activities without any assistance. She did not need to use her Cigna Healthcare Choice Short Term Care policy for I8O days, so her benefits were fully restored.

## **Benefit Eligibility and Important Terms:**

**Benefit Eligibility** An insured person is eligible for benefits under this policy, as described below, when a health care provider determines that:

- a. the insured person is unable to perform two or more Activities of Daily Living (ADL) without substantial assistance; or
- b. the insured person requires substantial supervision and assistance due to cognitive impairment.

The insured person must first satisfy the elimination period, if applicable, before benefits become payable. The elimination period, if applicable, applies to each insured person independently. A plan of care must be prescribed by a licensed health care provider and approved by your physician for benefits to be paid by this policy. We may request to have you examined or evaluated by independent medical experts at our expense. The exam or evaluation will be performed to assess and confirm the care you are receiving is prescribed in your plan of care, and you are eligible for benefits.

### Activities of Daily Living (ADLs) means the following self-care functions:

- a. bathing: washing oneself by sponge bath; or in either a tub or shower, including the task of getting into or out of the tub or shower.
- continence: the ability to maintain control of bowel and bladder function; or, when unable to maintain control
  of bowel or bladder function, the ability to perform associated personal hygiene (including caring for catheter
  or colostomy bag).
- c. dressing: putting on and taking off all items of clothing and any necessary braces, fasteners or artificial limbs.
- d. eating: feeding oneself by getting food into the body from a receptacle (such as a plate, cup, or table) or by a feeding tube or intravenously.
- e. toileting: getting to and from the toilet, getting on and off the toilet, and performing associated personal hygiene.
- f. transferring: the ability to move into or out of a bed, chair or wheelchair.

**Cognitive Impairment** means deterioration of or reduction in your intellectual capacity due to organic brain disease or disorder. You must require continual supervision to prevent harm to yourself or others, as measured by clinical evidence and standardized tests that measure your cognitive impairment in the following areas:

- a. your short or long term memory;
- b. your orientation as to person (such as who you are), place (such as where you are) and time (such as day, date and year);
- c. your deductive or abstract reasoning; and
- d. your judgment as it relates to safety awareness.

**Elimination Period** means the total number of days that covered care must be received before you are eligible for benefits under the policy. The elimination period starts on the date that benefits would otherwise begin and is in effect for the number of days shown in the policy schedule page. Only days in which services are actually rendered will satisfy the elimination period. Days used to satisfy the elimination period do not need to be consecutive; however, they cannot be separated by more than 180 calendar days. A new elimination period must be met if it has been more than 180 calendar days since covered care was received.

**Home Healthcare** means one or more of the following services for your care that are provided by a home health agency in your home according to a written plan of care:

- a. nursing and related personal care services under the direction of a registered nurse, including home health aide services; or
- b. home health aide services (which include assistance in your home with simple healthcare tasks, personal hygiene, activities of daily living, managing medication and other related services provided by a home health agency).



- 1. Across all lines of business. As of March, 2023.
- 2. Benefits may vary by state and all benefits payable are subject to the terms and conditions of the policy.
- 3. Johnson R. "What Is the Lifetime Risk of Needing and Receiving Long-Term Services and Supports?" Urban Institute. Office of the Assistant Secretary for Planning and Evaluation. U.S. Department of Health and Human Services. https://aspe.hhs.gov/reports/what-lifetime-risk-needing-receiving-long-term-services-supports-0. April, 3, 2019.
- 4. Optional riders available for an additional premium.
- 5. Subject to the company's right to increase premiums on a class basis.
- 6. Actual coverage terms and benefit amounts will vary depending on the terms of your specific policy. Policy terms and conditions apply. This policy pays fixed benefits according to a schedule and may not cover the cost of all medical expenses (it does not pay for medical expenses as incurred). For a complete description of the plan coverage, including plan terms, exclusions and limitations, refer to your plan documents.
- 7. Refer to plan documents for complete description of all covered benefits.

Loyal American Life Insurance Company, PO Box 5700, Scranton, PA 78505-5700. Loyal American Life Insurance Company is a proud member of the Cigna family of companies.

This is a solicitation for insurance. An insurance agent/producer may contact you. This brochure is designed as a marketing aid and is not to be construed as a contract for insurance. It provides a brief description of the important features of policy form series LY-STC-BA, LY-HB-RD and LY-IP-RD, and in Oklahoma LY-STC-BA-OK, LY-HB-RD-OK and LY-IP-RD-OK, in Texas LY-STC-BA-TX, LY-HB-RD-TX and LY-IP-RD-TX. The full terms and conditions of coverage are stated in, and governed by, an issued policy and riders. THIS POLICY PROVIDES LIMITED BENEFITS FOR SHORT TERM CARE ONLY. Availability may vary by state.

SHORT TERM CARE POLICIES PAY LIMITED BENEFITS ONLY. THEY DO NOT CONSTITUTE COMPREHENSIVE HEALTH INSURANCE COVERAGE AND ARE NOT INTENDED TO COVER ALL MEDICAL EXPENSES. THIS COVERAGE DOES NOT SATISFY THE "MINIMUM ESSENTIAL COVERAGE" OR INDIVIDUAL MANDATE REQUIREMENTS OF THE AFFORDABLE CARE ACT (ACA). THIS COVERAGE IS NOT MEDICAID OR MEDICARE SUPPLEMENT INSURANCE.

All Cigna Healthcare products and services are provided exclusively by or through operating subsidiaries of The Cigna Group, including Loyal American Life Insurance Company (Cleveland, OH). The Cigna Healthcare name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc. All pictures are used for illustrative purposes only.

898083 01/24 © 2024 Cigna Healthcare. Some content provided under license.