

Mid-Atlantic Permanente Medical Group P.C.

What type of plan is this?

This is group long term care insurance issued by Unum. It is designed to pay a fixed monthly benefit when a covered person is disabled, meets the policy's claim requirements, and receives qualifying long term care services. It is intended to be a qualified long term care insurance contract under Internal Revenue Code Section 7702B(b). It is not Medicare supplement coverage.

What can the coverage be used for?

- **Long term care facility:** Monthly benefits for qualifying care in a long-term care facility.
- **Assisted living:** The plan pays the applicable assisted living benefit, generally 60% of the facility benefit or the applicable home care amount if greater.
- **Home and community care:** Total Home Care includes qualifying care at home or in another community setting and may be provided by a formal or informal caregiver.
- **Respite care:** Limited payments may be available to provide a short break for an informal caregiver.

Very brief claim overview

A claim may qualify when a covered individual certifies that, for at least 90 days, you either need substantial assistance with at least two Activities of Daily Living or require substantial supervision because of severe cognitive impairment. Activities of Daily Living are bathing, dressing, toileting, transferring, continence, and eating. Covered benefits begin only after all policy requirements are met, including the 90 consecutive day elimination period, which is satisfied once during the life of the coverage.

Plan feature	Current plan design
Facility benefit	\$3,000 to \$8,000 per month, in \$1,000 increments
Benefit duration	5 years
Assisted living	60% of the facility benefit, subject to plan terms
Total Home Care	50% of the facility benefit
Inflation protection	5% simple, uncapped

Enrollment status and coverage changes

The plan is closed to new enrollment. Current enrollees may request to increase, decrease, or terminate their existing coverage.

If you increase coverage: You must complete a new Benefit Election Form and Evidence of Insurability Application. Approval is subject to medical underwriting and the terms of the policy. Evidence of Insurability generally requires answers to medical questions, and an interview may also be required. To request a Benefit Election Form and the Evidence of Insurability Form, an email can be sent to GLTCISSUE@unum.com. Please be sure to provide the policy number and email address or mailing address for where the forms should be sent. Once you have completed your forms, you can fax to 207-541-7606, email to GLTCTASK@unum.com (note: email option is unsecure), or mail to:

Unum Life Insurance Company of America
LTC Department
2211 Congress Street
Portland, Maine 04122

If you decrease coverage: Submit the required change request form to the plan administrator. A decrease does not add benefits and may reduce the amount available for a future claim. Confirm the effective date and revised premium before making a change.

If you would like to terminate coverage: Submit the required change request form to the plan administrator or you may email GLTCTASK@unum.com and include your name, Social Security Number and requested termination date.

Important reminders

- The policy is guaranteed renewable if required premiums are paid, but Unum may change premiums on a class basis.
- If group coverage ends for an eligible reason, converted direct-billed coverage may be available if elected within 31 days.
- Benefits are subject to the policy's definitions, exclusions, limitations, lifetime maximum, and elimination period.
- The plan may not cover every expense associated with long-term care.

Filing a claim

Either the insured or their Power of Attorney can call into the LTC claims area at 1-800-693-4988 and the claims specialist will complete the form over the phone.

Questions or to request a Change Request Form

Contact Unum at **1-800-227-4165** or contact your plan administrator for forms, premium information, and effective dates.

Source: Unum Life Insurance Company of America, Long Term Care Insurance Outline of Coverage for the Employees of Mid-Atlantic Permanente Medical Group P.C., Group Master Policy/Certificate Form Number 088575, and Mid-Atlantic Permanente Medical Group P.C. Plan Highlights / Schedule of Benefits.

This brochure is a summary only and is not the insurance contract. The group policy and certificate govern. Review your certificate carefully before changing coverage.