

Underwritten by

**Continental Life Insurance Company
of Brentwood, Tennessee**

An Aetna Company

aetna[®]

Protection SeriesSM — **Recovery Care Insurance Plans**

Security solutions.
For peace of mind
protection.



Idaho

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Our commitment

Continental Life Insurance Company of Brentwood, Tennessee, an Aetna Company headquartered in the Nashville, Tennessee area, has an unwavering commitment to providing the best personal service possible, quick claims payment, quality products with solid financial backing, and helpful, friendly associates with extensive knowledge and experience. For over 30 years, policyholders have relied on our company to be there when they need us. We take those obligations very serious and everything we do is focused on fulfilling our commitments in a timely, hassle-free manner – so you can have the best experience possible. For more information, go to www.aetnaseniorproducts.com.

Notice to buyer:

- This is not a Medicare Supplement policy.
- This is not a Major Medical policy.
- This is not a Long Term Care policy.
- This policy may not cover all of your medical or health care expenses.
- This policy should not be purchased as a substitute for Medicare or Medicare related health plans.
- This is a supplement to health insurance and is not a substitute for major medical coverage. Lack of major medical coverage (or other minimum essential coverage) may result in an additional payment with your taxes.

This brochure is an illustration for policy form CLIREC14 ID and is not a contract of insurance. For complete details of all provisions or benefits, please read your policy carefully.

Because you care about your care

You can plan now for the level of care and comfort you deserve in case of an accident or illness that requires assistance and care during recovery.

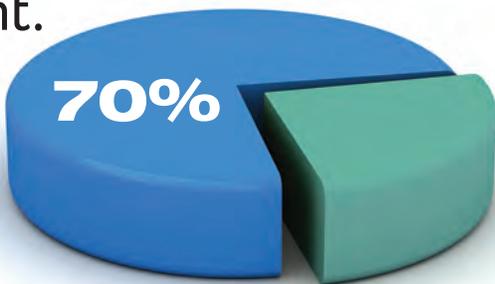


Expecting the unexpected

Whether you are working or retired, it's important to consider the cost of health care and how an unexpected accident or illness could impact you and your family's finances.

Health care is constantly changing and the costs are increasing. Hospital confinement is expensive, sometimes resulting in shorter hospital stays followed by costly rehabilitation and therapy.

At least **70%** of people over 65 will need long-term care services and support at some point.



Long-term care services and support refers to an individual receiving assistance with Activities of Daily Living (ADLs) such as bathing, continence, dressing, eating, toileting, and walking.

Source: Medicare and You 2015, page 63, Long Term Care Services and Support, page 147, Center for Medicare and Medicaid Services, <https://www.medicare.gov/Pubs/pdf/10050.pdf>

Even those who lead a healthy lifestyle may be at risk of experiencing an unexpected need for recovery care due to the onset of health issues and disabilities.

The U.S. government estimates that the **average cost of nursing facility care is approximately \$72,000 per year.**



Source: SeniorHomes.com, Paying for Nursing Home Care, Nursing Home Cost, July 2015.

Freedom to choose

Who would choose the nursing facility, hospital, or home care provider for your recovery and care?

You would. Just the thought of not being in our own surroundings and in control of our lifestyle is uncomfortable. But, an accident or illness may leave you with no other choice for recovery and care.

A Recovery Care insurance plan gives you the freedom to choose how you want to recover and where. You choose the nursing facility or the hospital or the provider (based on the plan options selected).

Our solutions for protection. Your choice.

Benefits are paid directly to you, or a medical provider that you designate, and are paid in addition to any other health care coverage. The benefits and premiums for this plan will vary based on the plan options selected.

Plan benefits



Daily Nursing Facility* Including Assisted Living and Bed Reservation

The benefit is available:

- up to \$300 daily maximum
- with choice of covered days: 90, 180, or 270 days
- with no waiting period
- issue ages 50-89 (age at last birthday)

***At least one unit (\$10 per day) of the daily nursing facility benefit and four units (\$40 per day) of the daily hospital benefit must be purchased.**

This coverage will pay a daily benefit for confinement in a nursing or assisted living facility, provided you cannot perform two or more Activities of Daily Living (ADLs) or you have a cognitive impairment. No prior hospital stay is required.

The bed reservation coverage will pay up to a maximum benefit of 10 days if you return to the facility where you resided prior to your hospital confinement. The covered lifetime maximum is 20 days.



Daily Hospital Indemnity*

The benefit is available:

- up to \$300 daily maximum (for each day of confinement)
- with 31 days per period of care
- with a lifetime maximum of 365 days
- issue ages 50-89 (age at last birthday)

***At least one unit (\$10 per day) of the daily nursing facility benefit and four units (\$40 per day) of the daily hospital benefit must be purchased.**

This coverage will pay a daily hospital benefit if you are confined in a hospital, including observation stays in a hospital.



Home Care Rider (optional)

The benefit is available:

- up to \$1200 weekly maximum
- with choice of covered weeks: 13, 26, or 39 weeks
- issue ages 50-89 (age at last birthday)

This rider pays a benefit for each week you receive three or more professional home care service visits of at least one hour per visit in your home, provided you cannot perform two or more ADLs or you have cognitive impairment.

More to consider

It's important to know and understand your health insurance coverage before you have to use it. And, we can help. Here's a simple look at the importance of our Recovery Care insurance plans.

An unexpected accident or illness	Medicare Coverage*	Recovery Care Coverage
<p>You are confined to a nursing facility and cannot perform two or more ADLs or you have a cognitive impairment.</p>	<p>Medicare pays the first 20 days of skilled care only if you are admitted as an inpatient for at least three days. It will not pay for intermediate or custodial nursing care.</p>	<p>The Daily Nursing Facility coverage will pay benefits for all levels of nursing facility care – skilled, intermediate, and custodial care.</p>
<p>You are confined to an assisted living facility and cannot perform two or more ADLs or you have a cognitive impairment.</p>	<p>Medicare does not pay for any costs or services.</p>	<p>The Daily Nursing Facility coverage will pay benefits for services in an assisted living facility.</p>
<p>You need home care services and cannot perform two or more ADLs or you have a cognitive impairment.</p>	<p>Medicare pays for eligible home care services like intermittent skilled nursing with doctor's orders. It will not pay for 24 hours/day care at home.</p>	<p>The optional Home Care rider will pay a weekly benefit for home care.</p>

*Source: <https://www.medicare.gov/coverage/home-health-services.html>



Recovery Care Insurance Plans

▼ Payment modes

Annual.....	Annual x 1
Semi-annual.....	Annual x .52
Quarterly.....	Annual x .265
Monthly.....	Annual x .08333

▼ Guaranteed renewable

You have the right to renew your policy for consecutive terms by paying the required premium before the end of each grace period. Subject to the Policy and Coverage Termination provisions detailed in the policy.

▼ 30-day free look

Return any policy for any reason within 30 days after receipt for a full refund of all premiums paid.

▼ Payment options

You have a choice among several payment options or modes for paying your premium – annual, semi-annual, quarterly, and monthly bank draft. Each payment mode, other than annual and monthly bank draft, results in higher total yearly premium costs. Reasons for higher costs include added collection and administrative costs, time value of money considerations, and lapse rates.

The annual and monthly bank draft modes have the same total yearly premium costs. As a result, there is a time value of money advantage to you for paying monthly versus annually. However, there may be other advantages to you for choosing an annual payment based on your preferences. Your agent can explain the differences in modes and help you decide which is best for you. You have the right to change your payment mode, among the modes available, during the life of your policy.

Definitions

▼ Activities of daily living (ADL)

Bathing, continence, dressing, eating, toileting, and transferring are all activities of daily living.

▼ Assisted living facility

A place which is a separate facility or distinct part of a health care facility, which is licensed by the state. It provides continuous room and board, assistance with daily living activities, has at least one trained staff member actively on duty in the facility to provide supervision and care, has formal arrangements with a physician or nurse to furnish medical care, and has appropriate methods to assist in handling and administering medications.

▼ Cognitive impairment

The deterioration or loss of intellectual or mental capacity, as determined by clinical evidence and standardized tests, resulting in the insured's need for the continual assistance of, or supervision by, another person, including supervision and assistance that is necessary to protect the health and safety of the insured or others.

▼ Confined/confinement

The insured is formally admitted to a nursing facility, assisted living facility, or a hospital on an inpatient basis or receives necessary and continuous observation in a hospital for at least 24 hours.

▼ Home care services

The professional, personal care, and homemaker services

the insured receives from a home care provider in the insured's home, including nursing care, physical therapy, occupational therapy, speech therapy, nutritionist services, meal preparation, laundry, light housekeeping, shopping for food, medications or medical supplies, and transportation to and from appointments.

▼ Nursing facility

A place which is a separate facility or distinct part of a health care facility which is licensed as a nursing home and provides continuous accommodations to persons who require daily nursing care services, and maintains records of each resident.

▼ Period of care (hospital benefit)

The period of time that begins with the first day of hospital confinement due to a covered illness or injury. It ends when the insured is out of the hospital and does not require medical care for 60 continuous days.

▼ Period of care (nursing facility benefit)

The period of time that begins with the first day of nursing facility or assisted living facility confinement. It ends following a period of 180 days during all of which the insured is not confined to a nursing facility or assisted living facility, is able to perform five or more ADLs without the hands-on assistance of another person, and if the insured is cognitively impaired, the insured did not require or receive the assistance or supervision of another person.

Limitations and exclusions

We will not pay for losses caused by or resulting from:

1. Pre-Existing conditions or diseases;
2. Mental or or emotional disorders, alcoholism and drug addiction
3. Pregnancy, except for complications of pregnancy;
4. Illness, treatment or medical condition arising out of:
 - a. War or act of war (whether declared or undeclared); participation in a felony, riot or insurrections; service in the armed forces or units auxiliary to it;
 - b. Suicide (sane or insane), attempted suicide or intentionally self-inflicted injury;
 - c. Aviation;
 - d. With respect to short-term nonrenewable policies, interscholastic sports; and
 - e. With respect to disability income protection policies, incarceration;
5. Cosmetic surgery, except that “cosmetic surgery” shall not include reconstructive surgery when the service is incidental to or follows surgery resulting from trauma, infection or other diseases of the involved part, and reconstructive surgery because of congenital disease or anomaly of a covered dependent child;
6. Foot care in connection with corns, calluses, flat feet, fallen arches, weak feet, chronic foot strain or symptomatic complaints of the feet;
7. Care in connection with the detection and correction by manual or mechanical means of structural imbalance, distortion, or subluxation in the human body for purposes of removing nerve interference and the effects of it, where the interference is the result of or related to distortion, misalignment or subluxation of, or in the vertebral column;
8. Benefits provided under Medicare or other governmental program (except Medicaid), a state or federal worker’s compensation law, employers liability or occupational disease law, or motor vehicle no-fault law; services performed by a member of the insured person’s immediate family; and services for which no charge is normally made in the absence of insurance;
9. Dental care or treatment;
10. Eye glasses, hearing aids, and examination for the prescription, or fitting of them;
11. Rest cures, custodial care, transportation, and routine physical examinations; and
12. Medical treatment, services and supplies received outside of the United States

Pre-existing condition

Pre-existing condition means (a) a condition that would have caused an ordinarily prudent person to seek medical advice, diagnosis, care, or treatment during the six (6) months immediately preceding the effective date of coverage; or (b) a condition for which medical advice, diagnosis, care or treatment was recommended or received during the six (6) months immediately preceding the effective date of coverage. Pre-existing conditions are not covered unless the loss begins more than six (6) months after the coverage effective date.

[Reference the policy for complete details.](#)

About Aetna

Aetna is one of the nation's leading diversified health care benefits companies, serving an estimated 44 million people with information and resources to help them make better informed decisions about their health care. Aetna offers a broad range of traditional, voluntary and consumer-directed health insurance products and related services, including medical, pharmacy, dental, behavioral health, group life and disability plans, and medical management capabilities, Medicaid health care management services, workers' compensation administrative services and health information technology products and services. Aetna's customers include employer groups, individuals, college students, part-time and hourly workers, health plans, health care providers, governmental units, government-sponsored plans, labor groups and expatriates. For more information, see www.aetna.com.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Continental Life Insurance Company of Brentwood, Tennessee, and its affiliates (Aetna).



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