

Highlights of Your Plan

Independent Solutions®

The Amount of Insurance You Can Purchase

When you enroll in the Independent Solutions® plan, you can choose one of several benefit levels. This table shows the options available to you. Other benefit levels and features of the University of Texas System Group Long-Term Care Insurance plan are described in greater detail below.

Benefits Levels Available to You

	Option 1	Option 2	Option 3	Option 4	Option 5
Daily Facility Care Benefit	\$100	\$125	\$150	\$200	\$250
Daily Home Based Care Benefit	\$50	\$63	\$75	\$100	\$125
Lifetime Maximum Benefit	\$109,500	\$136,875	164,250	\$219,000	\$273,750

Inflation Protection: There are two choices for inflation protection available for all options. See details in the Plan Features section below.

Choice #1: Guaranteed Benefit Increase Option (Standard Inflation Protection)

Choice #2: Automatic Benefit Increase Option (Optional Inflation Protection)

Who is Eligible for the Plan

- Employees – employees who are actively at work on the day coverage takes effect
- Spouses of employees
- Adult children of employees who are over the age of 25
- Parents, parents-in-law, grandparents, grandparents-in-law
- Retirees and their spouses

Standard Plan Features

Lifetime Maximum Benefit – Your Lifetime Maximum Benefit is the total amount of insurance you purchase. It is the total available pool of money you can use to pay for long-term care services.

Daily Facility Care Benefit – Pays the actual cost of services you receive, up to the amount shown in the table above, for care in the following facilities:

- Nursing Homes
- Assisted Living Facilities
- Hospice Facilities

Daily Home Based Care Benefit – Pays the actual cost of services you receive, up to the amount shown in the table, for care in the following settings:

- Your own home
- Adult Day Care facility

Alternate Plan of Care – The Alternate Plan of Care benefit allows CNA to consider emerging or non-traditional long-term care services not specifically covered under the policy, as long as the benefits provided are based on a written Alternate Plan of Care which is agreed to and approved by the insured individual, the insured's physician and CNA. Benefits are paid at levels specified in the Alternate Plan of Care and will not exceed an individual's daily facility care maximum.



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Bed Reservation – The Bed Reservation benefit pays up to the Daily Facility Care Benefit, 60 days per year, to hold your place in a nursing home or other facility if you need to be away temporarily.

Caregiver Training – The Caregiver Training benefit pays up to three times your Daily Home Based Care Benefit to train an informal caregiver or an independent provider to care for you in your residence. It also pays for training required to license or certify an independent provider, if required. You do not need to satisfy the waiting period to receive this benefit.

Contingent Nonforfeiture – If your premiums increase, this feature will automatically provide you with options to maintain your premium level and still have coverage. See the Outline of Coverage for details.

Future Benefit Guarantee (Nonforfeiture) – There may come a time when you either cannot, or no longer want to, continue paying premiums. If you stop paying premiums after having coverage for at least three years, the Future Benefit Guarantee keeps your daily benefits the same but reduces your lifetime maximum benefit. Your reduced lifetime maximum benefit equals the total premiums paid or 30 times the Daily Facility Care Benefit, whichever is higher, less any benefits paid.

Home Medical Technology – The Home Medical Technology benefit pays up to \$1,000 each year for assistive devices, medical monitoring or communications technology, medication compliance equipment, and emergency response systems used in your residence. It also covers home modifications necessary to accommodate this kind of equipment or as needed to allow you to remain at home. The Alternate Plan of Care feature may supplement this benefit.

Inflation Protection Options:

Choice #1 - Guaranteed Benefit Increase – Every three years, CNA will offer you the chance to increase your benefits to help you keep up with inflation. Premiums for increased coverage will be based on your age on the effective date of the offer, and will be at least equal to a compound 5% rate of increase. Actively-at-work employees and their spouses are guaranteed acceptance regardless of whether a previous offer was rejected. All others are guaranteed acceptance as long as they continue to accept offers.

Choice #2 - Lifetime Compound Automatic Benefit Increase – This feature automatically increases your benefits by 5% compounded each year without increasing your premiums. Increases continue, even while on claim, unless premium payments stop for any reason except waiver of premium.

Respite Care – Respite Care is the temporary use of paid long-term care services to relieve family members and other “informal” caregivers of their duties so they can take needed time off. The Respite Care benefit pays up to either the Daily Facility Care Benefit or Daily Home Based Care Benefit, up to 14 days per year, depending on where benefits are used. You do not need to satisfy the waiting period to receive this benefit.

Waiting Period – You will need to satisfy a 90 calendar day waiting period before benefits can be paid. You must only satisfy this waiting period once in your lifetime. You do not need to incur any paid services during this time.

Waiver of Premium – After you satisfy the waiting period, your premiums will be waived while you are receiving benefits.



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World Wide Coverage – If you are living or traveling outside the United States and become eligible to receive benefits, reimbursement will be based on a cash payment equal to the Home Based Care Maximum, but not more than 50% of the Facility Care Maximum Benefit. Any caregiver may provide services. To receive benefits, a Licensed Health Care Practitioner (as defined by that particular country) must certify that you are chronically ill and have a plan of care. Your benefits will be paid in United States currency.

Other Important Elements of Your Plan

Qualifying for Benefits – You qualify to receive benefits when a licensed healthcare practitioner has certified that either of the following conditions exists and is likely to last more than 90 days:

1. You are unable to perform two of the following six activities of daily living (ADLs): Bathing, dressing, eating, maintaining continence, transferring, and toileting.

OR

2. You have a cognitive impairment (confusion, memory or orientation problems, lack of reasoning or judgement) that causes safety concerns for you or another person.

Exclusions – Long-term care insurance protects against catastrophic losses. Exclusions help keep the cost of the plan affordable. Your plan will not pay benefits for the following:

- 1) Long-term care that results from war.
- 2) Long-term care normally provided without charge.
- 3) Care in a facility that primarily treats substance abuse or mental illness.

Coordination of Benefits – This means you will not receive double payments for the same long-term care services under more than one program (i.e.: Group Health plan or Medicare). Your long-term care plan may work together with other plans so that each pays for part of your care, or the long-term care plan may cover services excluded by other programs.

