

# Long Term Care

## At a Glance

For advisor use only.

Long Term Care Designed to cover the cost of health or personal care services resulting from an insured's inability to care for himself/herself, due to a condition requiring care in the home or use of a long-term care facility.

<b>Issue Ages</b>	Facility Care: 30-80 Home Care: 30-75 Return of Premium Benefit: 30-80; Cost of Living Adjustment: 30-80 Future Purchase Option Benefit: 30-60
<b>Policy Fee</b>	\$60 annually Benefit Periods Facility Care: One Year, Two Years, Five Years, Lifetime Home Care: 365 Days, 730 Days, 1825 days, Lifetime The Home Care Benefit Period cannot be longer than the Facility Care Benefit Period. Therefore, if the one year benefit period is selected for Facility Care, the Home Care period must be 365 days.
<b>Daily Benefits</b>	The Daily Benefit is the maximum amount payable per day when the insured qualifies to receive the benefits of the Long Term Care contract. Separate daily benefits may be selected for Facility Care and Home Care, however the Home Care Daily Benefit cannot exceed the Facility Care Daily Benefit. Available in units of \$10 per day (\$10, \$20, \$30 etc.) to maximum of \$300.
<b>Facility Care Benefit</b>	All RBC Insurance Long Term Care policies provide a Facility Care Benefit, payable when health or personal care services are required on a long-term basis in a long-term care facility. This could be the result of the inability to perform two or more activities of daily living or on the basis of cognitive impairment. See specimen contract for further details. Facility Care Benefit can be purchased on its own without the addition of Home Care, Return of Premium, or other benefits. The benefit will be paid directly to the insured and will be paid in addition to any government benefits that the insured may be receiving. If two people, living under the same roof, both purchase coverage at the same time, they will receive a 10% reduction in the total annual premium (including the policy fee and any other benefits).
<b>Home Care Benefit</b>	The Home Care Benefit is an optional benefit that reimburses the cost of medically necessary services for the insured recommended by a physician and provided by a licensed nurse, authorized employee of a Health Care Agency or private caregiver. This could be the result of the inability to perform two or more activities of daily living, or on the basis of cognitive impairment. See the specimen contract for further details. The Home Care Daily Benefit may be equal to or less than the Facility Care Daily Benefit, but cannot exceed it. Home Care may not be purchased as a stand-alone plan, it must be added to a Facility Care Policy. Benefits will be paid directly to the insured. Receipts for services rendered must be submitted.

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<p><b>Cost of Living Adjustment Benefit</b></p>	<p>The Cost of Living Adjustment (COLA) Benefit is an optional benefit that keeps inflation from eroding the Long Term Care Benefit the Insured receives for either facility or home care. After the Insured has been receiving Long Term Care Benefits for 12 consecutive months, the daily benefit will be increased by the cost of living adjustment at the beginning of each successive 12 month period that benefits are paid. The cost of living adjustment will be based on the increase in the Consumer Price Index to a maximum of 4% per year. Each year's increase is based on the original daily benefit. The combined COLA increases cannot exceed 100% of the original daily benefit. If the Insured is no longer receiving benefits under the policy, the Policyowner has the option to increase the daily benefit amount to the last daily benefit amount for the cost of living adjustment. The premium for the increased coverage will be at attained age rates at the time this purchase is exercised. Any subsequent facility or home care benefits paid will reflect this new amount. See the specimen contract for further details.</p>
<p><b>Future Purchase Option Benefit</b></p>	<p>The Future Purchase Option (FPO) Benefit is an optional benefit that provides the right to the policyowner to buy additional home care or facility and home care coverage, up to the option amount chosen, at the option dates (the 5th and 10th policy anniversaries) without submitting medical evidence. When the option is exercised, the additional coverage will be added to the policy at the insured's attained age rates and premium payment period for the attained age. See the specimen contract for further details. Note: The FPO Benefit may be added to a Universal Life plan from RBC Insurance, without purchasing Long Term Care coverage. Long Term Care coverage may then be added at an option date.</p>
<p><b>Elimination period</b></p>	<p>Number of calendar days which must expire before benefits are payable. There are two choices: 1. 0-Day (Facility Care)/ 60-Day (Home Care) 2. 90-Day (Facility Care)/ 90-Day (Home Care)</p>



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