

GLOSSARY

Activities of Daily Living (ADLs) or daily functions	These activities include things like dressing, eating, toileting, transferring (moving in or out of a bed or chair), and continence. They are used as one method of determining eligibility for long-term care benefits.
Adult Day Care	A day care program for frail, impaired or disabled adults. It provides social and health-related services in a community setting.
Assisted Living Facility	A licensed facility that provides 24 hour services for people who are unable to perform certain activities of daily living, or who suffer from cognitive impairment. It is a facility with some of the resources of a nursing home (but in a more residential type of atmosphere).
Alternate Care	Care designed by or with a Licensed Health Care Practitioner for a specific plan of care, service or device that will meet the insured's need as an alternative to confinement in a facility.
Bed Reservation	Reservation of a place in a nursing care facility or assisted living facility when the insured needs to leave temporarily (for example the patient has to go to a hospital for a temporary inpatient stay).
Benefit Bank	A type of non-forfeiture feature that specifies the number of years an insured must pay into the plan before they would receive the long-term care benefit. Specifically, if the insured elects to stop paying premiums after contributing to the plan for at least three years, the plan will pay the greater of: 100% of the contributions paid; or one month of benefit.
Cognitive Impairment	A condition (such as Alzheimer's disease) that triggers eligibility for long-term care when there is a need for supervision or verbal cueing by another person to avoid <u>serious</u> injury to self or others.
Daily Benefit Amount	This is the <i>maximum</i> amount of coverage your plan will provide each day, once you become eligible for benefits. You select the amount that you want the policy to pay, as described in your plan summary.
Home Health Care	Care received at home such as part-time skilled nursing care, speech therapy, physical or occupational therapy, part-time services of home health aides or help from homemakers for assistance with housekeeping and chores.
Homemaker Services	Services such as assistance with meal preparation and light housekeeping.
Hospice Care	Care for the terminally ill given by (or arranged by) a Hospice Care Agency or Hospice Facility.
Lifetime Maximum Benefit	The maximum benefit payable under the plan in the aggregate during the lifetime of each insured.
Medicaid	The joint state and federal program that provides payment for health care services to those with lower incomes or with very high medical bills. It does provide benefits for custodial and home health care once income and assets have been "spent down" to eligibility levels.
Medical Questionnaire	A special evidence of insurability form designed for long-term care coverage.
Medicare	The federal program designed to provide those over age 65, some disabled persons and those with end-stage renal disease with help in paying for hospital and medical expenses. It does not provide benefits

	for long-term care.
Non-forfeiture	Plan value that builds up after paying into the plan over time. If premium payments are stopped, the individual receives additional coverage. This is <i>not</i> a cash value.
Nursing Facility	A licensed nursing home that provides skilled, intermediate, custodial or physical restoration care services, inpatient care services for persons convalescing from injury or disease.
Respite Care	Temporary short-term care for the sick or disabled, sometimes provided in a nursing care facility. It allows families to have a brief rest from caring for chronically ill or disabled relatives at home.
Restoration of Benefits	Restores the Lifetime Maximum by the amount of the benefit paid once an individual receiving benefits recovers and is no longer in claim status.
Transitional Care Benefits	One time <i>automatic</i> cash payment upon satisfying the benefit trigger. Benefit designed to aid claimant in meeting needs which arise during the transitional phase (from being self-sufficient to requiring assistance). For example, the coverage from this benefit may be used for the cost of a wheelchair.
Waiting Period	A period of days (sometimes called a deductible period) when no benefits will be paid. This waiting period begins on the date that Aetna determines a qualifying loss of functional capacity began.

