



EssentialLTC PRODUCT FEATURE AVAILABILITY (STATE VARIATION LISTING)

State	State Variation Details	Partnership	ER Group - Min. Issued EEs*	Enhancements**
AK		N/A	5	YES
AL		YES	3	YES
AR		YES	5	YES
AZ	Employer Group rate class (unisex) not available. 5% Employer Group premium discount is available on gender-specific pricing.	YES	5	NO
CA	Only one month's premium may be submitted with application. "Home and Community Based Services" known as "Home Care and Community Based Services." "Assisted Living Facility" known as "Residential Care Facility." Separate policy forms issued for Comprehensive and for Nursing Facility and Residential Care Facility Only insurance.	NO	3	NO
CO		YES	2	YES
CT	Waiver of Premium Rider not available, as it is included in Comprehensive policies where the 10-Year or Lifetime Premium Payment option is selected. Unique premium rates for Comprehensive coverage. 180 day Elimination Period not available.	NO	2	NO
DC		N/A	2	NO
DE		YES	3	NO
FL	Facility Care Services Only coverage, Single & 10-Year Premium Payment options, Step-Rated Compound Inflation Protection Rider, and Employer Group rate class (unisex) not available. Franchise policy for 5% Employer or Association Group premium discount on gender-specific pricing is available under a separate policy form. "Waiver of Premium Rider" is called "Home and Community Care Services Waiver of Premium Rider."	YES	2	NO
GA		YES	2	YES
HI		N/A	5	NO
IA		YES	2	YES
ID		YES	4	YES
IL		YES	2	YES
IN		NO	2	NO
KS		YES	3	YES
KY		YES	3	YES
LA		YES	2	YES

Monthly Modal premium factor is .0875 in all states

*Employer Group minimum participation is based on issued employees and is determined by the address provided for the employer.

**In the states marked "YES," premium will decrease at the death of one insured, the Waiver of Premium Rider is included if Comprehensive coverage is selected, the 10-Year Premium Payment Option is fully guaranteed, the only underwriting rate classes are "Premier" and "Employer Group," and the following items are not available: Step-Rated Compound Inflation Protection Rider, Full Return of Premium Rider, Full Return of Premium with Optional Policy Surrender Rider, and the 0-Day Elimination Period.

State	State Variation Details	Partnership	ER Group - Min. Issued EEs*	Enhancements**
MA		N/A	2	YES
MD		YES	3	YES
ME	Employer and Association Groups not available.	YES	N/A	YES
MI		YES	2	YES
MN		YES	2	YES
MO		YES	2	YES
MS		N/A	2	YES
MT	EssentialLTC not currently approved for sale in Montana.			
NC		YES	5	YES
ND	The Return of Premium Riders are called Death Benefit Riders.	YES	2	NO
NE		YES	5	YES
NH		YES	3	YES
NJ	Single Premium Payment option not available. Shortened Benefit Period Nonforfeiture Rider not available with 10-Year Premium Payment option. Second insured referred to as "Additional Insured" - no references should be made to "joint" coverage.	YES	2	NO
NM		YES	5	YES
NV		YES	2	YES
NY	EssentialLTC not currently approved for sale in New York.			
OH		YES	2	YES
OK		YES	5	YES
OR		YES	2	YES
PA		YES	5	YES
RI		YES	2	YES
SC		YES	3	YES
SD	Daily Benefit Amount minimum \$100, 180 day Elimination Period not available.	YES	3	NO
TN		YES	3	YES
TX		YES	2	YES
UT		N/A	2	YES
VA		YES	2	YES
VT	Daily Benefit Amount minimum \$80, 180 day Elimination Period not available.	N/A	2	YES
WA	No longer accepting Washington State applications with the exception of pre-approved executive carve out applications for a 10-Year Premium Payment Option and a \$6,000 annual 10-year premium minimum.	YES	5	YES
WI	Daily Benefit Amount minimum \$60.	YES	2	YES
WV		YES	5	YES
WY		YES	4	YES

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