

Kentucky Department of Insurance
Disclosures and Language for Long-term Care Policies and Certificates
HIPMC-LTC-10

Waiver statement for purposes of section 4(1)(a)5:

Protection against unintended lapse. I understand that I have the right to designate at least one (1) person other than myself to receive notice of lapse or termination of this long-term care insurance policy for nonpayment of premium. I understand that notice will not be given until thirty (30) days after a premium is due and unpaid. I elect NOT to designate a person to receive this notice.

Disclosure for purposes of section 8(3)(a):

Caution: If your answers on this application, are incorrect or untrue, [insurer name] has the right to deny benefits or rescind your policy.

Disclosure for purposes of section 8(3)(b):

Caution: The issuance of this long-term care insurance [policy] [certificate] is based upon your responses to the questions on your application. A copy of your [application] [enrollment form] [is enclosed] [was retained by you when you applied]. If your answers are incorrect or untrue, the insurer has the right to deny benefits or rescind your policy. The best time to clear up any questions is now, before a claim arises! If, for any reason, any of your answers are incorrect, contact the insurer at this address: [insert address].

Inflation Protection Rejection language for purposes of section 10(7)(b):

I have reviewed the outline of coverage and the graphs that compare the benefits and premiums of this policy with and without inflation protection. Specifically, I have reviewed Plans _____, and I reject inflation protection.

Notice for purposes of section 20(1)(b):

Notice to buyer: This policy may not cover all of the costs associated with long-term care incurred by the buyer during the period of coverage. The buyer is advised to review carefully all policy limitations.