

*John Hancock*

LIFE INSURANCE

TECHNICAL GUIDE

PROTECTION

## **LONG-TERM CARE RIDER**

*An Accelerated Death Benefit Rider*

Protection when you need it most

FOR AGENT USE ONLY. NOT FOR USE WITH THE PUBLIC.

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## Product Overview

### Accelerating the Policy Death Benefit for Long-Term Care Expenses

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When added to a permanent John Hancock life insurance policy, the Long-Term Care (LTC) rider<sup>1</sup> allows for a monthly acceleration of the policy's death benefit to help pay qualified long-term care expenses. The acceleration of the death benefit may continue until the LTC amount is fully exhausted.

|  |  |
|--|--|
| <b>Full Acceleration</b>                   | If the insured requires long-term care services (as defined in the contract) at any point while the policy and LTC rider are both in force, the rider will accelerate the death benefit up to a monthly maximum that is set at the time of policy issue. The full LTC amount may be accelerated (over time) if required. |
| <b>Partially Accelerated Death Benefit</b> | If rider claims cease after only a portion of the policy LTC amount is accelerated under the rider and the policy is still in force, the remaining amount is paid to the beneficiaries as a death benefit.   |
| <b>No Death Benefit Accelerated</b>        | If the insured never requires long-term care and the policy remains in force, the full death benefit is paid to the beneficiaries at time of death.  |

### Purchasing Life Insurance with the LTC Rider vs. Buying a Separate Long-Term Care Policy

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Permanent life insurance with the LTC rider is an innovative and appropriate solution in many situations. However, there are issues clients should consider when deciding if the LTC rider is right for them. The first is whether they have a need for *both* life and long-term care insurance. If there is no life insurance need, clients should consider a standalone long-term care policy. If clients need both types of coverage, adding the LTC rider to a permanent life insurance policy can be less expensive than purchasing separate policies.

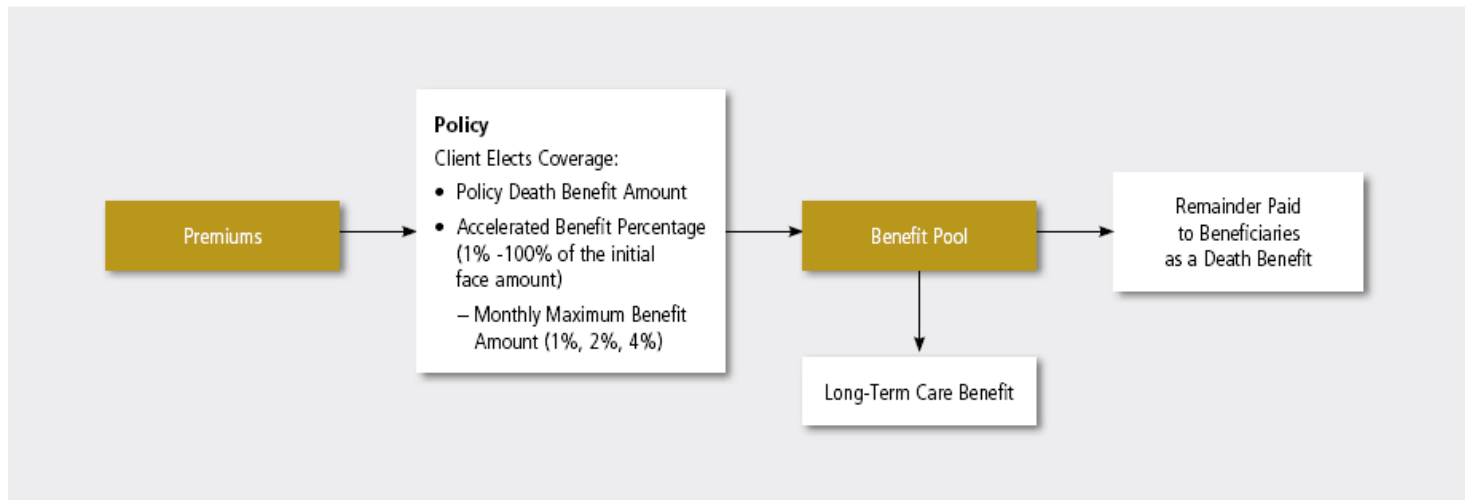
Clients should also consider the following:

- Is there a need for separate pools of money for life insurance and long-term care? Now your clients can specify the exact amount of LTC coverage needed (from 1%-100% of the initial face amount) — helping to balance LTC and estate planning
- The LTC rider may not be appropriate if the policy is owned by a business or trust. (See the section on Third-Party Ownership, page 11.)
- Permanent life insurance policies with the LTC rider provide many of the core benefits that separate long-term care insurance policies offer. However, John Hancock's standalone long-term care products offer many additional riders including: Shared Care and a Waiver of Home Health Care Elimination Period. As you evaluate your clients' needs, you should consider whether your clients would benefit from some of the customized features available only on a standalone LTC policy.
- The LTC rider does not offer an inflation option. The timing and amount of the death benefit increases will affect the amount of policy value and other non-guaranteed factors.
- The LTC rider does not qualify for the Long-Term Care Partnership Program.

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<sup>1</sup> The Long-Term Care (LTC) rider is an accelerated death benefit rider and may not be considered long-term care insurance in some states. There are additional costs associated with this rider. The Maximum Monthly Benefit Amount is \$50,000. When the death benefit is accelerated for long-term care expenses it is reduced dollar for dollar, and the cash value is reduced proportionately. Please go to [www.jhsalesnet.com](http://www.jhsalesnet.com) to verify state availability. This rider has exclusions and limitations, reductions of benefits, and terms under which the rider may be continued in force or discontinued. Consult the state specific Outline of Coverage for additional details.

## How the Long-Term Care Rider Works



### Policyholder Elections

At issue, the policy owner selects a desired life insurance Face Amount, an Accelerated Benefit Percentage (from 1% to 100% of the Face Amount) and the LTC rider Monthly Acceleration Percentage (MAP) — either 1%, 2% or 4%. The MAP percentage determines the Maximum Monthly Benefit Amount which is available each month to pay covered long-term care expenses (on a reimbursement basis).

To determine the appropriate benefit percentage, consider both the benefit amount desired and the length of time that benefit might be needed. The higher the MAP, the greater the amount that is available each month to cover long-term care expenses. However, assuming that the maximum amount is actually used each month, a higher MAP will also shorten the minimum period before the benefit is exhausted. If less than the maximum benefit is used in any month, the remainder will extend the rider benefit period. The MAP cannot be changed after issue.

### Benefit Amount

The policy owner selects the Accelerated Benefit Percentage (long term care specified amount) at issue; ranging from as much as 100% of the policy's initial death benefit amount to as little as 1%. This benefit is available as either life coverage, long-term care coverage — or some combination of the two. Any unused portion of the LTC rider benefit remains with the policy as a death benefit.

### Benefit Flexibility

The policyholder can accelerate some, all, or none of the LTC rider amount to help pay for qualified long-term care costs.

### Benefit Assurance

The portion of the LTC benefit amount not used for long-term care purposes is paid to the beneficiaries as a death benefit (income tax free under current tax law)<sup>2</sup>, unless the Extension of Benefits provision of the rider is in effect. In that case, any remaining death benefit will not be paid. (See the Extension of Benefits Provision section on page 6 for more information).

<sup>2</sup> Life insurance death benefit proceeds are generally excludable from the beneficiary's gross income for income tax purposes. There are few exceptions such as when a life insurance policy has been transferred for valuable consideration. Comments on taxation are based on John Hancock's understanding of current tax law, which is subject to change. No legal, tax or accounting advice can be given by John Hancock, its agents, employees or registered representatives. Prospective purchasers should consult their professional tax advisor for details.

**Example 1 – \$500,000 Policy Face Amount with a 2% Monthly Acceleration Percentage & 100% Accelerated Benefit Percentage:**

A client purchasing a \$500,000 policy with a 2% Monthly Acceleration Percentage would have a Maximum Monthly Benefit of \$10,000 available to help pay long-term care expenses (see the row labeled “2%” in the table below). The \$10,000 benefit would continue for 50 months (the Minimum Benefit Period) if the policy owner used the full rider benefit every month.

- If the long-term care expenses were *less than* \$10,000 per month, the Benefit payments could continue until the entire benefit was exhausted.
- If the insured dies before all of the LTC benefits are used, the remainder is payable to the beneficiaries as a death benefit.

**Monthly Benefit Options**

The table below illustrates Monthly Benefit Options for a \$500,000 LTC Benefit Amount Policy:

| Maximum Monthly Benefit<br>(Assuming a \$500,000 LTC Benefit Amount) |          | Minimum Long-Term Care Rider<br>Period |
|--|----------|--|
| Percentage   | Amount   | Months                                 |
| 1%   | \$5,000  | 100                                    |
| 2%   | \$10,000 | 50                                     |
| 4%   | \$20,000 | 25                                     |

**Long-Term Care Rider Issue Limits**

The LTC rider is available:

- On all John Hancock permanent single life insurance policies
- Only at issue
- To issue ages 20-75 (policies cannot be backdated to save age 75)

There is no minimum policy Face Amount other than the Minimum Face Amount of the underlying base policy. Some state variations apply.

- The maximum policy Face Amount varies based on the Monthly Acceleration Percentage and Accelerated Benefit Percentage selected; for policies with a 1% MAP, the maximum LTC amount is \$5,000,000; with a 2% MAP, the maximum LTC amount is \$2,500,000; and with a 4% MAP, the maximum LTC amount is \$1,250,000 (see the table that follows).
- In no event may the LTC Amount be greater than \$5,000,000 at issue.
- The LTC rider is not available on policies with the Return of Premium (ROP) rider or Scheduled Supplemental Face Amount (SFA) Increases.

## LTC Face Amount Table

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The Maximum Accelerated Benefit Amount varies by the Monthly Acceleration Percentage selected.

| MONTHLY ACCELERATION PERCENTAGE (MAP) SELECTED | MAXIMUM ACCELERATED BENEFIT AMOUNT AT ISSUE | MAXIMUM MONTHLY (LTC) BENEFIT AMOUNT |
|--|---|--------------------------------------|
| 1%   | \$5,000,000                                 | \$50,000                             |
| 2%   | \$2,500,000                                 | \$50,000                             |
| 4%   | \$1,250,000                                 | \$50,000                             |

Note that in no event may the Accelerated Benefit Amount be greater than \$5,000,000.

## Long-Term Care Rider Features

|                                |   |
|--------------------------------|---|
| <b>Eligibility for Payment</b> | <p>The insured becomes eligible to receive Accelerated Benefits under the Long-Term Care rider if he or she becomes unable to perform 2 of the 6 ADL's without substantial assistance or is found to have to have a severe Cognitive Impairment that threatens their health or safety. The six ADLs are:</p> <ul style="list-style-type: none"> <li>• Bathing</li> <li>• Eating</li> <li>• Contenance</li> <li>• Toileting</li> <li>• Dressing</li> <li>• Transferring.</li> </ul>  |
| <b>Elimination Period</b>      | <p>The LTC rider provides long-term care benefits after the satisfaction of an elimination (waiting) period.</p> <ul style="list-style-type: none"> <li>• The elimination period begins on the first day that long-term care services are received; this period need only be satisfied once during the life of the policy.</li> <li>• The elimination period is generally 100 days; however, it may vary by state.</li> <li>• The 100 days do not have to be consecutive; each day of service counts toward the waiting period, regardless of any breaks in service.</li> </ul> |
| <b>Choice of Setting</b>       | <p>Clients may elect to receive long-term care assistance in their choice of setting:</p> <ul style="list-style-type: none"> <li>• Home Health Care</li> <li>• Assisted Living Facility</li> <li>• Adult Day Care Center</li> <li>• Nursing Home</li> <li>• Hospice Center</li> </ul> <p>Note that there are exclusions and limitations outlined in the rider contract, including that all covered long-term services must be provided within the United States.</p>  |
| <b>Bed Hold Benefit</b>        | <p>If the insured's stay in a Nursing Home or Assisted Living Facility is interrupted, the Accelerated Benefit can pay the cost of reserving a bed in the facility for up to 21 days per policy year, up to the selected monthly benefit. The number of days may vary by state.</p>   |

## Monthly Benefits

The Long-Term Care rider pays benefits on a monthly basis. This is a significant advantage over daily benefit plans, particularly with home health care. The Monthly Benefit Plan pays all approved charges each month, up to the selected benefit maximum, regardless of the daily or weekly charges..

## Extension of Benefits Provision<sup>3</sup>

If the rider terminates while the insured is confined to a Nursing Home, and receiving continuous, uninterrupted benefits under this rider, then the Extension of Benefits Provision guarantees that benefits for the Nursing Home services will continue during the lifetime of the insured until the earliest occurrence of the following:

- The date that the insured is discharged from the Nursing Home
- The date when the Accelerated Benefit Amount remaining after any monthly benefit payment is zero (i.e., the benefit is fully accelerated)
- The insured dies
- The insured no longer qualifies as chronically ill

If benefits are continued under the Extension of Benefits Provision, then the Accelerated Benefit Amount remaining (referred to above) is calculated as if the policy had remained in force, but no Insurance Benefit will be paid to the beneficiary upon death.

Note: Clients who are on claim and who are concerned about forfeiting their policy's death benefit under this provision should be advised to make premium payments that are sufficient to maintain the policy's death benefit guarantee (for guaranteed death benefit policies), or to keep a positive surrender value (non-guaranteed policies) to prevent policy lapse. Premium payments must continue during the claim period for the guarantee to remain in effect and for any remaining death benefit to be paid.

## Rider Termination

The rider will terminate, and no further benefits will be paid (except as provided in the Extension of Benefits Provision) on the earliest of the date:

- Of exchange or termination of the policy;
- The rider is discontinued on request;
- When the Accelerated Benefit amount remaining after any monthly benefit payment is zero;
- A request for an increase in either base face amount or supplemental face amount is approved, if applicable;
- A request for a change to policy Death Benefit Option 2 is approved; or
- The life insured dies.

Since neither premiums nor charges are waived during the claim period, it is strongly recommended that deviations from the initial illustration be closely monitored after issue to ensure that the policy does not lapse. Please note that meeting the funding requirements to maintain the death benefit guarantee ensures that the policy will not lapse – regardless of policy value performance or policy charges.

## Additional Features – Long-Term Care Information Services

Life insurance policies with the LTC rider currently include long-term care information services.

### *Seniorlink*<sup>4</sup>

The insured (and immediate family members) have immediate access to *Seniorlink* which provides professional and personalized advice on topics such as home care, assisted living, home maintenance and repair services, and legal services. *Seniorlink* offers

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<sup>3</sup> In **Maine** this provision also applies to Assisted Living Facilities and Home Health Care. In **New Jersey**, there is no restriction on the setting in which care is received. In **Pennsylvania** and **Texas**, this provision also applies to an Assisted Living Facility. In **New York**, this provision also applies to Home Health Care and to care received in a Qualified Nursing Home or Assisted Living Facility.

<sup>4</sup> *Seniorlink* is not affiliated with John Hancock Life Insurance Company (U.S.A.) and John Hancock Life Insurance Company of New York. Seniorlink is the current referral service provider for John Hancock and can be changed at any time.

complete resources and advice about care issues. Additional information is available regarding this service in a consumer flyer that may be obtained at [www.jhsalesnet.com](http://www.jhsalesnet.com).

## Underwriting

One benefit of purchasing a permanent life insurance policy with the LTC rider is that only one underwriting process is needed. All applications are received, reviewed, and approved by life underwriters.

- The same underwriting process is used for all single life insurance policies, whether the LTC rider is elected or not; however additional underwriting guidelines are applied for the LTC rider.
- Application Supplement – LTC rider NB5018 must be completed and submitted with the application for life insurance.
- If necessary, an APS may be ordered for more information on a disabling – but not life threatening – disorder.
- Some proposed insureds who are standard or mildly substandard may not qualify for the LTC rider due to morbidity risk.
- If the underlying life insurance policy is rated higher than 175% or has a flat extra, the LTC rider will not be permitted.
- In some scenarios, the base life insurance risk class can be different than the LTC rider risk class. The LTC rider risk class can never be better than the base life insurance risk class.

## Rider Cost

For universal life or variable universal life policies, the LTC rider charge is based on an amount per \$1,000 of the Rider Net Amount at Risk. The rate is set at issue and is guaranteed not to increase over the life of the policy. *However, if the Net Amount at Risk changes, the rider charge will change.* The charge is part of the monthly deductions.

Note that for tax purposes, this charge will reduce the cost basis of the policy but will no longer be taxable. Please see “Effect of Long-Term Care Charges on Cost Basis” section for more details.

## Commissions

The Target Premium for universal life or variable universal life policies with the LTC rider is calculated taking into account the LTC rider charge.

## Long-Term Care Rider Claims

### How Claims are Calculated and Paid

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The Maximum Monthly Benefit Amount (MMBA) is based on the LTC benefit amount in effect at the time of claim. Each calendar month, benefit payments are made on a reimbursement basis for services received in the prior month. For universal life or variable universal life policies, a deduction for the policy charges continues while on claim.

Accelerated payments continue until the earliest occurrence of the following:

- The policy is terminated because of death, surrender, or lapse;
- The insured recovers and no longer requires long-term care; or
- The LTC Amount is completely accelerated under the terms of the rider.

As long as the insured remains on claim, a constant MMBA amount will always be available. It will not change while in claim status unless a withdrawal or face reduction is also taken. If the insured does not need the full MMBA each month; a lesser amount is payable. That is why payments are said to be on a “reimbursement” basis as opposed to an “indemnity” basis.



If the insured recovers (i.e., long-term care claim payments cease) and later files a new claim, the MMBA will not be recalculated at that time; it retains the same value unless a withdrawal, partial surrender, or face reduction also occurred. If a loan<sup>5</sup> is outstanding at the time of claim payment, a proportionate amount of the MMBA will be used to pay back a portion of the loan. The net amount (Monthly Benefit Payment minus the loan repayment) will be sent to the policy owner as the benefit payment for that month.

Note that a loan or withdrawal (partial surrender) may be taken from the policy value while on claim. However, the MMBA will be recalculated after a withdrawal (partial surrender) is taken.

## **John Hancock works directly with Providers**

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Policy owners may choose to have John Hancock pay all approved long-term care bills directly to the service provider(s). This relieves the individual, or any family members, from that task. John Hancock's Long-Term Care Claims Area is staffed with Registered Nurses and Social Workers; many of whom are from the Long-Term Care provider industry. These professionals do more than pay providers; they also:

- Establish professional relationships with claimants and/or their families and keep in touch on a regular basis.
- Provide the insured and family with copies of all long-term care activity and billings.
- Have a thorough understanding of the types of charges involved in long-term care, and the ability to work through some of the bureaucratic obstacles often involved.

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<sup>5</sup> Loans, withdrawals or partial surrenders will reduce the death benefit, policy value and cash value and may cause the policy to lapse. Lapse or surrender of a policy with a loan may cause the recognition of taxable income. Policies classified as modified endowment contracts may be subject to tax when a loan or withdrawal is made. A federal tax penalty of 10% may also apply if the loan or withdrawal is taken prior to age 59½. Cash value available for loans and withdrawals may be more or less than originally invested.

## Long-Term Care Claim Payment Mechanics

The LTC amount is equal to the policy Face Amount times the Accelerated Benefit Percentage. When the policy's life insurance benefit is accelerated for long-term care purposes, the insurance benefit is reduced dollar-for-dollar for each LTC payment made. The policy's Cash Value or Policy Value (and for UL-G policies – the Policy Protection Value) is reduced proportionally instead of dollar-for-dollar.

### Example 2 – Decreases at Time of Claim Payment

The following example shows the dollar-for-dollar and proportionate decreases in a hypothetical policy.

Assumptions:

- Total Face Amount – at time of claim = \$250,000
- Policy Value – at time of claim = \$50,000
- Maximum Monthly Acceleration Percentage (MMAP) = 2%
- Maximum Monthly Benefit Amount (MMBA) = 2% x \$250,000 = \$5,000

Assume that claims are submitted for the full reimbursable amount (the MMBA), \$5,000 in this example. Each month, the Total Face Amount will reduce by the benefit payment; and the Policy Value will reduce in proportion to the amount of the payment. Because of these decreases, the Net Amount at Risk also decreases.

|                                     | Month 1  | Month 2  |
|-------------------------------------|--|--|
| Total Face Amount (TFA) Calculation | \$250,000 - \$5,000 = \$245,000                          | \$245,000 - \$5,000 = \$240,000                          |
| Policy Value Calculation            | $\$50,000 \times \frac{\$245,000}{\$250,000} = \$49,000$ | $\$49,000 \times \frac{\$240,000}{\$245,000} = \$48,000$ |
| Net Amount at Risk Decreases        | From \$200,000 to \$196,000                              | From \$196,000 to \$192,000                              |

### What if there are loans?

A portion of each benefit payment is applied toward any outstanding policy loans. If LTC rider claims continue until the benefit is fully accelerated, the loan would be completely paid off with the last benefit payment. Assuming that the policy in Example 2 had an outstanding loan of \$10,000, the claim payment in month 1 would be reduced proportionally (by the ratio of loan amount to Total Face Amount) to repay a portion of the loan. In this case the repayment is \$200, or:

$$5,000 \times \frac{10,000}{250,000} = \$200$$

Loan interest is still due while in claim status. It may be capitalized (paid with an additional loan) while on claim, or paid out-of-pocket.

### What is the Effect of Monthly Deductions While on Claim?

For universal life or variable universal life policies: Unless the Waiver of Monthly Deductions rider or Disability Payment of Specified Premium rider<sup>6</sup> is also in effect, all policy and rider charge deductions continue while on claim.

### Accessing the Policy Value<sup>5</sup>

Policy loans or withdrawals (partial surrenders) are two ways to access the life insurance Policy Value. Each method reduces the total benefit under the LTC rider, but in different ways.

<sup>6</sup> The Waiver of Monthly Deductions rider and the Disability Payment of Specified Premium riders are not offered on all products.

## Withdrawals/Partial Surrenders

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- Directly reduce the Total Benefit under the LTC rider, proportional to the Accelerated Benefit Percentage, and thereby reduce the calculated LTC rider Maximum Monthly Benefit Amount (MMBA)
- Withdrawals (partial surrenders) are available before or while on claim, but as stated above, will result in a recalculation of the MMBA

## Policy Loans

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- Effectively reduce the LTC rider benefit, but *do not* result in a recalculation of the MMBA, even when taken while on claim.
- When there is an outstanding policy loan, a proportionate amount of each monthly benefit payment serves to repay that loan. This amount is calculated to repay the total policy loan by the time the death benefit is fully accelerated.

Note that the net death benefit is reduced by the amount of the loan. Also, if the policy should lapse while a loan is outstanding, the loan will be treated as a distribution from the policy, and there may be tax consequences as a result.

## Tax Considerations

### Long-Term Care Rider Tax-Qualified

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The LTC rider is intended to be a Qualified Long-Term Care Insurance contract under Internal Revenue Code Section 7702 (B)(b):

- Long-term care benefits are intended to be excludable from Federal Gross Income.
- Even if the policy is classified as a Modified Endowment Contract (MEC), the intent is for the long-term care benefit payments to continue to be excludable from income taxes.
- In the future, if it is determined that the rider does not meet these requirements, we will make reasonable efforts to amend the rider if necessary. We will offer the policy owner the opportunity to receive these amendments.

Note that the Long-Term Care rider is only available to prospective New York clients in cases where the policy owner and insured are the same individual. The product is not offered when a third-party owner is involved.

### Effect of Long-Term Care Charges on Cost Basis<sup>7</sup>

#### Universal Life and Variable Universal Life

For universal life or variable universal life policies, monthly charges for the LTC rider are considered policy distributions for Federal Income Tax purposes, and therefore will usually reduce the policy's cost basis. Please consult a qualified tax advisor for more information.

### Third-Party Ownership of a Policy with the LTC Rider

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The Long-Term Care rider is recommended for clients who intend to own the policy personally, as opposed to a third party ownership arrangement. We caution against ownership by anyone other than the insured, as it could have adverse tax consequences. Purchasing this product by, or transferring it to, a person other than the insured should be considered only after careful review with the client's own tax and legal advisors.

### Trusts

Trusts should be drafted by an attorney familiar with such matters in order to take into account income and estate tax laws (including the generation-skipping tax). Failure to do so could result in adverse tax treatment of trust proceeds.

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<sup>7</sup> Note that as of January 1, 2010 the IRS will treat charges or premiums for the LTC rider differently. Universal life or variable universal life rider charges as well as whole life rider premiums paid from policy cash value will continue to be reportable distributions, but will no longer be taxable. Rider charges or premiums paid out of the policy's cash value will also continue to be considered policy distributions, and will always reduce the cost basis, even if the policy is a modified endowment contract. These charges/premiums will no longer be considered taxable, even in situations where the policy cost basis was reduced to zero. It is recommended that clients seek the advice of a tax professional for further information on this subject.

**Note:** This material does not constitute tax, legal or accounting advice and neither John Hancock nor any of its agents, employees or registered representatives is in the business of offering such advice. It was not intended or written for use and cannot be used by any taxpayer for the purpose of avoiding any IRS penalty. It was written to support the marketing of the transactions or topics it addresses. Anyone interested in these transactions or topics should seek advice based on his or her particular circumstances from independent professional advisors.

**New York only:** The Long-Term Care rider is only available to prospective New York clients in cases where the policy owner and insured are the same individual. The product is not offered when a third-party owner is involved.

## Producer Requirements

### Licensing, Appointment & Continuing Education

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The licensing requirements for the LTC rider vary by state. There are also producer training requirements that apply to the sale of the LTC rider. Information on requirements and approved courses are updated as the information becomes available, and can be found at [www.jhsalesnet.com](http://www.jhsalesnet.com).

#### Licensing

The producer must have Accident and Health Authority on their State Insurance License. The LTC rider is considered long-term care insurance in all states except Massachusetts, New York, Texas and Pennsylvania. All producers must have the A&H authority on their State Insurance License *before* soliciting an LTC rider on any John Hancock USA product. You can obtain this authority from your state insurance department.

Please note that Continuing Education is a requirement to obtain authority to sell the Long-Term Care rider in some states. These are the same requirements needed to sell a standalone long-term care insurance policy, and are similar to those of combination products available in the marketplace today.

#### Appointment

Producers need Statutory Company Appointment with John Hancock USA for the Accident and Health Authority. In order to solicit John Hancock USA products, you must obtain a Statutory Company Appointment with John Hancock USA for the Accident and Health Authority. A John Hancock Life Insurance Company (JHLICO) or John Hancock Variable Life Insurance Company (JHVLICO) appointment will not suffice, as neither company is the issuing company.

The following states require that an appointment be on file with the Department of Insurance *prior* to soliciting any business:

Alabama, Georgia, Hawaii, Kentucky, Louisiana, Montana, New Jersey, South Carolina, Vermont, and Washington

#### Continuing Education

The following states require that producers obtain the required LTC Continuing Education Certification prior to soliciting this product. Proof of course completion must be shown.

- CA** 8 hours of LTC Study Course is required.
- IL** 6 hours of LTC Study Course is needed in addition to Health license (course #09400)
- IN** 8 hours of LTC Study Course is needed in addition to Health license (residents only)
- MD** 2 hours of LTC Study Course is needed for First license renewal (residents only)

NAIC LTC regulations require that all producers become certified to sell both partnership and non-partnership LTC policies. This includes the LTC rider because it is filed as long-term care in most states. The LTC rider does not qualify for the Partnership program, but in order to sell a life insurance policy with the LTC rider in states that have approved this program, you must complete the required training. Refer to [www.jhsalesnet.com](http://www.jhsalesnet.com) for a list of approved states.

## Required Materials at Time of Solicitation

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In all states, the following is required:

- Illustration
- Outline of Coverage
- Replacement Form (required if replacement is involved)

Some states may also require:

- Shopper's Guide to Long-Term Care Insurance (LTC-1059) – Published by the NAIC.  
*Note that some states require that you use their versions of this brochure.*
- Guide to Health Insurance for People with Medicare (LTC-1014) – Required Medicare-eligible applicants.
- Other state-specific materials or notices as posted on the producer website, [www.jhsalesnet.com](http://www.jhsalesnet.com)

**For agent use only. Not for use with the public.**

Insurance policies and/or associated riders and features may not be available in all states.

Insurance products are issued by John Hancock Life Insurance Company (U.S.A.), Boston, MA 02116 (not licensed in New York) and John Hancock Life Insurance Company of New York, Valhalla, NY 10595.

**MLINY021214053 02/14 LIFE-1770**