

Frequently Asked Questions (FAQ)

Trustmark Term Life+LTC

1. What is Life+LTC Insurance?

You could need Long-Term Care (LTC) because of an accident, illness, cognitive impairment or simply due to aging.

This plan is designed to help you and your family plan for the high cost of Long-Term care and combines the benefit of life insurance. You WILL receive a benefit, either for LTC, Life Insurance, or both.

2. How does the plan benefit work?

Choose a life insurance benefit and you will receive a monthly LTC Benefit of 4% of the life insurance benefit to use for Professional Care or 2% of the life insurance benefit to use for Family Care upon LTC claim approval.

3. Does the plan's benefit decrease?

The death benefit will decrease to 1/3 of the original face value at age 70 or after 10 years, whichever is greater. Your LTC benefit does not reduce.

4. What happens if I use all the benefits for LTC? Do I receive a death benefit?

Yes, Trustmark restores the death benefit to the current death benefit value (at age 70 or after 10 years this would be the reduced death benefit).

5. What happens if I never need LTC and don't use the LTC benefit?

Your beneficiary will receive the death benefit upon your death.

6. What is the Extension of Benefits Rider?

The Extension of Benefits Rider extends benefits payable for Professional Care for an additional 25 months. It extends benefits payable for Family Care for an additional 50 months. The extension becomes effective only after benefit payments under the home health and long term care benefit rider have been exhausted.

This Rider will terminate on the earliest of the following:

- The Monthly Deduction Day immediately following the day Trustmark receives the Owner's written request for termination; or
- The date the Home Health and Long Term Care Benefit Rider terminates, except if the Home Health and Long Term Care Benefit Rider has reduced the Death Benefit Amount of the Certificate to zero; or
- The date the Certificate terminates, except if the Home Health and Long Term Care Benefit Rider has reduced the Death Benefit Amount to zero; or
- Once extended benefits have been paid for the maximum number of months under this Rider; or
- The date extended benefits end.

For example, if you start the 25-month extension and after 8 months you go home, you forfeit the remaining 17 months.

7. Does my premium increase as I get older?

Premiums are based on the age at which you apply for coverage. They do not increase each year as you get older.

8. When does the plan benefit end?

You pay premiums until age 100 and you must use the LTC benefit or death benefit by your 121st birthday. If you don't use it by your 121st birthday, then your plan benefits expire.

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9. What if I stop paying the premiums?

After you have had coverage for at least 10 years, you may elect to pay no additional premiums and convert your plan into either Extended Term or Reduced Paid-Up life insurance (death benefit and long-term care benefits). Details will depend on your plan, age, benefit amount and how long you have had coverage

10. How do I trigger the plan LTC benefit?

When you need assistance and are certified by a physician as needing assistance with 2 out of 6 Activities of Daily Living (ADL's) or you are diagnosed with cognitive impairment after the first 90 days. The ADL's are bathing, eating, transferring, toileting, continence and dressing.

11. Can my spouse/domestic partner apply for coverage?

Yes – eligible spouses can apply for coverage. The employee must apply for the spouse/domestic partner to be eligible. Spouse/domestic partner coverage cannot exceed 50% of the employee coverage.

12. Does my spouse/domestic partner have to submit their own application?

Yes, first the employee must list the spouse/domestic partner as a dependent on their application on the enrollment website. Once the spouse/domestic partner is added as a dependent, coverage can be selected, and an application completed.

13. How do I know my application was submitted?

Confirmation of your application called 'Enrollment Verification' will be available to download and print after signing.

14. Can I maintain this policy if I am no longer employed by my current employer?

Yes, the Trustmark policy is portable by paying your premiums directly to Trustmark. As long as you continue to pay your premiums, your coverage will remain in force. The rate does not change when you leave employment.

15. How long has Trustmark been in business?

Trustmark has been in business since 1889

Learn more about Trustmark by visiting [Home | Trustmark \(trustmarkbenefits.com\)](https://trustmarkbenefits.com)

16. Can I use Health Savings Account (HSA) money to pay my premium?

No

17. Can I use my Flexible Spending Account (FSA) to pay my premium?

No

18. Are the LTC premiums pre-tax or post-tax?

Post-tax

19. How do I receive my policy?

You will receive a letter from Trustmark with instructions to login to [Voluntary Benefits | Trustmark \(trustmarkbenefits.com\)](https://trustmarkbenefits.com). Your policy documents will be available to download and print.

20. I am having technical difficulties.

Password reset – click on 'Forgot Password'

Enter your email address and complete the 'Verification Code'

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Your password reset will be emailed to you

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Trustmark Underwriting Questions

Modified Guarantee Issue

1. Is any person to be insured now disabled, been seen by a physician or treated in a medical facility, including a doctor's office, within the last six months for illness or disease (other than flu, colds)?
2. Has any person to be insured been treated for, or diagnosed by a member of the medical profession as having Acquired Immune Deficiency Syndrome (AIDS) or tested positive on an AIDS or HIV test?

Simplified Issue

1. Is any person to be insured now disabled, been seen by a physician or treated in a medical facility, including a doctor's office, within the last six months for illness or disease (other than flu, colds)?
2. Has any person to be insured been treated for, or diagnosed by a member of the medical profession as having Acquired Immune Deficiency Syndrome (AIDS) or tested positive on an AIDS or HIV test?
3. Details of any major health impairments (within the last five years)
4. Any history of drug or alcohol treatment
5. Specify the reason for seeing a medical practitioner in the past 12 months (other than for a routine physical)

Disclaimer: The underwriting questions within this proposal are for illustrative purposes only. The number of underwriting questions and the questions themselves can vary depending upon the state-specific application.