

SERFF Tracking Number: NWST-126580362 State: Arkansas
Filing Company: Northwestern Long Term Care Insurance State Tracking Number: 45403
Company
Company Tracking Number: 90-2420 LTC (1010)
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: 90-2420 LTC (1010)
Project Name/Number: 90-2420 LTC (1010)/90-2420 LTC (1010)

Filing at a Glance

Company: Northwestern Long Term Care Insurance Company

Product Name: 90-2420 LTC (1010) SERFF Tr Num: NWST-126580362 State: Arkansas
TOI: LTC03I Individual Long Term Care SERFF Status: Closed-Filed State Tr Num: 45403
Sub-TOI: LTC03I.001 Qualified Co Tr Num: 90-2420 LTC (1010) State Status: Closed
Filing Type: Advertisement Reviewer(s): Marie Bennett
Authors: Addie Croeker, Mai Xiong Disposition Date: 04/14/2010
Date Submitted: 04/12/2010 Disposition Status: Filed
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: 90-2420 LTC (1010) Status of Filing in Domicile: Pending
Project Number: 90-2420 LTC (1010) Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Group Market Size:
Overall Rate Impact: Group Market Type:
Filing Status Changed: 04/14/2010 Explanation for Other Group Market Type:
State Status Changed: 04/14/2010
Deemer Date: Created By: Addie Croeker
Submitted By: Addie Croeker Corresponding Filing Tracking Number:

Filing Description:

We are submitting the attached forms for your review and approval, if necessary, as advertising material for the Long Term Care Policy and related forms which have been previously approved in your state.

The forms included with this filing include pieces that are intended for use by our agents to use with clients and prospects about long-term care insurance. Also included with this filing are website pages.

If you should have any questions regarding the enclosed forms, you may call me at (414) 665-7195 or you can e-mail me at mai-baoxiong@northwesternmutual.com. On e-mails that are sent, please copy addiecroeker@northwesternmutual.com.

Sincerely,

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Mai Xiong
 Product Compliance Specialist

Company and Contact

Filing Contact Information

Mai Xiong, Product Compliance Specialist mai-baoxiong@northwesternmutual.com
 720 E Wisconsin Ave 414-665-7195 [Phone]
 Milwaukee, WI 53202 414-665-5006 [FAX]

Filing Company Information

Northwestern Long Term Care Insurance CoCode: 69000 State of Domicile: Wisconsin
 Company
 720 East Wisconsin Avenue Group Code: 860 Company Type: Long Term Care
 Rm S845 Group Name: State ID Number:
 Milwaukee, WI 53202 FEIN Number: 36-2258318
 (414) 271-1444 ext. [Phone]

Filing Fees

Fee Required? Yes
 Fee Amount: \$450.00
 Retaliatory? No
 Fee Explanation: \$50 per form (9 forms equals) \$450
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Northwestern Long Term Care Insurance Company	\$450.00	04/12/2010	35567297

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Marie Bennett	04/14/2010	04/14/2010

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Schedule Form	Schedule Item	Schedule Item Status	Public Access
Form	Brochure: NLTC: QuietCare: Tax Qualified Long Term Care Insurance		Yes
Form	Brochure: NLTC: QuieCare: Tax Qualified Long Term Care Insurance: Policy Provisions		Yes
Form	Brochure: NLTC: A Choice Worth Making		Yes
Form	Website: northwesternmutual.com: 2010: Personal: Products and Services: LTC		Yes
Form	Website: northwesternmutual.com: 2010: Personal: Products and Services: LTC		Yes
Form	Website: northwesternmutual.com: 2010: Personal: Products and Services: LTC		Yes
Form	Website: northwesternmutual.com: 2010: Personal: Products and Services: LTC		Yes
Form	Website: northwesternmutual.com: 2010: Personal: Products and Services: LTC		Yes
Form	Website: northwesternmutual.com: 2010: business: products and Services: Employee Benefits: Multilife LTCI		Yes

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Form Schedule

Lead Form Number: 90-2420 LTC (1010)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	94-2420 LTC (1010)	Advertising Brochure:	NLTC: QuietCare: Tax Qualified Long Term Care Insurance	Initial		0.000	90-2420 LTC (1010).pdf
	90-2421 LTC (1010)	Advertising Brochure:	NLTC: QuieCare: Tax Qualified Long Term Care Insurance: Policy Provisions	Initial		0.000	90-2421 LTC (1010).pdf
	90-2422 LTC (1010)	Advertising Brochure:	NLTC: A Choice Worth Making	Initial		0.000	90-2422 LTC (1010).pdf
	NM-LTC-002 (1010)	Advertising Website:	northwesternmutual.com: 2010: Personal: Products and Services: LTC	Initial		0.000	NM-LTC-002 (1010).pdf
	NM-LTC-003 (1010)	Advertising Website:	northwesternmutual.com: 2010: Personal: Products and Services: LTC	Initial		0.000	NM-LTC-003 (1010).pdf
	NM-LTC-004 (1010)	Advertising Website:	northwesternmutual.com: 2010: Personal: Products and Services: LTC	Initial		0.000	NM-LTC-004 (1010).pdf
	NM-LTC-005 (1010)	Advertising Website:	northwesternmutual.com: 2010: Personal: Products and	Initial		0.000	NM-LTC-005 (1010).pdf

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Services: LTC

NM-LTC-006 (1010)	Advertising Website: northwesternmutual.com: 2010: Personal: Products and Services: LTC	Initial Initial	0.000 0.000	NM-LTC-006 (1010).pdf NM-LTC-007 (1010).pdf
NM-LTC-007 (1010)	Advertising Website: northwesternmutual.com: 2010: business: products and Services: Employee Benefits: Multilife LTCI	Initial Initial	0.000 0.000	NM-LTC-007 (1010).pdf

QuietCare[®]

Tax-Qualified
Long-Term Care Insurance

Photo for position only

 **Northwestern Long Term Care
Insurance Company[™]**

A Northwestern Mutual Company

90-2420 LTC (1010)



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PROTECTING YOUR FAMILY'S ASSETS, LIFESTYLE AND OPTIONS

Financial security is the confidence that comes from taking action today to provide for tomorrow.

We spend our lifetimes working hard and saving for the future to ensure our security and the security of our family. We purchase life insurance or disability income products, invest in stocks and contribute to retirement funds. Financial security may mean different things to different people, but for many it is a major objective in our lives.

While we cannot predict what the future may bring, we can start to plan for it so we can continue to be in control of our futures and our financial security. There are several significant issues we need to consider when thinking about our futures – specifically when thinking about possibly needing care:

Living longer due to:

- Advances in medicine and healthcare
- Healthier lifestyles

People are living longer, and with that, the chances of needing long-term care increases.

Changing family demographics

- Dual-income families
- “Sandwich Generation” – people potentially caring for aging parents while rearing their own children
- Families more commonly spread across the country

As families change, we need to explore other options if we would need long-term care.

Increasing cost of care

- home health care
- assisted living facility
- private room in a nursing home

The current and future cost of long-term care can be significant.

Expecting the Unexpected

Individuals of any age may experience the need for long-term care due to:

- a chronic illness like Multiple Sclerosis
- a cognitive impairment including early onset dementia, or
- the results of an accident like paralysis

By starting to consider our options early in life while in good health, we can help protect against the unexpected need for care now and in the future.

The combination of longer lives, family demographics, increasing cost of long term care, and unexpected lifetime events heighten the need to protect our financial security from the cost of receiving this care.

Your Options for Coverage 2

Benefits 4

Assistance Choices 6

Customize Your Policy 8

Optional Features 10

Discounts, Provisions, Exclusions 12

Our Commitment 14

Long-term care defined

Long-term care refers to services that individuals suffering from a chronic illness, disabling condition, or cognitive impairment rely upon. These services are generally needed for an extended period of time and may not “cure” or “heal” the individual receiving them. Long-term care services help with routine activities such as bathing, dressing, and eating.

YOUR OPTIONS

Here are some options to consider should you ever need long-term care.

Family

Family members often take on the responsibility of caring for a loved one. Care from a family member is not usually the planned option, but rather the result of a sudden need. Given the option, many would prefer that the family was there for support, not as primary care providers. Care-giving family members may develop their own health issues, and become unable to take on the additional responsibility of providing care on a long-term basis, no matter how willing.

It may be equally difficult for adult children to take on the long-term care needs of a parent. Relocation may be necessary, but even when the child is nearby, juggling care-giving and work responsibilities may result in scheduling conflicts with their employers, time away from work, and less time spent with their own children.

Disability income insurance

A fundamental building block to a sound financial security plan, disability income insurance is designed to protect your ability to receive an income should you become sick or injured and unable to work. It is designed to replace lost income and pay for every day expenses, such as your mortgage and bills. In situations where a disability also requires long-term care services, your routine living expenses may remain relatively constant but the additional expenses specifically related to an injury or illness can add up. Disability income insurance is not specifically designed to provide the funds for the additional cost of long-term care services.

Medicare and health insurance

For most Americans, Medicare becomes our health insurance at age 65. It is designed to pay for medically necessary skilled care for acute, short-term conditions such as broken bones, emergency surgery or a heart attack. Chronic medical conditions evolve over longer periods of time and generally require non-skilled and non-medical care. **“Medicare and most health insurance plans, including Medigap (Medicare Supplement Insurance) policies don’t pay for this type of care, also called ‘custodial care’.”¹**

However, under Medicare Part A, if you meet certain criteria after being discharge from the hospital, skilled nursing facility services are covered as follows:

Days	You Pay	Medicare Pays
1-20	Nothing	Everything
21-100	\$137.50/day	Balance
101+	Everything	Nothing

Based on 2010 figures.

Medicaid

Medicaid² is a state-administered government-funded program that pays health care expenses for low-income individuals. If eligibility requirements are met, Medicaid can pay for nursing facility and limited home health care services. The recipient must meet the state’s eligibility requirements.

Your income and assets

The cost of long-term care is often underestimated and may have a larger impact on your assets than you realize. Assuming an estimated annual cost of home health care of [\$84,680 in 2008] and rising at the rate of 5% per year due to inflation, to pay for an average claim a 55 year-old would need to accumulate [\$2,000,000] by the time he or she reaches age 85.

Private Pay

Projection based on annual increase of 5% in long-term care costs provided by a home health aide 8 hours per day for 5 years

Today	[\$ 84,680]
[2038]	[\$365,982]
[2039]	[\$384,281]
[2040]	[\$403,495]
[2041]	[\$423,670]
[2042]	[\$444,854]

Total Resources Needed

[\$2,022,282]

Based on 8% rate of return, this would require:

Investing [\$359,190] today, or
Saving [\$23,241] each year for 34 years

Source of cost of care is the Northwestern Long Term Care Cost of Care Survey, November 2008. Long Term Care Group, Inc.

To better understand the potential cost of a future long-term care event, and how it can vary by age, place and length of the event, visit www.LTCcostcalculator.com

Long-term care insurance

Only long-term care insurance is designed to reimburse some of the costs of receiving various levels of care for chronic conditions – either in your home, in the community, at an alternate living facility or in a nursing home. This gives you **options as to when, where, how much, and what type of care you can receive.**

Long-term care insurance helps to provide funding for potential costs and should be considered an integral part of any retirement plan. It **preserves your income and assets** by helping pay for your care through your policy, and not out of your pocket.

Long-term care insurance can be **designed to fit a wide range of needs and budget.** With some decisions it may pay to wait, but the earlier you decide to include long-term care insurance in your overall plan, the lower your premium and the higher the likelihood you will medically qualify for the coverage.

It's important to consider all options and resources available to you for long-term care assistance.

¹ “Medicare and You 2010”, Department of Health and Human Services, 2010

² Also referred to as Medi-Cal in California, MassHealth in Massachusetts, and TennCare Medicaid in Tennessee.



Photo for position only

Note: Certain state insurance departments require variations in terminology to some policy features. The new terms for the features do not change how the features operate. Such changes may be “Adult Day Health Care Centers” or “Adult Day Care Facilities” replacing “Adult Day Care Centers,” “Assisted Living Facilities” replacing “Alternate Living Facilities,” or “Residential Care Facility” and “Lifetime Maximum Dollar Amount” or “Maximum Lifetime Benefit” replacing “Benefit Account Value.”

ASSISTANCE CHOICES

QuietCare®, long-term care insurance offered through Northwestern Long Term Care Insurance Company (Northwestern),³ helps you plan for the ability to afford options such as...

60%

of Northwestern's claims are for Home Health Care.

50% are for Assisted Living, and 30% are for Nursing Home Care.

These claim percentages add to more than 100% because claimants frequently receive care in more than one setting over the course of their claim.

Care in your home

Home care services can be an alternative to receiving care in a facility setting. Home health care-eligible providers include qualified home health care agencies or certain qualifying independent care providers which deliver care in your home, the home of a friend or relative, or a community-based residential facility. Qualified home health care agencies must be licensed and/or certified by the state⁴ and provide care by one or more of the following qualified home health-care providers.⁵

- Registered nurses
- Licensed practical nurses
- Physical therapists
- Licensed vocational nurses
- Occupational therapists
- Speech therapists
- Licensed or certified social workers
- Certified home health aides
- Certified nursing assistants

An **immediate family** member may provide care if he or she meets the criteria for a home-health care provider and is providing such care as an employee of a qualified home health-care agency. You can also receive care through an **independent care provider**, who is a person not affiliated with a home health-care agency but otherwise meets the definition of a qualified home health-care provider. QuietCare does not cover family members as independent care providers.

Homemaker services⁶ are support services necessary to remain in the home, such as meal preparation, laundry, light housekeeping, and supervision of taking medications. Incidental homemaker services may be delivered by a home health care-eligible provider if provided by the same individual and on the same visit as other qualified long-term care services.

Care in your community

If you need long-term care services and are able to rely on informal assistance from a friend or family member, community care services can allow your informal caregiver time during the day to work or take care of other needs. Community care includes appropriate adult day care facilities that offer a group program that provides health, social, and related support services in a facility.

Care in an alternate living facility⁷

If the type or frequency of care you need cannot feasibly be provided in your home, care in an alternate living facility may be a better option for you. An alternate living facility primarily provides ongoing care on a 24-hour basis. Such facilities may include Alzheimer's care, adult foster care, personal care or community-based residential facilities (or similar terms) and may be freestanding or part of a larger facility such as an adult congregate living facility.

Assisted living facilities, known as residential care facilities in California, are designed to meet a wide range of individual needs, including assistance with everyday activities like dressing and bathing, within a residential-type setting.

Care in a nursing home

Sometimes care in a nursing home is needed. A nursing home is a facility that is primarily in the business of providing licensed nursing care (skilled, intermediate and custodial) to inpatients on a 24-hour-a-day basis.

Hospice care

Hospice care is intended for those in the final stages of needing care services. Hospice care services include inpatient and outpatient services that provide end of life care while alleviating the physical, emotional, and social discomforts of the terminally ill. The daily benefit will be payable prior to satisfying the Elimination Period if all other requirements for benefits are met and you are receiving hospice care. Hospice care that is covered by Medicare is subject to a limitation for governmental benefits available.

An Alternate Plan Of Care

A stay in a nursing home or alternate living facility might be avoided or postponed through the development of an alternate plan of care. Such a plan may reimburse costs for services that could keep you in your home, such as durable medical equipment, home modifications or long-term care services that did not yet exist when your policy was issued.

A written agreement between a licensed health-care practitioner, yourself, and Northwestern Long Term Care Insurance Company is required.

³ This policy does not qualify for Medicaid asset protection under the Partnership programs in certain states. In MA certain restrictions apply.

⁴ In states that do not license or certify these providers, other guidelines may apply.

⁵ Providers may vary by state.

⁶ May be called homecare services in MA.

⁷ Note: Certain state insurance departments require variations in terminology to some policy features. The new terms for the features do not change how the features operate. Such changes may be "Adult Day Health Care Centers" or "Adult Day Care Facilities" replacing "Adult Day Care Centers," "Assisted Living Facilities" replacing "Alternate Living Facilities," or "Residential Care Facility" and "Lifetime Maximum Dollar Amount" or "Maximum Lifetime Benefit" replacing "Benefit Account Value."

THE CARE YOU WANT

You can customize your QuietCare® policy to meet your specific needs and preferences. When customizing your policy, it is important that you understand the cost of care in your area.

Maximum Monthly Limit

Select a Maximum Monthly Limit from \$1,500⁸ to \$12,000⁹ per month, in \$100 increments. QuietCare® will reimburse the actual expenses incurred for eligible long-term care providers in your home, care in the community, care in an Alternate Living Facility or care in a Nursing Home, up to your selected Maximum Monthly Limit.

Elimination Period

The Elimination Period is the number of weeks the insured incurs Qualifying Expenses before benefits begin to be payable. If you have at least one day of qualifying expenses during a calendar week (Sunday through Saturday), the entire week will count toward the Elimination Period. In addition, expenses for qualified long-term care services incurred in countries other than the United States and Canada may also be used to satisfy up to 25 weeks of the Elimination Period.

Benefit Period

How long do you want to receive benefits? Your choices are Lifetime, six years or three years.

If your monthly cost of care is less than your selected Maximum Monthly Limit or you do not incur long-term care expenses on a daily basis, then the unused portion can be used to extend the period of time your coverage will last.

The Benefit Account Value

The Benefit Account Value is the maximum total amount payable for qualifying expenses for the duration of the policy. If you choose either a three- or six-year Benefit Period, the Benefit Account Value is determined by multiplying the amount of your selected Maximum Monthly Limit by the number of months in the selected Benefit Period.

For example: If your selected Maximum Monthly Limit is \$4800 per month and you choose a three-year Benefit Period, then your Benefit Account Value would be:

$$\$4800 \text{ per month} \times \text{three years (36 months)} = \$172,800$$

If you select a Lifetime Benefit Period, the Benefit Account Value is unlimited.

To find out more about the cost of care in your area, visit www.NorthwesternCostofLTC.com

\$ _____

- _____ 6 weeks
- _____ 12 weeks
- _____ 25 weeks¹⁰
- _____ 52 weeks¹⁰

- _____ Lifetime (unlimited)
- _____ 6 years (72 months)
- _____ 3 years (36 months)

$$\begin{array}{r}
 \$ \text{ _____} \times \text{ _____} = \$ \text{ _____} \\
 \text{Maximum} \quad \quad \quad \text{Benefit Period} \quad \quad \quad \text{Benefit} \\
 \text{Monthly Limit} \quad \quad \quad \text{(in months)} \quad \quad \quad \text{Account Value}
 \end{array}$$

- Qualified expenses count toward satisfying the Elimination Period regardless of the amount incurred per day and whether that amount is reimbursed by other sources such as Medicare.
- Weeks counting toward the Elimination Period need not be consecutive nor met within a specified period of time.
- Once you have satisfied your Elimination Period requirement, you will never have to satisfy it again, regardless of whether there are separate claim intervals. As long as there are qualifying expenses covered by the policy, benefits will be paid.

⁸ \$1,800 in Wisconsin per policy, \$3,000 in New York per policy, \$2,300 in Vermont aggregate minimum from all sources, \$3,000 in South Dakota aggregate minimum from all sources

⁹ \$15,000 in AK, CT, HI, MA, NH, NJ, NY.

¹⁰ Not available in all states.

Note: Certain state insurance departments require variations in terminology to some policy features. The new terms for the features do not change how the features operate. Such changes may be "Adult Day Health Care Centers" or "Adult Day Care Facilities" replacing "Adult Day Care Centers," "Assisted Living Facilities" replacing "Alternate Living Facilities," or "Residential Care Facility" and "Lifetime Maximum Dollar Amount" or "Maximum Lifetime Benefit" replacing "Benefit Account Value."

The amount of benefits provided depends upon the plan selected, and the premium will vary depending on the amount of benefits which are selected.

BENEFITS

*There to help you and your family
when you need it most*

Claim assistance services

You may elect to use the services of a Licensed Health Care Practitioner appointed by the company to provide claim assistance services to facilitate assessments of benefit eligibility and assist you in the claims process. Examples include:

- Assessing the need for long-term care and developing an appropriate plan of care
- Assisting in the completion of claim forms
- Providing annual certification of a need for long-term care
- Providing information on a local provider, community and health resources
- Monitoring and periodically reassessing your need for long-term care and your plan of care.

Waiver of premium

Premiums on your policy will be waived when you are determined to need long-term care.

Premiums will not be waived after there is no longer a need for long-term care. For those who have a need for long-term care while outside the United States and Canada, premiums will be waived until the next policy anniversary, and up to one additional policy anniversary.

Bed reservation

If you are in a nursing home or an alternate living facility and need to leave for whatever reason, QuietCare® will cover your room and board expenses each calendar year up to your Maximum Monthly Limit if an expense is incurred to hold your space.

Caregiver training benefit

When you are receiving care in your home, it can sometimes be advantageous to have a friend or family member receive training that teaches them how to better care for you. The Caregiver Training Benefit allows for a certain dollar amount from your policy to be applied toward such training.

Respite care

Respite care is care provided by one of the appropriate providers of care and is intended to give temporary relief to an informal, primary caregiver (such as a family member). Benefits can be paid prior to satisfying the Elimination Period if all other requirements for benefits have been met. However, if benefits for Respite care are paid for more than 2 days during a week, that week will not count for purposes of meeting the Elimination Period. Respite care must be part of the plan of care and benefits are available for a maximum of 30 days per calendar year, in a total amount up to the value of the Maximum Monthly Limit as of the end of the calendar year.

ELIGIBILITY REQUIREMENTS

Northwestern Long Term Care Insurance Company will begin to reimburse qualifying expenses for Hospice Care, Respite Care, and Caregiver Training before satisfying the Elimination Period. Other expenses will be reimbursed upon satisfying the Elimination Period requirement and when the company has determined that:

- A licensed health-care practitioner has certified (within the last 12 months) a need for either:
 - Hands-on or standby assistance from another person to perform at least two out of the six “Activities of Daily Living” for an expected period of at least 90 days due to a loss of functional capacity. *The six activities of daily living are: Bathing, Dressing, Toileting, Transferring, Continence, Eating*
- OR
- Substantial supervision to protect the insured from threats to health and safety due to a severe cognitive impairment.
- Expenses are incurred for qualified long-term care services pursuant to a plan of care prescribed by a licensed health-care practitioner and are received from appropriate providers of care such as home health-care agencies, qualified independent care providers, adult day care facilities, alternate living facilities or nursing homes;
- Satisfactory proof of loss is provided to the Company; and
- The benefits are not subject to exclusion under the terms of the policy. Benefits are not payable for the time the Insured has Qualifying Expenses before satisfying the Elimination Period, except as provided by the Hospice Care, Respite Care and Caregiver Training benefits.

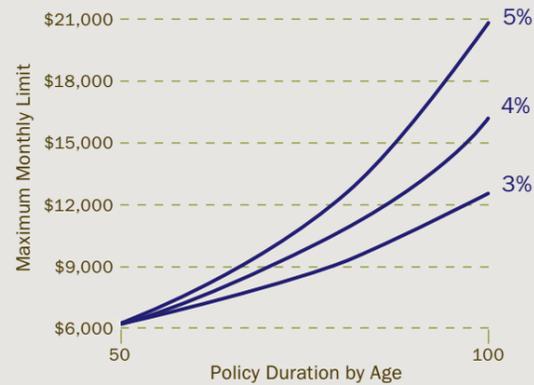


Photo for position only

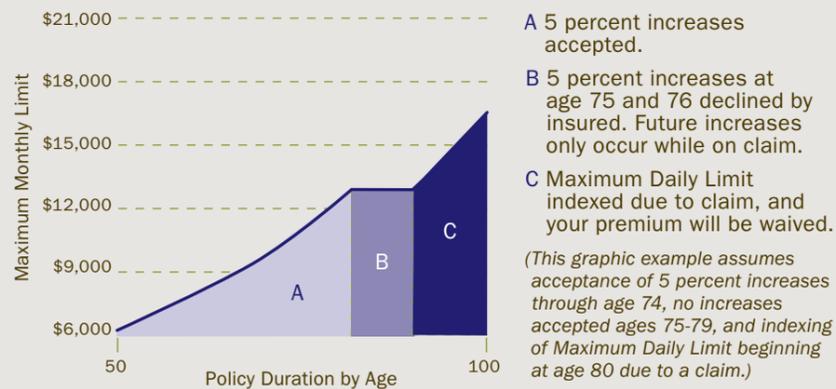
OPTIONAL POLICY BENEFITS

For an additional cost, you may choose from any of the following optional benefits:

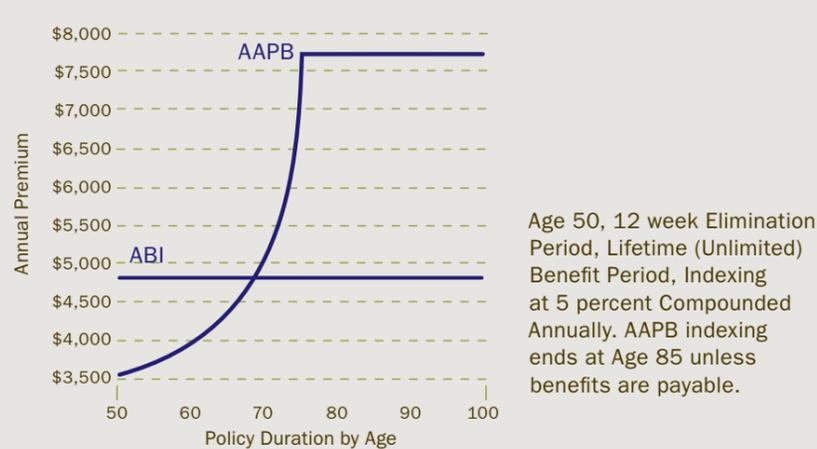
1. ABI Indexing Options Benefit



2. AAPB Indexing Benefit



Premium Comparison



Inflation protection options

Since long-term care insurance is usually a “future” benefit, the actual cost of providing care at a future date is likely to be higher than it is today. QuietCare® offers two ways for your benefits to increase:

1. Automatic Benefit Increase (ABI)

Choose a rate of 3%, 4%, or 5%¹¹ by which you want your Maximum Monthly Limit and remaining Benefit Account Value to increase on a compounded annual basis on each policy anniversary.

The cost of future coverage increases is built in and will not cause your original premium to increase after issue.¹²

¹¹ 3% and 4% not available in HI, ID, IN, NC, TX. Indexing of less than 5% is not considered “inflation protection” in all states.

¹² Due to the guaranteed renewability of this product, premiums will only be changed if all policies of the same form in your class are changed and, in most states, if your state insurance department approves the change.

2. Automatic Additional Purchase Benefit (AAPB)¹³

This option allows the amount of your Maximum Monthly Limit and remaining Benefit Account Value to increase 5% compounded on an annual basis on each policy anniversary date, up to age 85 (or for 10 years, if later)¹⁴ without any additional underwriting.

You decide whether or not to accept a future increase. On each policy anniversary when benefits increase, an additional premium based on attained age rates will be payable.

- On refusal of an increase, the coverage and premium levels remain at the prior year’s amounts. Increase offers will continue the next year.
- After a second increase is refused, no further increases in coverage are offered.
- Once benefits are payable, coverage increases will occur on the policy anniversary regardless of whether prior increases were refused and there is no age or duration limit to these increases.

¹³ In Pennsylvania, this benefit is referred to as “Optional Additional Purchase Benefit Rider.”

¹⁴ No age duration limits in CT, IN, MD, PA, TX.

¹⁵ The Survivorship Benefit is not allowed on any policy that chooses one of the Limited Payment Plan options. Not available in New Jersey.

Survivorship benefit

With the Survivorship Benefit,¹⁵ your QuietCare® policy will become paid up so that no future premiums will be due on your policy after the death of your spouse or companion provided that:

- You and your spouse or companion each have a QuietCare® policy with this Survivorship Benefit, and
- This Benefit has not been terminated due to your written request or for nonpayment of premium.

Paid-up nonforfeiture benefit

With this benefit, a special Benefit Account Value will be determined if the premiums stop being paid on or after the third year following the addition of this benefit. It will be equal to the greater of:

- 100% of premiums paid since this benefit was added, including any waived premiums and premiums paid for additional benefits

OR

- the Maximum Monthly Limit

An adjustment may be made to ensure that the total benefit amount paid over the life of the policy does not exceed what would have been payable at the time premiums stopped being paid.

The Maximum Monthly Limit under this benefit is based on the monthly limit available at the time you stopped paying premiums. Regular eligibility requirements must be met in order to receive benefits.

ADDITIONAL INFORMATION

Payment Options, Discounts, and Provisions

Premium payment options

There are two options for paying premiums; a standard premium payment plan or a limited pay plan.

1. A standard premium payment plan requires premiums to be paid regularly for the life of the policy, unless you become eligible for benefits. Once it is determined that you have a need for long-term care, premiums will be waived.

2. The Limited Payment plan¹⁶ allows you premium paying flexibility. Instead of paying premiums for the life of the policy, you may choose from the Limited Payment Plan options with correspondingly different premium structures:

- 10-pay
- Paid-up at Age 65 (with a minimum of 10 years of premium payments)

Under these premium options, if all premiums are paid when due, this policy will become paid-up after it has been in force for a period of 10 years or at age 65, respectively.

The Paid-Up Nonforfeiture Benefit is automatically included with the Limited payment Plan options.

Discounts

Spousal discount

If both you and your spouse qualify for a QuietCare[®] long-term care insurance policy, both of you will receive a 30% spousal discount.¹⁷

If you qualify for a QuietCare[®] long-term care insurance policy, but your spouse does not, you are still eligible for a 15% spousal discount.

Companion discount

If both you and your companion qualify for a QuietCare[®] long-term care insurance policy, both of you will receive a 30% companion discount¹⁸. This discount is not available when the spousal discount applies.

If you qualify for a QuietCare[®] long-term care insurance policy but your companion does not, you are still eligible for a 15% companion discount.

A companion relationship is defined as a committed relationship of two unrelated people or two family members of the same generation as evidenced by having lived together for at least two years and intending to continue to do so.

MultiLife discount

A 5% MultiLife discount¹⁹ is available on all policies issued to members of eligible employers, associations, or affinity groups including spouses, parents, parents-in-law and retirees.

The MultiLife discount is available in addition to the spousal or companion discount.

Additional policy provisions

Guaranteed renewable

Your QuietCare[®] policy will stay in force as long as premiums are paid when due. The policy can neither be cancelled nor have its terms, other than premiums, changed by Northwestern Long Term Care Insurance Company.

Premiums may be changed only if the premiums for all policies of the same form in your class are changed. In most states, your state's insurance department must approve rate increases.

Regular reinstatement

Subject to company requirements, your QuietCare[®] policy may be reinstated within one year²⁰ after the due date of an overdue premium. You will be required to provide evidence of insurability and pay all unpaid premiums.

Reinstatement for unintentional lapse

If your QuietCare[®] policy lapses as a result of either functional or severe cognitive impairment, you may reinstate the policy within five months of the expiration of the grace period. You will need to provide satisfactory proof of this loss and will be required to pay all unpaid premiums.

Right to return

You may return the policy for any reason within 30 days after you receive it. The policy may be returned to your financial representative (a licensed insurance agent) or to Northwestern's administrative office at P.O. Box 64009, St. Paul, MN 53164-3173. Any premium paid will be refunded.

Operation of the policy with other coverage

If benefits payable under QuietCare[®] and any other coverage for long-term care are greater than actual expenses, the daily benefit payable may be adjusted. However, the Benefit Account Value will not be reduced because of other coverage.²¹

QuietCare[®]
may be purchased
between the ages
of 18 and 79.

¹⁶ These plans are guaranteed renewable; no additional premiums can be charged after policies are paid-up. A policy enters paid-up status on the anniversary following the final premium payment of the Limited Payment Plan. For the 10-pay plan, the policy becomes paid-up at the end of the tenth policy year. For the Paid-up at age 65 plan, the policy becomes paid-up at the end of the policy year in which the Insured reaches insurable age 65. AAPB inflation protection is not available on the Limited Payment Plan option.

Note: Premiums are not guaranteed and can be changed by class prior to the date this Policy becomes Paid-Up.

¹⁷ In Montana, spousal discounts are not available. A companion discount is available in Montana. In Montana, companion means a committed relationship of two unrelated people or two family members of the same generation as evidenced by marriage or having lived together and intending to continue to do so.

¹⁸ Not available in all states.

¹⁹ Policies issued in NJ, NY, OH and PA with the MultiLife Discount have the form number TT.LTC.ML (1010).

²⁰ Six months in South Dakota.

²¹ Not applicable in all states.

OUR COMMITMENT

The Northwestern Long-Term Care Advantage

Strength

Financial strength is fundamental to Northwestern Long Term Care Insurance Company's vision for policyowners. Northwestern Long Term Care Insurance Company, a wholly owned subsidiary of The Northwestern Mutual Life Insurance Company, maintains the best possible insurance financial strength ratings from all four major rating services (see chart below).

These third-party ratings provide a professional assessment of our strength and security and represent our promise to pay our claims and meet our obligations. Additionally, benefits of Northwestern Long Term Care Company are 100 percent guaranteed by Northwestern Mutual.

Stability

We take a long-term perspective by placing policyowner interest first and foremost. The pricing of our long-term care insurance reflects low lapse assumptions, which anticipates that our policyowners will keep and use their policies. These low lapse assumptions contribute to better cash flow for investments. This also enables us to invest in a diversified investment portfolio with a long-term horizon, allowing for better stability when short-term fluctuations exist in the market. We are committed to providing a steady, stable and lasting value.

Northwestern Long Term Care Insurance Company ratings²²

A++ Superior
A.M. Best Company
Highest Rating, [June 2009]

AAA Extremely Strong
Standard & Poor's
Highest Rating, [June 2009]

AAA Exceptionally Strong
Fitch Ratings
Highest Rating, [June 2009]

Aaa Exceptional
Moody's
Best Possible Rating, [April 2009]

Value

Long-term care insurance policies issued by Northwestern Long Term Care Insurance Company are "participating" policies, which means that they are eligible for dividends. **Our philosophy is to pay the highest level of dividends possible while still maintaining a strong surplus position.**²³

As new and enhanced benefits to QuietCare[®] policies become available in the future, it is our ambition to make sure that existing policyowners are given the opportunity to acquire them at an appropriate premium, whenever possible and practical. This is an important consideration when purchasing a product that may not be needed for 20, 30, or 40 years.

A HISTORY OF VALUE

1998

QuietCare[®] was first introduced by Northwestern Long Term Care Insurance Company.

2002

All policies, including in-force policies, were made participating. This enhancement offered the opportunity for policyowners to receive a reduction in premium through policy dividends if the product experience proves more favorable than pricing expectations.

The Alternate Living Facility benefit was increased to 100% of the nursing home daily limit, and the Caregiver Training Benefit was added. Both of these features were made available to existing policyowners through the Benefit Upgrade Program offer.

2003

The Automatic Additional Purchase Benefit (AAPB) amendment was enhanced and automatically extended to existing policyowners.

2005

Policies were enhanced to include: eliminating the mental health exclusion, allowing benefits for care received in Canada, and increasing the Bed Reservation Benefit and Respite Care Benefit.

2006

Northwestern declared its first dividend.

2008

Policies were enhanced to include: adding a weekly elimination period, hospice care, formalization of claim assistance services, and an improved waiver of premium.

Neither the existence nor the amount of a dividend is guaranteed in any given year. Decisions with respect to the determination and allocation of divisible surplus are left to the discretion and sound business judgment of the Board of Directors. There is no guaranteed specific method or formula for the determination and allocation of divisible surplus.

²³ Northwestern Long Term Care Insurance Company's approach is subject to change. Any dividend paid will be used to reduce future premiums, or if not so used because the policy is in a non-premium paying status, will be accumulated as a premium refund which may not exceed the aggregate premiums paid. The cumulative premium refund will be paid to the insured at the earlier of cancellation or termination of the policy or death of the insured. Dividends paid on long-term care policies will be used to reduce the cost of future premiums, or if not so used because the policy is in a non-premium paying status, will be accumulated as a premium refund which may not exceed the aggregate premiums paid. The cumulative premium refund will be paid to the insured at the earlier of cancellation or termination of the policy or death of the insured.

²² The four agencies listed base ratings on the financial strength of the insurance company. These ratings are not recommendations of specific policy provisions, rates or practices of the insurance company. Since its entrance into the long-term care insurance market in 1998, all four agencies have given Northwestern Long Term Care Insurance Company the best possible insurance financial strength ratings. At the time of this publication, our most current ratings are for the following dates: A.M. Best (June 2009), Fitch Ratings (June 2009), Moody's (April 2009) and Standard & Poor's (July 2009).

EXCLUSIONS AND LIMITATIONS

QuietCare® does NOT pay long-term care benefits for care that is:

- Provided for a need for long-term care primarily due to alcoholism or drug addiction.²⁴ This does not apply to medications taken as prescribed by a physician.
- Received outside of the 50 United States, the District of Columbia or the country of Canada.
- Provided by an immediate family member, unless the family member provides such care as an employee of a qualified home health-care agency.
- Reimbursable under any federal, state, or governmental health care plan or law except Medicaid, unless required by law. The contract cannot reimburse expenses that are reimbursable or would be reimbursable except for the application of a deductible or coinsurance amount, under Medicare.

For determining the benefit payable, the insured's expenses will be reduced by the expenses subject to this limitation. However, the days of qualifying expenses paid for by a governmental health care plan or law may be accumulated to satisfy the Elimination Period.

- Normally provided at no charge in the absence of insurance.

After issue, no exclusion will be made for pre-existing conditions.²⁵ This is a general list of exclusions. However, state variations may apply.

This brochure is not all-inclusive. The policy provides a complete list of benefits, limitations and exclusions.

QuietCare® is an individual tax-qualified long-term care insurance policy that is medically underwritten. This material is produced for the marketing and solicitation of insurance. You may be contacted by a financial representative (a licensed insurance agent).

²⁴ In Colorado, Maryland and Vermont this exclusion does not apply. Also, it is referred to as "Alcoholism or Drug Detoxification" in Massachusetts.

²⁵ A pre-existing condition means a condition for which medical advice or treatment was recommended by or received from a provider of health care services within six months preceding the effective date of coverage.

Your state's insurance department may have additional information, including a buyer's guide, explaining long-term care insurance.

Northwestern Long Term Care Insurance Company is a subsidiary of The Northwestern Mutual Life Insurance Company, Milwaukee, WI

www.northwesternmutual.com

Policy forms TT.LTC. (1010) and TT.LTC.ML. (1010).

Form TT.LTC.ML. (1010) is available only in New Jersey, New York, Ohio and Pennsylvania.

90-2420 LTC (1010)

 **Northwestern Long Term Care
Insurance Company™**

A Northwestern Mutual Company

QuietCare®

Tax-Qualified

Long-Term Care Insurance

Policy Provisions



Northwestern Long Term Care
Insurance Company™

A Northwestern Mutual Company

A Northwestern long-term care insurance policy is designed to reimburse some of the costs of receiving care in either your home, your community, an alternate living facility or a nursing home.

Coverage provided by the policy gives you options over when, where, how much and what type of care you can receive.

Certain state insurance departments require variations in terminology to some policy features. The new terms for the features do not change how the features operate. Such changes may be “Adult Day Health Care Centers” or “Adult Day Care Facilities” replacing “Adult Day Care Centers”, “Assisted Living Facilities” replacing “Alternate Living Facilities,” and “Lifetime Maximum Dollar Amount” or “Maximum Lifetime Benefit” replacing “Benefit Account Value”.



Eligible purchase ages

QuietCare[®] long-term care insurance may be purchased between the ages of 18 and 79.

Maximum Monthly Limit

You may select a Maximum Monthly Limit between \$1,500¹ and \$12,000² per day in \$100 increments to pay monthly expenses incurred for long-term care services.

QuietCare[®] will reimburse the actual expenses incurred up to your selected Maximum Monthly Limit for nursing homes and alternate living facilities, which may include assisted living, Alzheimer's care, community-based residential, hospice care, and adult foster care facilities.

Home health and community care daily benefits

Covered home health care services may include appropriately licensed or certified independent care providers.

Benefit period options

Three Years (36 months), Six Years (72 months), or Lifetime (Unlimited) Benefits are available.

1 \$1,800 in Wisconsin per policy, \$3,000 in New York per policy, \$2,250 in Vermont aggregate minimum from all sources, \$3,000 in South Dakota aggregate minimum from all sources

2 \$15,000 in AK, CT, MA, HI, NH, NJ, NY.

Elimination Period options

6, 12, 25 or 52 weeks³

Benefits begin to be payable after you have incurred either 6, 12, 25 or 52 weeks of qualifying expenses. Once you have satisfied a week toward your Elimination Period, you will never have to satisfy it again.

Benefit account value

If you choose either a Three- or Six-Year Benefit Period, a Benefit Account Value is determined by multiplying the amount of your selected Maximum Monthly Limit by the number of months in the selected Benefit Period. If your monthly cost of care is less than your selected Maximum Monthly Limit, or you do not incur long-term care expenses on a monthly basis, then the unused portion can be used to extend the period of time your coverage will last. If you select a Lifetime Benefit Period, the Benefit Account Value is unlimited.

Hospice care

Hospice care is intended for those in the final stages of needing care services. Hospice Care Services include inpatient and outpatient services that provide end of life care while alleviating the physical, emotional and social discomforts of the terminally ill. The daily benefit will be payable prior to satisfying the Elimination Period if all other requirements for benefits are met and you are receiving hospice care. A licensed physician must certify the terminal illness and the length of the illness to be six months or less. Hospice care can be provided under a hospice care program that is state/federally certified and may be provided in the home, home of a friend or home of a relative. Hospice care that is covered by Medicare is subject to the limitation for

governmental benefits payable. Reimbursed expenses for hospice care will not count in meeting the Elimination Period.

Caregiver training benefit

When you are receiving care in your home, it can sometimes be advantageous to have a friend or family member receive training that teaches them how to better care for you. The Caregiver Training Benefit allows for a certain dollar amount from your policy to be applied toward such training. The Caregiver Training Benefit, however, will not be paid to train an informal caregiver who will be paid to care for you.

Respite care

Respite care is temporary relief to the informal, primary caregiver. Respite care benefits can be paid before satisfying the Elimination Period if all other requirements have been met. However, if benefits for Respite Care are paid for more than 2 days during a week, that week will not count for purposes of meeting the Elimination Period. Respite Care benefits are available for a maximum of 30 days per calendar year, in a total amount up to the value of the Maximum Monthly Limit as of the end of the calendar year.

Waiver of premium

Premiums on your policy will be waived when you are determined to have a need for long-term care – either needing hands-on or stand by assistance with at least two Activities of Daily Living (ADLs) or needing substantial supervision due to a severe cognitive impairment. Premiums will be waived until the next policy anniversary. If a premium is waived on the policy anniversary, the annual premium is waived. Premiums will not be waived after

there is no longer a need for long-term care. For those who have a need for long-term care while outside the United States and Canada, premiums will be waived until the next policy anniversary, and up to one additional policy anniversary.

Bed reservation

If you are in a nursing home or an alternate living facility and need to leave for whatever reason, QuietCare® will cover your room and board expenses up to your Maximum Monthly Limit if an expense is incurred to hold your space.

Dividends

Your policy is participating. Any dividends will be used to reduce future premiums, or if not so used because the policy is in a non-premium paying status, will be accumulated as a premium refund which may not exceed the aggregate premiums paid. The cumulative premium refund will be paid to the insured at the earlier of cancellation or termination of the policy or death of the insured.⁴

Alternate plan of care

If you would otherwise require qualified long-term care services from an appropriate provider of care, QuietCare® may provide benefits through other means under a written plan of care. An Alternate Plan of Care must

⁴ Neither the existence nor the amount of a dividend is guaranteed in any given year. Decisions with respect to the determination and allocation of divisible surplus are left to the discretion and sound business judgment of the Board of Directors. There is no guaranteed specific method or formula for the determination and allocation of divisible surplus. Northwestern Long Term Care's approach is subject to change, or if not so used because the policy is in a non-premium paying status, will be accumulated as a premium refund which may not exceed the aggregate premiums paid. The cumulative premium refund will be paid to the insured at the earlier of cancellation or termination of the policy or death of the insured.

be agreed upon by you, a licensed health care practitioner and Northwestern Long Term Care Insurance Company.

Claim assistance services

You may elect to use the services of a Licensed Health Care Practitioner appointed by the Company to provide Claim Assistance Services. Claim Assistance Services are intended to facilitate assessments of the benefit eligibility and assist you in the claims process. Examples include:

- Assessing the need for long-term care and developing an appropriate plan of care
- Assisting in the completion of claim forms
- Providing annual certification of a need for long-term care
- Providing information on local provider, community and health resources
- Monitoring and periodic reassessments of your need for long term care and your plan of care

Claim Assistance Services are available at the company's expense and will not reduce the Benefit Account Value. Claim Assistance Services may be used prior to satisfying the Elimination Period. In all cases, you choose whether or not to use these Claim Assistance Services, and you select the providers of your care.

Premium payment options

There are two options for paying premiums; a standard premium payment plan or a limited pay plan.

1. A standard premium payment plan requires premiums to be paid regularly for the life of the policy, unless you become eligible for benefits. Once it is determined that you have a need for long-term care, premiums will be waived.

2. The Limited Payment plan allows you premium paying flexibility. Instead of paying premiums for the life of the policy, you may choose from the Limited Payment Plan options with correspondingly different premium structures:

- 10-pay
- Paid-up at Age 65 (with a minimum of 10 years of premium payments)

Under these premium options, if all premiums are paid when due, this policy will become paid-up after it has been in force for a period of 10 years or at age 65, respectively.

Discounts

Spousal Discount:⁵ If both you and your spouse are issued a QuietCare® long-term care insurance policy, you will receive a 30 percent discount on each policy. If you qualify for a QuietCare® long-term care insurance policy, but your spouse does not, you are still eligible for a 15 percent spousal discount.

Companion Discount:⁶ If both you and your companion are issued a QuietCare® long-term care insurance policy, you will receive a 30 percent Companion Discount on each policy. The Companion Discount is not available when the Spousal Discount applies. A companion relationship is defined as a committed relationship of two unrelated people or two family members of the same generation. If you qualify for a QuietCare® long-term care insurance policy, but your companion does not, you are still eligible for a 15 percent spousal discount.

5 In Montana, spousal discounts are not available. A companion discount is available in Montana. In Montana, companion means a committed relationship of two unrelated people or two family members of the same generation as evidenced by marriage or having lived together and intending to continue to do so.

MultiLife Discount:⁷ A 5 percent discount is available on all policies issued to members of eligible employer, association or affinity group including spouses, parents, parents-in-law and retirees.

The MultiLife Discount is available in addition to the Spousal or Companion Discount.

Optional policy benefits

(Available at an additional cost)

Automatic Benefit Increase

Choose an amount from 3 percent to 5 percent⁸ by which you want your Maximum Monthly Limit and remaining Benefit Account Value to increase on a compounded annual basis at each policy anniversary. The cost of the future coverage increases is built in and will not cause your original premium to increase after issue.⁹

Automatic Additional Purchase Benefit¹⁰

This option allows the amount of your Maximum Monthly Limit and remaining Benefit Account Value to increase by 5 percent compounded per policy year on each policy anniversary date, up to age 85 (or for 10 years if later)¹¹ without any additional underwriting. You decide whether or not to accept a future increase.

On each policy anniversary when coverage increases, your premium will increase based on attained age rates. Upon declining a second automatic increase, your Benefit Account Value

7 Policies issued in PA, NJ, NY and OH with the MultiLife Discount have the form number TT.LTC.ML.(1010).

8 3% & 4% are not available in HI, ID, IN, NC, TX.

9 Due to the guaranteed renewability of this product, premiums will only be changed if all policies of the same form in your class are changed and, in most states, if your state insurance department approves the change.

10 In PA, this benefit is referred to as "Optional Additional Purchase Benefit Rider."

11 No age or duration limits in CT, IN, MD, PA, TX.

and Maximum Monthly Limit will remain level and all future increases are no longer available. When you receive benefits, the remaining Benefit Account Value and Maximum Monthly Limit will automatically increase by 5 percent compounded on each policy anniversary with no age or duration limit.

Survivorship Benefit¹²

With the Survivorship Benefit, your QuietCare[®] policy will become paid up so that no future premiums will be due on your policy after the death of your spouse or companion, provided that:

- You and your spouse or companion each have a long-term care policy with this Survivorship Benefit; and
- This benefit has not terminated due to your written request or for nonpayment of premium.

Paid-Up Nonforfeiture Benefit

With this benefit, a special Benefit Account Value will be determined if the premiums stop being paid on or after the third policy anniversary. It will be equal to the greater of 100% of premiums paid at date of issue of the benefit, or the Maximum Monthly Limit level at the time premiums stopped being paid. An adjustment may be made to make sure the total amount paid over the life of the policy does not exceed what would have been payable at the time premiums stopped being paid.

Guaranteed renewable

Your policy will stay in force as long as premiums are paid when due. The policy can neither be cancelled nor have its terms, other than premiums, changed by the Company.¹³

12 Not available in NJ.

13 Due to the guaranteed renewability of this product, premiums will only be changed if all policies of the same form in your class are changed and, in most states, if your state insurance department approves the change.

Right to return

You may return the policy for any reason without penalty or obligation within 30 days after you receive it. Any premium paid will be refunded.

EXCLUSIONS AND LIMITATIONS

QuietCare® does NOT pay long-term care benefits for care that is:

- Provided for a need for long-term care primarily due to alcoholism or drug addiction.¹⁴
- Received outside of the fifty United States, the District of Columbia or the country of Canada.
- Provided by an immediate family member unless the family member provides such care as an employee of a qualified home health-care agency.
- Reimbursable under any federal, state or governmental health-care plan or law except Medicaid, unless required by law. The contract cannot reimburse expenses that are reimbursable, or would be reimbursable except for the application of a deductible or coinsurance amount, under Medicare, except expenses which are reimbursable under Medicare only as a secondary payor.

For determining the benefit payable, the insured's expenses will be reduced by the expenses subject to this limitation.

- Normally provided at no charge in the absence of insurance.

After issue, no exclusion will be made for pre-existing conditions.¹⁵ This is a general list of exclusions. However, state variations may apply.

14 In Colorado, Maryland and Vermont this exclusion does not apply. Also, it is referred to as "Alcoholism or Drug Detoxification" in Massachusetts.

15 A pre-existing condition means a condition for which medical advice or treatment was recommended by or received from a provider of health care services within six months preceding the effective date of coverage.

Your state's insurance department may have additional information, including a buyer's guide, explaining long-term care insurance.

This brochure is not all-inclusive. The policy provides a complete list of benefits, limitations and exclusions. QuietCare® is an individual tax-qualified long-term care insurance policy that is medically underwritten. This material is produced for the marketing and solicitation of insurance. You may be contacted by a financial representative. A financial representative is a licensed insurance agent.

Northwestern Long Term Care Insurance Company
A subsidiary of The Northwestern Mutual
Life Insurance Company · Milwaukee, WI

www.northwesternmutual.com

Policy forms TT.LTC.(1010) and TT.LTC.ML.(1010). Form TT.LTC.ML.(1010) is available only in New Jersey, New York, Ohio and Pennsylvania.



**Northwestern Long Term Care
Insurance Company™**

A Northwestern Mutual Company

Northwestern Long Term Care Insurance Company (NLTC):

- Is a wholly owned subsidiary of The Northwestern Mutual Life Insurance Company, a company with the longest record at number one in any industry in the history of FORTUNE® magazine's "most admired" survey, after leading the life insurance industry for 25 years.¹
- Has a history of offering new policy features to existing policyowners whenever possible and practical.²
- Offers a participating long-term care insurance policy and announced a \$8 million dividend for 2010.

Northwestern Long Term Care Insurance Company data as of year-end 2010. Neither the existence nor the amount of a dividend is guaranteed in any given year. Decisions with respect to the determination and allocation of divisible surplus are left to the discretion and sound business judgment of the Board of Directors. There is no guaranteed specific method or formula for the determination and allocation of divisible surplus. Northwestern Long Term Care Insurance Company's approach is subject to change. Any dividend paid will be used to reduce future premiums, or if not so used because the policy is in a non-premium paying status, will be accumulated as a premium refund which may not exceed the aggregate premiums paid. The cumulative premium refund will be paid to the insured at the earlier of cancellation or termination of the policy or death of the insured. Premiums can increase in the future on a class basis.

¹ FORTUNE, "America's Most Admired Companies," March 16, 2009.

² QuietCare® RR Series policyowners were sent a Benefit Upgrade offer in 2002. This offer included an amendment making their policies participating (eligible to receive dividends if warranted), and an offer to increase their Assisted Living Facility (Residential Care Facilities in California) Maximum Daily Limit from 75% to 100% of Nursing Home Maximum Daily Limit and to include Caregiver Training Benefit. All of these enhancements were offered to policyowners at no additional charge. NLTC policyowners automatically received the Participation Amendment but were required to sign and return the Benefit Upgrade Acceptance Form to the NLTC Administration Office in order to receive the Benefit Upgrade Amendment.

The purpose of this material is for the marketing and solicitation of insurance.

Your state's insurance department may have additional information, including a buyer's guide, explaining long-term care insurance.

Long-term care insurance is triggered by an impairment of at least two activities of daily living, such as, eating, bathing, dressing, or a severe cognitive impairment such as Alzheimer's Disease.

This brochure is not all-inclusive. The policy provides a complete list of benefits, limitations and exclusions. QuietCare® is an individual tax-qualified long-term care insurance policy that is medically underwritten. This material is produced for the marketing and solicitation of insurance. You may be contacted by a financial representative. A financial representative is a licensed insurance agent.

Northwestern Long Term Care Insurance Company · A subsidiary of The Northwestern Mutual Life Insurance Company · Milwaukee, WI
www.nmfn.com

90-2422 LTC (1010)
Policy forms TT.LTC.(1010) and TT.LTC.ML.(1010).
Form RS.LTC.ML.(0708) is only available in New Jersey, New York, Ohio and Pennsylvania.

 **Northwestern Long Term Care Insurance Company™**
A Northwestern Mutual Company

A Choice Worth Making

Prepare for your future by protecting your options



 **Northwestern Long Term Care Insurance Company™**
A Northwestern Mutual Company

How Protected Are You?

If you had a need for long-term care, do you have the income stream to pay the potential costs? Would you have to divest some of your assets to pay for this type of care? And, if so, how would your financial future look?

What other choices do you have to help pay for long-term care?

- Medicare generally does not cover long-term care.
- Medicaid³ is for those individuals who are at or below the poverty level.
- Self-funding long-term care could deplete retirement resources or the value of your estate as prices for care continue to increase.

There are many other ways to fund long-term care expenses that your financial representative can discuss with you, including ...*

Long-Term Care Insurance

Long-term care insurance helps to provide funding for these potential costs and should be considered as an integral part of any retirement plan. And if you take the steps to prepare yourself, you will provide yourself with the ability to make choices for your care in the future.

The QuietCare® Solution

QuietCare® is a participating comprehensive tax-qualified long-term care insurance plan from the Northwestern Long Term Care (NLTC) Insurance Company, a Northwestern Mutual company.⁴

³ Also referred to as Medi-Cal in California.

* A financial representative is a licensed insurance agent.

⁴ QuietCare® is intended to be a tax-qualified long-term care insurance policy.

QuietCare® provides coverage in:⁵

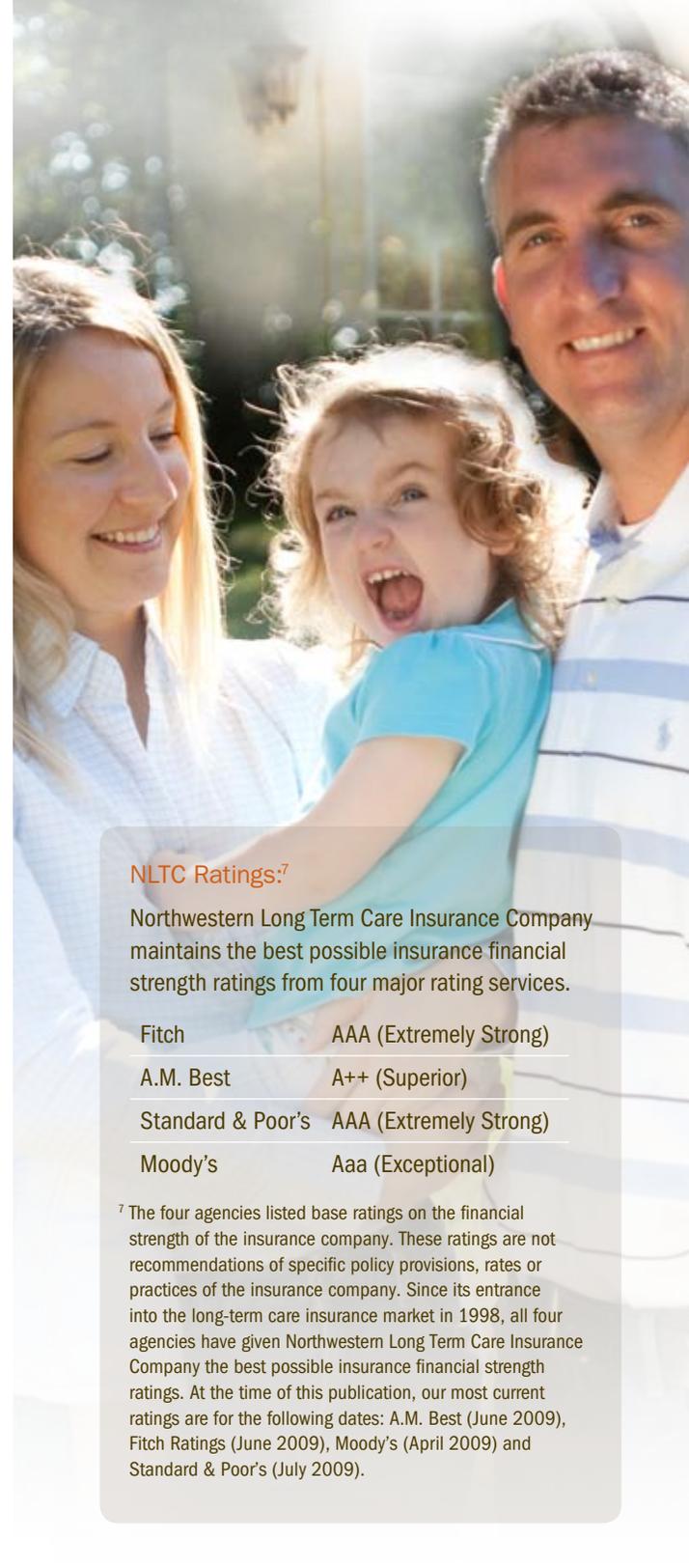
- The home
- The community (Adult Day Care)
- Hospice Care Programs (home or facilities)
- Alternate living facilities or
- Nursing facility

QuietCare® may give you the flexibility to best suit your care needs through the development of an alternate plan of care.⁶ Such a plan may reimburse costs for services and devices that could help keep you at home, such as durable medical equipment, home modifications or long-term care services that did not yet exist when your policy was issued. NLTC's experienced and knowledgeable claims personnel will be there to help guide you along your claim process.

This policy has exclusions and limitations.

⁵ Certain state insurance departments require variations in terminology to some policy features. The new terms for the features do not change how the features operate. Such changes may be "Adult Day Health Care Centers" or "Adult Day Care Facilities" replacing "Adult Day Care Centers," "Assisted Living Facilities" replacing "Alternate Living Facilities". In California, "Residential Care Facilities" replaces "Alternate Living Facilities." In Oregon, Alternate Living Facilities may also include Adult Foster Care Homes.

⁶ A written agreement between a licensed healthcare practitioner, yourself and Northwestern Long Term Care Insurance Company is required. In California, the policy has a provision for 'Benefits Not Listed', instead of an alternative plan of care. A stay in a nursing home or residential care facility might be avoided or postponed through the development of benefits not listed. You may request reimbursement of expenses incurred for Qualified Long-Term Care Services received through other means. The Company may, in its sole discretion, elect to provide your requested benefits.



NLTC Ratings:⁷

Northwestern Long Term Care Insurance Company maintains the best possible insurance financial strength ratings from four major rating services.

Fitch	AAA (Extremely Strong)
A.M. Best	A++ (Superior)
Standard & Poor's	AAA (Extremely Strong)
Moody's	Aaa (Exceptional)

⁷ The four agencies listed base ratings on the financial strength of the insurance company. These ratings are not recommendations of specific policy provisions, rates or practices of the insurance company. Since its entrance into the long-term care insurance market in 1998, all four agencies have given Northwestern Long Term Care Insurance Company the best possible insurance financial strength ratings. At the time of this publication, our most current ratings are for the following dates: A.M. Best (June 2009), Fitch Ratings (June 2009), Moody's (April 2009) and Standard & Poor's (July 2009).

Long-Term Care Insurance



Offered through Northwestern Long Term Care Insurance Company

If you had a need for long-term care, do you have the income stream to pay the potential costs? Would you have to divest some of your assets to pay for this type of care?

There are ways to fund long term care expenses that can help provide for the possibility that you may need care in the future, including long term care insurance.

Long term care insurance can help to provide funding for potential costs and should be considered as part of any retirement plan. And if you take the steps today, you will provide yourself with the ability to make choices for your care in the future.

Long-Term Care insurance provides benefits in the event of a long-term illness or injury. Owning a long-term care insurance policy also provides you choices in deciding where or how you receive care. It helps pay for benefits for care that is delivered in your home, in the community, in adult day care centers,* in alternate living facilities* or in nursing facilities.

QuietCare® is a participating long-term care insurance policy from the Northwestern Long Term Care Insurance Company, a subsidiary of The Northwestern Mutual Life Insurance Company.**

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Northwestern Long Term Care Insurance Company's long-term care insurance policy contains exclusions and limitations.

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NM-LTC-001 (1010)

Long Term Care Insurance

Are your most important assets protected?

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[Overview](#)
[The Basics](#)
[Costs](#)
[Your Options](#)
[Choosing a Policy](#)

Long-term Care Overview

You spend a lifetime working hard and saving for the future to ensure your family's financial security. You purchase life insurance or disability insurance, make investments and contribute to your retirement plan. And, while you can't predict the future, you can continue to plan for it.

There are several important issues you can consider when planning for the possibility that you may need care in the future.

Living Longer

As a result of people living longer, the chances of needing long-term care increases.

- Advances in medicine and healthcare
- Healthier lifestyles

Changing Family Demographics

As family demographics change, you may need to explore other long-term care options.

- Dual-income families
- "Sandwich Generation" – people potentially caring for aging parents while rearing their own children
- Families more commonly spread across the country

Long-term Care Costs

The increasing cost of long-term care now and in the future can be significant.

- Home health care
- Assisted living facility
- Private room in a nursing home

Expecting the Unexpected

Individuals of any age may experience the need for long-term care due to:

- a chronic illness like Multiple Sclerosis
- a cognitive impairment including early onset dementia, or
- the results of an accident like paralysis

By starting to consider our options early in life while in good health, we can help protect against the unexpected need for care now and in the future.

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NM-LTC-002 (1010)

Long-Term Care Insurance



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NM-LTC-001 (1010)

- Overview
- The Basics
- Costs
- Your Options
- Choosing a Policy

Long-term Care Basics

Learn about what to factor when considering long-term care or how long-term care insurance can protect your family's financial security.

What are your options for long-term care?

[View a presentation](#) to learn more about your options for long-term care or [read an article](#) to help you better understand whether long-term care insurance is right for you.

What is long-term care?

Long-term care refers to services that individuals suffering from a chronic illness, disabling condition, or cognitive impairment rely upon. These services are generally needed for an extended period of time and may not "cure" or "heal" the individual receiving them. Long-term care services help with routine activities such as bathing, dressing, and eating.

How is long-term care different from other Medical Care?

Rehabilitative medical care due to acute conditions is different from long-term care. When medical care is the result of an acute, or short term, medical condition (e.g. hip replacements, strokes, or cancer), a hospital stay is often necessary to help stabilize the condition. If patients have not made a full recovery, they are normally discharged to the care of a nursing facility, or to the supervision of professional home care. With these types of conditions, Medicare (for qualifying individuals) or private-pay health insurance will usually pay for rehabilitative care.

Who Provides Care

Receiving care at home

When determining the appropriate plan of care, physicians often look to the client's home as the preferred location. Not only is it familiar to the patient, but it also promotes emotional well-being for the entire family.

The most common providers of home care are family and friends. Their assistance is not always available on a 24 hours a day basis. When extensive care is required, the family may decide to hire a qualified home health care providers* such as registered nurses, physical therapists or licensed social workers.

Community Care

To assist those individuals whose informal caregivers such as family or friends work during the day, and may be unable to provide ongoing care, Adult Day Care Facilities** may be a practical alternative. Designed to promote social interaction while meeting the health care needs of long-term care recipients, adult day care offers caregivers the time necessary to meet their own day-today responsibilities at home and at work.

Alternate Living Facility***

Moving a loved one into a facility can be stressful and time consuming. To make an informed decision, it is important to know the choices of facilities available in your area.

An Alternative Living Facility may be a better option for you if the care you need cannot be provided in your home.

- Meet a wide range of individual needs within a residential-type setting.
- Ongoing care on a 24 hour basis.
- Assistance with everyday activities like dressing, bathing and meal preparation.

Nursing Homes

Sometimes care in nursing homes is needed. A nursing home is a facility that is primarily in the business of providing licensed nursing care on a 24 hour basis. As the cost of hospitalization increases, many people complete their recovery in nursing homes.

- Offer a less expensive alternative to some types of care and therapies formerly available only in a hospital.
- Some nursing home residents stay long enough to regain their independence and then return home.
- Others may find they continue to need assistance throughout the day and remain at the nursing home for extended periods of time.

What is Long-Term Care Insurance?

Long-term care insurance enables you to receive care in your home, the community, an alternate living facility (e.g. Alzheimer's Facility), or in a nursing facility. It also helps protect you from depleting your assets and diverting your retirement income in order to receive the necessary care.

Is long-term Care Insurance Right for you?

People consider purchasing long-term care insurance for a variety of reasons. Some buy to preserve assets they have worked hard to accumulate. For others, long-term care insurance offers a sense of independence – freedom from having to rely on children or the government to provide care. Given the option, many would prefer that the family was there for support, not as primary care providers.

Regardless of the reason you're considering long-term care insurance, it can afford those who purchase it a greater sense of financial security and freedom of choice when it's needed most.

* In states that do no license or certify these providers, other guidelines may apply. Providers may vary by state.

**Also known as Residential Care Facilities (California only) or Assisted Living Facilities

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NM-LTC-003 (1010)

Long-Term Care Insurance



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NM-LTC-001 (1010)

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Long-term Care Costs

The cost of long-term care varies widely by region and can often be underestimated and may have a larger impact on your assets than you realize.

What does long-term care cost in your area?

To get a better idea of costs you may encounter, find out the [Cost of Long-Term Care](#) in your area or view a summary of the [Cost of Long-term Care nationwide](#).

How much would a future long-term care event cost?

No one likes to think about a long-term care event, but considering your options while you're healthy is the best time to plan.

Use the [LTC Cost Calculator](#) to better understand the potential cost of a long-term care event and how it can vary by age, where the care takes place and the length of care.

Ask yourself the following:

- Could your present income and assets pay for your long-term care expenses today, in 10 years or in 30 years?
- How might that potential cost impact your college funding, charitable giving or estate planning goals?
- If the income generated before and during retirement is unable to keep pace with the increasing cost of care in your area, where might the additional dollars come from?

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NM-LTC-004 (1010)

Long-Term Care Insurance



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NM-LTC-001 (1010)

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Your Options

How would you pay for care if the need arises? What are your options? It's important to consider all options and resources available to you for long-term care assistance.

Family

Family members often take on the responsibility of caring for a loved one. Care from a family member is not usually the planned option, but rather the result of a sudden need. Given the option, many would prefer that the family was there for support, not as primary care providers.

Disability Income Insurance

Disability income insurance is designed to replace lost income and pay for every day expenses, such as your mortgage and bills, but is not specifically designed to provide the funds for the additional cost of long-term care services.

Medicare and Health Insurance

For most Americans, Medicare becomes your health insurance at age 65. It is designed to pay for medically necessary skilled care for acute, short-term conditions such as broken bones, emergency surgery or a heart attack. Chronic medical conditions evolve over longer periods of time and generally require non-skilled and non-medical care. "Medicare and most health insurance plans, including Medigap (Medicare Supplement Insurance) policies don't pay for this type of care, also called 'custodial care'."¹

However, under Medicare Part A, if you meet certain criteria after being discharged from the hospital, skilled nursing facility services may be covered – up to 100 days, 100% for the first 20 days. From 21-100 days, Medicare requires a co-payment.

Medicaid

Medicaid² is a state-administered government-funded program that pays health care expenses for low-income individuals. If eligibility requirements are met, Medicaid can pay for nursing facility and limited home health care services. The recipient must meet the state's eligibility requirements.

Your Income and Assets

Assuming an estimated annual cost of home health care of [\$84,680 in 2008] and rising at the rate of 5% per year due to inflation, to pay for an average claim a 55 year-old would need to accumulate [\$2,000,000] by the time he or she reaches age 85.

Source of cost of care is the Northwestern Long Term Care Cost of Care Survey. November 2008. Long Term Care Group, Inc.

Long-Term Care Insurance

Only long-term care insurance is designed to reimburse some of the costs of receiving various levels of care for chronic conditions. Owning a long-term care insurance policy provides you options in deciding where or how you receive care and how much and what type of care you can receive in either:

- Your home
- The community
- Adult day care centers*
- Alternate Living Facility*
- Nursing Home

Long-term care insurance can help to:

- provide funding for potential costs and should be considered an integral part of your retirement plan.
- preserve your income and assets by helping pay for your care through your policy, and not out of your pocket.
- fit a wide range of your needs and budget. The earlier you include long-term care insurance in your overall plan, the lower your premium and the higher the likelihood you will medically qualify for the coverage.

1 "Medicare and You 2010", Department of Health and Human Services, 2010

2 Also referred to as Medi-Cal in California, MassHealth in Massachusetts, and TennCare Medicaid in Tennessee.

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NM-LTC-005 (1010)

Personal: Annuities

Long-Term Care Insurance



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NM-LTC-001 (1010)

Overview	The Basics	Costs	Your Options	Choosing a Policy
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Choosing a Policy

Today's long-term care policies offer a variety of payment options, discounts, and optional benefits with many features.

When choosing a long-term care insurance policy, you'll want to determine the following:

- How much does the policy pay for different levels of care?
- When does the policy start to pay and for how long?
- Does the policy cover costs of receiving various level of care for chronic conditions either in your home, in the community, in an alternate living facility* (e.g. Alzheimer facility) or in a nursing home?
- What protection does the policy offer against the effects of inflation?
- Is it a participating policy?
- Does the company have a history of offering upgrades and enhancements to existing policyowners when a new policy is introduced?

Taking this action will enable you to make a good, informed decision in choosing long-term insurance coverage that best meets your long-term care needs while providing a sense of financial security.

The Northwestern Long Term Care Advantage

Choosing long-term care insurance is a personal and important decision. Evaluating your financial situation, with the assistance of a trusted, knowledgeable representative, a solid carrier and your family will enable you determine which coverage is most appropriate. Consider our:

- Financial Strength
- Stability
- Policyowner Value

Financial Strength

Financial strength is fundamental to Northwestern Long Term Care Insurance Company's vision for policyowners. Northwestern Long Term Care Insurance Company, a wholly owned subsidiary of The Northwestern Mutual Life Insurance Company, maintains the best possible insurance financial strength ratings from all four major rating services.

Ratings are for Northwestern Mutual Life Insurance Company and Northwestern Long Term Care Insurance Company, as of the most recent review and report by each rating agency. Northwestern Mutual's ratings: Moody's Aaa, 3/2010; Standard & Poor's AAA, 3/2010; Fitch Ratings AAA, 6/2009; and A.M. Best Company A++, 3/2010.

Stability

We take a long-term perspective by placing policyowner interest first. The pricing of our long-term care insurance reflects our:

- low lapse assumptions, which anticipates that our policyowners will keep and use their policies
- resulting better cash flow for investments
- ability to invest in a diversified investment portfolio with a long-term horizon, allowing for better stability when short-term fluctuations exist in the market.

We are committed to providing a steady, stable and lasting value.

Policyowner Value

Long-term care insurance policies issued by Northwestern Long Term Care Insurance Company are "participating" policies, which means that they are eligible for dividends. Our philosophy is to pay the highest level of dividends possible while still maintaining a strong surplus position. **

As new and enhanced benefits to QuietCare® policies become available in the future, it is our ambition to make sure that existing policyowners are given the opportunity to acquire them at an appropriate premium, whenever possible and practical. This is an important consideration when purchasing a product that may not be needed for 20, 30, or 40 years.

Your Strong Partner

Make the right choice for your long term care needs with the expert guidance of a financial representative*** who can help you reach your financial goals by:

- thorough fact-finding.
- providing guidance on short – and long-term goals.
- recommending the right products and services at the right time.
- revisiting your needs and goals regularly.

We can help protect against the unexpected need for care now and in the future.

*Also known as Residential Care Facilities (California only) or Assisted Living Facilities.

**Neither the existence nor the amount of a dividend is guaranteed in any given year. Decisions with respect to the determination and allocation of divisible surplus are left to the discretion and sound business judgment of the Board of Directors. There is no guaranteed specific method or formula for the determination and allocation of divisible surplus.

Northwestern Long Term Care Insurance Company's approach is subject to change. Any dividend paid will be used to reduce future premiums, or if not so used because the policy is in a non-premium paying status, will be accumulated as a premium refund which may not exceed the aggregate premiums paid. The cumulative premium refund will be paid to the insured at the earlier of cancellation or termination of the policy or death of the insured. Dividends paid on long-term care policies will be used to reduce the cost of future premiums, or if not so used because the policy is in a non-premium paying status, will be accumulated as a premium refund which may not exceed the aggregate premiums paid. The cumulative premium refund will be paid to the insured at the earlier of cancellation or termination of the policy or death of the insured.

***A financial representative is a licensed insurance agent.

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NM-LTC-006 (1010)

NM-LTC-006 (1010)

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Multilife Long-Term Care Insurance

Select Your State:

Select... 

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Northwestern Long Term Care Insurance Company, a subsidiary of The Northwestern Mutual Life Insurance Company offers individual long-term care insurance with a MultiLife discount. Endorsing long-term care insurance to employees and their families can help promote goodwill.

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NM-LTC-007 (1010)

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