

SERFF Tracking Number: SFCM-128479816 State: Arkansas
 Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number:
 Company Tracking Number: IH-LTARGIP
 TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
 Product Name: 2012 Partnership Long-Term Care Rate Quote
 Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Filing at a Glance

Company: State Farm Mutual Automobile Insurance Company

Product Name: 2012 Partnership Long-Term Care Rate Quote SERFF Tr Num: SFCM-128479816 State: Arkansas

TOI: LTC03I Individual Long Term Care SERFF Status: Closed-Filed State Tr Num:
 Sub-TOI: LTC03I.004 Partnership Co Tr Num: IH-LTARGIP State Status: Filed-Closed
 Filing Type: Advertisement Reviewer(s): Donna Lambert
 Authors: Tammie Mills, Sherry Boitnott Disposition Date: 06/22/2012
 Date Submitted: 06/15/2012 Disposition Status: Filed
 Implementation Date Requested: 09/09/2012 Implementation Date:

State Filing Description:

General Information

Project Name: 2012 Partnership Long-Term Care Rate Quote
 Project Number: IH-LTARGIP
 Requested Filing Mode: Review & Approval

Explanation for Combination/Other:
 Submission Type: New Submission
 Overall Rate Impact:

Deemer Date:
 Submitted By: Tammie Mills
 Filing Description:

Re: State Farm Mutual Automobile Insurance Company
 Individual Accident and Health
 NAIC #176-25178
 Partnership Long Term Care Rate Quote for AR
 Form #: IH-LTARGIP

Status of Filing in Domicile: Not Filed
 Date Approved in Domicile:
 Domicile Status Comments: We are not required to file LTC material in Illinois.
 Market Type: Individual
 Individual Market Type:
 Filing Status Changed: 06/22/2012
 State Status Changed: 06/22/2012
 Created By: Tammie Mills
 Corresponding Filing Tracking Number:

Forms#	Form Name	Replaces	Approved	Tracking#
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SERFF Tracking Number: SFCM-128479816 State: Arkansas
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 Product Name: 2012 Partnership Long-Term Care Rate Quote
 Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP
 IH-LTARGIP General Information page IH-LTARGI.3 5/31/2012 SFCM-128395081
 IH-LTARCIP Coverage Information page IH-LTARCI2.4 5/31/2012 SFCM-128395081
 IH-LTARRQP Long Term Care-Your Quote IH-LTARRQ.4 5/31/2012 SFCM-128395081

Enclosed for filing on behalf of the State Farm Mutual Automobile Insurance Company of Bloomington, Illinois are the referenced Long Term Care internet rate quote pages. These forms are being filed for informational purposes in your state.

These pages are considered an Invitation to Contract.

The Welcome Page, ICC11-IH-LTWELC, which is part of the flow, was approved in your state September 26, 2011 under SERFF# SFCM-127620656. This form will be used countrywide including the Compact states. Therefore the form number is generic as possible so that it can work in all states.

The entire flow has been attached to the Supporting Documentation tab.

Your state approved the LTC Partnership Rider, 99717AR, on March 29, 2012 under SERFF #: STFH-128148464.

The format and colors that are on the internet pages are variable and may change from year to year.

We are not required to file Long Term Care marketing pieces in Illinois.

The anticipated effective date of these forms will be September 9, 2012

State Narrative:

Company and Contact

Filing Contact Information

Tammie Mills, Analyst tammie.mills.csag@statefarm.com
 One State Farm Plaza 309-994-0300 [Phone]
 Bloomington, IL 61710-0001

Filing Company Information

State Farm Mutual Automobile Insurance Company CoCode: 25178 State of Domicile: Illinois
 One State Farm Plaza Group Code: 176 Company Type:
 Laura Walters / Marketing D-3 Group Name: State ID Number:

SERFF Tracking Number: SFCM-128479816 State: Arkansas
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Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP
Bloomington, IL 61710 FEIN Number: 37-0533100
(309) 763-8104 ext. [Phone]

Filing Fees

Fee Required? Yes
Fee Amount: \$150.00
Retaliatory? No
Fee Explanation: 3 forms @ \$50.00 per form = \$150.00
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
State Farm Mutual Automobile Insurance Company	\$150.00	06/15/2012	60183092

SERFF Tracking Number: SFCM-128479816 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Donna Lambert	06/22/2012	06/22/2012

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Donna Lambert	06/19/2012	06/19/2012	Tammie Mills	06/20/2012	06/20/2012
Pending Industry Response	Donna Lambert	06/18/2012	06/18/2012	Tammie Mills	06/18/2012	06/18/2012
Pending Industry Response	Donna Lambert	06/18/2012	06/18/2012	Tammie Mills	06/18/2012	06/18/2012

SERFF Tracking Number: SFCM-128479816 *State:* Arkansas
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Company
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Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Disposition

Disposition Date: 06/22/2012

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: SFCM-128479816 State: Arkansas
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document (revised)	AR LTC Partnership Rate Quote-Entire flow	Filed	Yes
Supporting Document	AR LTC Partnership Rate Quote-Entire flow	Replaced	Yes
Supporting Document	Cover letter	Filed	Yes
Form (revised)	Genral Information page	Filed	Yes
Form	Genral Information page	Replaced	Yes
Form (revised)	Coverage Information page	Filed	Yes
Form	Coverage Information page	Replaced	Yes
Form (revised)	Long Term care Insurance-Your Quote	Filed	Yes
Form	Long Term care Insurance-Your Quote	Replaced	Yes

SERFF Tracking Number: SFCM-128479816 State: Arkansas
Filing Company: State Farm Mutual Automobile Insurance State Tracking Number:
Company
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TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 06/19/2012
Submitted Date 06/19/2012
Respond By Date 07/19/2012

Dear Tammie Mills,

Thank you for your responses to the objections. I have one other concern.

Objection 1

- AR LTC Partnership Rate Quote-Entire flow (Supporting Document)
- Long Term care Insurance-Your Quote, IH-LTARRQP (Form)

Comment: I think it would be confusing to consumers to have the sentence "For more detailed information, please read the Additional Information page," when the Additional Information page won't be used in Arkansas. When the consumer clicks on the Additional Information page link, will it just not open? I think that sentence should be removed. Do you agree?

Additionally, thank you for your explanation regarding the Welcome Page. I see you did explain that in the Filing Description.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Donna Lambert

SERFF Tracking Number: SFCM-128479816 State: Arkansas
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Company
Company Tracking Number: IH-LTARGIP
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Response Letter

Response Letter Status Submitted to State
Response Letter Date 06/20/2012
Submitted Date 06/20/2012

Dear Donna Lambert,

Comments:

We are responding to the objection that we recently received.

Response 1

Comments: Thank you for pointing your concern out. We have removed the "Additional Information" link from all of the pages and we updated the attached PDF's under the Form's Tab . We have also updated the flow w/the updated pages under the Supporting Doc. Tab

Related Objection 1

Applies To:

- Long Term care Insurance-Your Quote, IH-LTARRQP (Form)
- AR LTC Partnership Rate Quote-Entire flow (Supporting Document)

Comment:

I think it would be confusing to consumers to have the sentence "For more detailed information, please read the Additional Information page," when the Additional Information page won't be used in Arkansas. When the consumer clicks on the Additional Information page link, will it just not open? I think that sentence should be removed. Do you agree?

Additionally, thank you for your explanation regarding the Welcome Page. I see you did explain that in the Filing Description.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: AR LTC Partnership Rate Quote-Entire flow

Comment:

Form Schedule Item Changes

SERFF Tracking Number: SFCM-128479816 State: Arkansas
 Filing Company: State Farm Mutual Automobile Insurance State Tracking Number:
 Company
 Company Tracking Number: IH-LTARGIP
 TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
 Product Name: 2012 Partnership Long-Term Care Rate Quote
 Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Form Name	Form Number	Edition Date	Form Type	Action	Action Specific Data	Readability Score	Attach Document
Genral Information page	IH-LTARGIP		Advertising	Revised	IH-LTARGI.3		IH-LTARGIP.pdf
Previous Version							
Genral Information page	IH-LTARGIP		Advertising	Revised	IH-LTARGI.3		IH-LTARGIP.pdf
Coverage Information page	IH-LTARCIP		Advertising	Revised	IH-LTARCIP.4		IH-LTARCIP.pdf
Previous Version							
Coverage Information page	IH-LTARCIP		Advertising	Revised	IH-LTARCIP.4		IH-LTARCIP.pdf
Long Term care Insurance-Your Quote	IH-LTARRQP		Advertising	Revised	IH-LTARRQ.4		IH-LTARRQP.pdf
Previous Version							
Long Term care Insurance-Your Quote	IH-LTARRQP		Advertising	Revised	IH-LTARRQ.4		IH-LTARRQP.pdf

No Rate/Rule Schedule items changed.

Thank you.

Sincerely,
 Sherry Boitnott, Tammie Mills

SERFF Tracking Number: SFCM-128479816 State: Arkansas
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Company
Company Tracking Number: IH-LTARGIP
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 06/18/2012
Submitted Date 06/18/2012
Respond By Date 07/18/2012

Dear Tammie Mills,

I did not see the "Additional Information" screen attached. Please attach it to the Form Schedule. Another \$50 should be added to the filing fee for this form as well.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Donna Lambert

SERFF Tracking Number: SFCM-128479816 State: Arkansas
Filing Company: State Farm Mutual Automobile Insurance State Tracking Number:
Company
Company Tracking Number: IH-LTARGIP
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Response Letter

Response Letter Status Submitted to State
Response Letter Date 06/18/2012
Submitted Date 06/18/2012

Dear Donna Lambert,

Comments:

We are responding to the objection in regards to the "Additional Information" page. This page will no longer be used in Arkansas so that is why it was not part of this filing.

Response 1

Comments: This page will no longer be used in Arkansas so that is why it was not part of this filing. It is not in the flow that we attached under the Supporting Doc tab.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Thank you.

Sincerely,
Sherry Boitnott, Tammie Mills

SERFF Tracking Number: SFCM-128479816 State: Arkansas
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Company
Company Tracking Number: IH-LTARGIP
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 06/18/2012
Submitted Date 06/18/2012
Respond By Date 07/18/2012

Dear Tammie Mills,

This will acknowledge receipt of the captioned filing.

Objection 1

- General Information page, IH-LTARGIP (Form)
- Long Term care Insurance-Your Quote, IH-LTARRQP (Form)

Comment: Please type out the text of the disclosure notice. It is too small to read. Thank you very much.

Objection 2

- AR LTC Partnership Rate Quote-Entire flow (Supporting Document)

Comment: The Welcome Screen should be attached to the Form Schedule, and please type out the disclaimer on this screen if it is different from the disclosures on the other screens.

Please include an additional \$50 filing fee.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Donna Lambert

SERFF Tracking Number: SFCM-128479816 State: Arkansas
Filing Company: State Farm Mutual Automobile Insurance State Tracking Number:
Company
Company Tracking Number: IH-LTARGIP
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Response Letter

Response Letter Status Submitted to State
Response Letter Date 06/18/2012
Submitted Date 06/18/2012

Dear Donna Lambert,

Comments:

We are responding to the objection that we received on 6/18/2012.

Response 1

Comments: The disclosure on IH-LTARGIP reads:

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder, or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent/insurance producer for further details.

For disclosure notice on IH-LTARRQP reads:

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder, or agreement to extend insurance coverage and are based on information you have supplied. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent/insurance producer for further details.

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Filing Company: State Farm Mutual Automobile Insurance State Tracking Number:
Company
Company Tracking Number: IH-LTARGIP
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Related Objection 1

Applies To:

- General Information page, IH-LTARGIP (Form)
- Long Term care Insurance-Your Quote, IH-LTARRQP (Form)

Comment:

Please type out the text of the disclosure notice. It is too small to read. Thank you very much.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 2

Comments: The Welcome Page, ICC11-IH-LTWELC, which is part of the flow, was approved in Arkansas September 26, 2011 under SERFF# SFCM-127620656. This form will be used countrywide including the Compact states. Therefore the form number is generic as possible so that it can work in all states.

Since the Arkansas DOI had already reviewed and approved-we did not think we had to file again. We only included the flow under Supporting Doc tab so that you could see how it all comes together.

The disclaimer is the same for this page as it is on IH-LTARGIP.

Related Objection 1

Applies To:

- AR LTC Partnership Rate Quote-Entire flow (Supporting Document)

Comment:

The Welcome Screen should be attached to the Form Schedule, and please type out the disclaimer on this screen if it is different from the disclosures on the other screens.

Please include an additional \$50 filing fee.

Changed Items:

SERFF Tracking Number: SFCM-128479816 *State:* Arkansas
Filing Company: State Farm Mutual Automobile Insurance *State Tracking Number:*
Company
Company Tracking Number: IH-LTARGIP
TOI: LTC03I Individual Long Term Care *Sub-TOI:* LTC03I.004 Partnership
Product Name: 2012 Partnership Long-Term Care Rate Quote
Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Thank you.

Sincerely,
Sherry Boitnott, Tammie Mills

SERFF Tracking Number: SFCM-128479816 State: Arkansas
 Filing Company: State Farm Mutual Automobile Insurance State Tracking Number:
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 Company Tracking Number: IH-LTARGIP
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Form Schedule

Lead Form Number:

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Filed 06/22/2012	IH- LTARGIP	Advertising Genral Information page	Revised	Replaced Form #: SFCM-128395081 Previous Filing #: IH-LTARGI.3		IH-LTARGIP.pdf
Filed 06/22/2012	IH- LTARCIP	Advertising Coverage Information page	Revised	Replaced Form #: SFCM-128395081 Previous Filing #: IH-LTARCI2.4		IH-LTARCIP.pdf
Filed 06/22/2012	IH- LTARRQP	Advertising Long Term care Insurance-Your Quote	Revised	Replaced Form #: SFCM-128395081 Previous Filing #: IH-LTARRQ.4		IH-LTARRQP.pdf

General Information Screens

Figure 2: Coverage Type Options

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> Compound Inflation Protection (Partnership if Ages 30-79)

Outline of Coverage

Review the [Outline of Coverage](#). This provides detailed information about the Long-Term Care Insurance policy.

I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

[◀ Previous](#)

[Continue ▶](#)

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Figure 3: Glossary: No Inflation Protection (ages 76 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> S <input type="radio"/> C

Outline of Coverage

Review the [Outline of Coverage](#). This provides details on the policy.

I have been given the opportunity to review the Outline of Coverage and accept the rate quote.

The purpose of this communication is the solicitation of business by the insurance producer or insurance company.

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Continue ▶

No Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Automatic inflation protection is not included in the policy, however, it does include a Future Purchase Option that is available at specific ages. This option allows you to increase your maximum daily benefit at an additional cost.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Find an Agent



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Figure 4: Glossary: Simple Inflation Protection (ages 61 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> C

Outline of Coverage

Review the [Outline of Coverage](#). This provides de

I have been given the opportunity to review th
a rate quote.

The purpose of this communication is the solicitation
producer or insurance company.

◀ Previous

Continue ▶

Simple Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Simple Automatic Increase benefit increases the Maximum Daily Benefit by 5% of the original amount and the remaining Maximum Lifetime Benefit amount increases on a proportional amount on each policy anniversary.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Find an



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Figure 5: Glossary: Compound Inflation Protection (ages 30 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> Compound Inflation Protection (Partnership if Ages 30-79)

Outline of Coverage

Review the [Outline of Coverage](#). This provides details.

I have been given the opportunity to review the [Outline of Coverage](#) and accept a rate quote.

The purpose of this communication is the solicitation of business by the insurance producer or insurance company.

[◀ Previous](#)

[Continue ▶](#)

Compound Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Compound Automatic Increase Benefit increases your previous Maximum Daily Benefit and your remaining Maximum Lifetime Benefit by 5% on each policy anniversary to help your coverage keep pace with rising costs of services.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
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Find an Agent



Choose

Coverage Information Screen

Figure 6: Coverage Information

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the daily benefit amount.	<input type="text"/>
Select the number of years your policy will provide benefits, known as the benefit factor .	<input type="text"/>
Select a period of time for which you receive covered qualified Long-Term Care services before payment begins, known as the elimination period .	<input type="radio"/> 30 days <input type="radio"/> 90 days <input type="radio"/> 180 days
To have coverage continue if premiums are not paid subject to certain restrictions, select the non-forfeiture benefit rider .	<input type="radio"/> Yes <input type="radio"/> No

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

[◀ Previous](#) [Continue ▶](#)

NAIC# 25178
IH-LTARCIP

Figure 7: Glossary: Daily Benefit

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select the factor to provide

Daily Benefit

The amount of benefit payable for each day of covered expense.

Select the covered expense before the elimination period.

You should select an amount that is equal to or greater than the average cost of care in the area you expect to receive care. Your State Farm agent can help you select the appropriate daily benefit.

Selecting a higher daily benefit will increase your premium.

To have coverage continue if premiums are not paid subject to certain restrictions, select the **non-forfeiture benefit rider**. Yes No

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
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Figure 8: Glossary: Benefit Factor

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select the number of years your policy will provide benefits, known as the **benefit factor**.

Select a period of time for which covered qualified Long-Term Care before payment begins, known as the **elimination period**.

To have coverage continue if premium not paid subject to certain restrictions, select the **non-forfeiture benefit**.

Benefit Factor

The length of time this policy will provide benefits.

This factor is used to determine the maximum amount payable by your policy for all benefits.

Selecting a longer Benefit Factor will increase your premium.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
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Figure 9: Glossary: Elimination Period

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select as the	Elimination Period
Select provide factor .	It is the number of days in which you receive qualified long-term care services before the policy begins to pay benefits. You will be responsible for paying long-term care services during the Elimination Period.
Select covered before payment begins, known as the elimination period .	Selecting a shorter Elimination Period will increase your premium. <input type="radio"/> 180 days
To have coverage continue if premiums are not paid subject to certain restrictions, select the non-forfeiture benefit rider .	<input type="radio"/> Yes <input type="radio"/> No

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
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Figure 10: Glossary: Non-Forfeiture Benefit Rider

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select the number of years your policy will provide benefits, known as **factor**.

Select a period of time for covered qualified Long-Term Care before payment begins, **elimination period**.

To have coverage continue if you stop paying premiums, select the **non-forfeiture benefit rider**.

Non-Forfeiture Benefit Rider

This rider provides continuation of coverage if you stop paying premiums for your Long-Term Care Insurance policy subject to certain conditions.

Selecting the Nonforfeiture Benefit may substantially increase your premium.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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Rate Quote Screen

Figure 11: Preferred

Long-Term Care - Your Quote

Preferred [Select](#)

Preferred

Thank you for your interest in Long-Term Care Insurance.
This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.
Date quoted: May 15, 2011

<p>With Spousal Discount*</p> <p>\$236.25 /mo**</p> <p>\$1,417.50 /semi-annual</p> <p>Semi-Annual Details</p> <p>Base policy: \$ 1,015.00</p> <p><i>Optional Benefit Riders</i></p> <p>Non-Forfeiture Benefit Rider: \$ 402.50</p> <p>Semi-Annual: \$ 1,417.50</p>	<p>Without Spousal Discount*</p> <p>\$420.67 /mo**</p> <p>\$2,524.00 /semi-annual</p> <p>Semi-Annual Details</p> <p>Base policy: \$ 1,880.00</p> <p><i>Optional Benefit Riders</i></p> <p>Non-Forfeiture Benefit Rider: \$ 644.00</p> <p>Semi-Annual: \$ 2,524.00</p>
---	--

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information [Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information [Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer
The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent for further details.

NAIC# 25178
IH-LTARRQP

Figure 12: Glossary: Preferred

Long-Term Care - Your Quote

Preferred

Select

Preferred

This

Preferred

A preferred rating class is available to those who qualify. The final rate classification will be determined by underwriting based on all insurability factors. Some of the factors considered in the determination are:

- height and weight
- medical history
- tobacco use

For
Date

nce.

ng-Term Care Insurance.

\$236.25 /mo**
\$1,417.50 /semi-annual

Semi-Annual Details

Base policy: \$ 1,015.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 402.50

Semi-Annual: \$ 1,417.50

\$420.67 /mo**
\$2,524.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,880.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 644.00

Semi-Annual: \$ 2,524.00

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent for further details.

NAIC# 25178
IH-LTARRDP

Figure 13: Select

Long-Term Care - Your Quote

Preferred

Select

Select

Thank you for your interest in Long-Term Care Insurance.

This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

Date quoted: May 15, 2011

With Spousal Discount*

\$472.67 /mo**

\$2,836.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,804.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,032.00

Semi-Annual: \$ 2,836.00

Without Spousal Discount*

\$725.80 /mo**

\$4,354.80 /semi-annual

Semi-Annual Details

Base policy: \$ 3,880.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,474.80

Semi-Annual: \$ 4,354.80

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

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Figure 14: Glossary: Select

Long-Term Care - Your Quote

Preferred

Select

Select

Select

Insurable applicants who do not qualify for the Preferred rate will receive the Select rate.

Factors that may affect your eligibility for Long-Term Care Insurance.

Factors that may affect your eligibility for Long-Term Care Insurance.

Long-Term Care Insurance policy series 97062.

Date quoted: May 13, 2011

With Spousal Discount*

\$472.67 /mo**

\$2,836.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,804.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,032.00

Semi-Annual: \$ 2,836.00

Without Spousal Discount*

\$725.80 /mo**

\$4,354.80 /semi-annual

Semi-Annual Details

Base policy: \$ 3,880.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,474.80

Semi-Annual: \$ 4,354.80

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

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General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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SERFF Tracking Number: SFCM-128479816 State: Arkansas
 Filing Company: State Farm Mutual Automobile Insurance State Tracking Number:
 Company
 Company Tracking Number: IH-LTARGIP
 TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
 Product Name: 2012 Partnership Long-Term Care Rate Quote
 Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Supporting Document Schedules

		Item Status:	Status
Satisfied - Item:	AR LTC Partnership Rate Quote- Entire flow	Filed	Date: 06/22/2012
Comments:			
Attachment:			
	AR Filing.pdf		

		Item Status:	Status
Satisfied - Item:	Cover letter	Filed	Date: 06/22/2012
Comments:			
Attachment:			
	IH-LTARRQP Cover Letter 6-14-12.pdf		

Figure 1: Welcome Screen

[Home](#) ▶ [Insurance](#) ▶ [Quotes](#) ▶ Long-Term Care Insurance Rate Quote - State Farm

State Farm Mutual Automobile Insurance Company

Long-Term Care Insurance



Get a Long-Term Care Insurance Quote

The Long-Term Care Insurance Protection You Need

Getting a Long-Term Care Insurance rate quote from State Farm to help pay for the care you need when you can no longer care for yourself.

Get A Quote

Getting your State Farm **Long-Term Care Insurance** quote is simple. Here's what you need to know:

- It takes only a few minutes.
- We'll be asking for basic information like date of birth and coverage preferences.
- After you finish the quote, you can forward your information to a State Farm agent / insurance producer to discuss the next steps.
- At this time, we don't offer **Long-Term Care Insurance** coverage in MA, NJ, RI (U.S.) or in AB, NB, ON (Canada).

NAIC# 25178
ICC11IH-LTCWELC

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Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

General Information Screens

Figure 2: Coverage Type Options

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> Compound Inflation Protection (Partnership if Ages 30-79)

Outline of Coverage

Review the [Outline of Coverage](#). This provides detailed information about the Long-Term Care Insurance policy.

I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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Continue ▶

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Figure 3: Glossary: No Inflation Protection (ages 76 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> S <input type="radio"/> C

Outline of Coverage

Review the [Outline of Coverage](#). This provides details on the policy.

I have been given the opportunity to review the Outline of Coverage and accept a rate quote.

The purpose of this communication is the solicitation of business by the insurance producer or insurance company.

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No Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Automatic inflation protection is not included in the policy, however, it does include a Future Purchase Option that is available at specific ages. This option allows you to increase your maximum daily benefit at an additional cost.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Find an Agent



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Figure 4: Glossary: Simple Inflation Protection (ages 61 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> C

Outline of Coverage

Review the [Outline of Coverage](#). This provides de

I have been given the opportunity to review th
a rate quote.

The purpose of this communication is the solicitation
producer or insurance company.

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[Continue](#)

Simple Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Simple Automatic Increase benefit increases the Maximum Daily Benefit by 5% of the original amount and the remaining Maximum Lifetime Benefit amount increases on a proportional amount on each policy anniversary.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
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Find an



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Figure 5: Glossary: Compound Inflation Protection (ages 30 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> Compound Inflation Protection (Partnership if Ages 30-79)

Outline of Coverage

Review the [Outline of Coverage](#). This provides details.

I have been given the opportunity to review the Outline of Coverage and a rate quote.

The purpose of this communication is the solicitation of business by the insurance producer or insurance company.

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Compound Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Compound Automatic Increase Benefit increases your previous Maximum Daily Benefit and your remaining Maximum Lifetime Benefit by 5% on each policy anniversary to help your coverage keep pace with rising costs of services.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Find an Agent



Choose

Coverage Information Screen

Figure 6: Coverage Information

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the daily benefit amount.	<input type="text"/>
Select the number of years your policy will provide benefits, known as the benefit factor .	<input type="text"/>
Select a period of time for which you receive covered qualified Long-Term Care services before payment begins, known as the elimination period .	<input type="radio"/> 30 days <input type="radio"/> 90 days <input type="radio"/> 180 days
To have coverage continue if premiums are not paid subject to certain restrictions, select the non-forfeiture benefit rider .	<input type="radio"/> Yes <input type="radio"/> No

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
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Figure 7: Glossary: Daily Benefit

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select provide **factor**.

Daily Benefit

The amount of benefit payable for each day of covered expense.

Select covered before p **elimin**:

You should select an amount that is equal to or greater than the average cost of care in the area you expect to receive care. Your State Farm agent can help you select the appropriate daily benefit.

Selecting a higher daily benefit will increase your premium.

To have coverage continue if premiums are not paid subject to certain restrictions, select the **non-forfeiture benefit rider**. Yes No

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
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Figure 8: Glossary: Benefit Factor

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select the number of years your policy will provide benefits, known as the **benefit factor**.

Select a period of time for which covered qualified Long-Term Care before payment begins, known as **elimination period**.

To have coverage continue if premium not paid subject to certain restrictions, select the **non-forfeiture benefit**.

Benefit Factor

The length of time this policy will provide benefits.

This factor is used to determine the maximum amount payable by your policy for all benefits.

Selecting a longer Benefit Factor will increase your premium.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
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Figure 9: Glossary: Elimination Period

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select as the elimination period .	Elimination Period
Select to provide factor .	It is the number of days in which you receive qualified long-term care services before the policy begins to pay benefits. You will be responsible for paying long-term care services during the Elimination Period.
Select coverage before payment begins, known as the elimination period .	Selecting a shorter Elimination Period will increase your premium. <input type="radio"/> 180 days
To have coverage continue if premiums are not paid subject to certain restrictions, select the non-forfeiture benefit rider .	<input type="radio"/> Yes <input type="radio"/> No

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
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Figure 10: Glossary: Non-Forfeiture Benefit Rider

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select the number of years your policy will provide benefits, known as **factor**.

Select a period of time for covered qualified Long-Term Care before payment begins, **elimination period**.

To have coverage continue if you stop paying premiums, select the **non-forfeiture benefit rider**.

Non-Forfeiture Benefit Rider

This rider provides continuation of coverage if you stop paying premiums for your Long-Term Care Insurance policy subject to certain conditions.

Selecting the Nonforfeiture Benefit may substantially increase your premium.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

◀ Previous

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NAIC# 25178
IH-LTARCIP

Rate Quote Screen

Figure 11: Preferred

Long-Term Care - Your Quote

Preferred [Select](#)

Preferred

Thank you for your interest in Long-Term Care Insurance.
This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.
Date quoted: May 15, 2011

<p>With Spousal Discount*</p> <p>\$236.25 /mo**</p> <p>\$1,417.50 /semi-annual</p> <p>Semi-Annual Details</p> <p>Base policy: \$ 1,015.00</p> <p><i>Optional Benefit Riders</i></p> <p>Non-Forfeiture Benefit Rider: \$ 402.50</p> <p>Semi-Annual: \$ 1,417.50</p>	<p>Without Spousal Discount*</p> <p>\$420.67 /mo**</p> <p>\$2,524.00 /semi-annual</p> <p>Semi-Annual Details</p> <p>Base policy: \$ 1,880.00</p> <p><i>Optional Benefit Riders</i></p> <p>Non-Forfeiture Benefit Rider: \$ 644.00</p> <p>Semi-Annual: \$ 2,524.00</p>
---	--

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information [Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information [Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer
The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent for further details.

NAIC# 25178
IH-LTARRQP

Figure 12: Glossary: Preferred

Long-Term Care - Your Quote

Preferred

Select

Preferred

This

Preferred

A preferred rating class is available to those who qualify. The final rate classification will be determined by underwriting based on all insurability factors. Some of the factors considered in the determination are:

- height and weight
- medical history
- tobacco use

For
Date

nce.

ng-Term Care Insurance.

\$236.25 /mo**
\$1,417.50 /semi-annual

Semi-Annual Details

Base policy: \$ 1,015.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 402.50

Semi-Annual: \$ 1,417.50

\$420.67 /mo**
\$2,524.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,880.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 644.00

Semi-Annual: \$ 2,524.00

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

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NAIC# 25178
IH-LTARRQP

Figure 13: Select

Long-Term Care - Your Quote

Preferred

Select

Select

Thank you for your interest in Long-Term Care Insurance.

This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

Date quoted: May 15, 2011

With Spousal Discount*

\$472.67 /mo**

\$2,836.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,804.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,032.00

Semi-Annual: \$ 2,836.00

Without Spousal Discount*

\$725.80 /mo**

\$4,354.80 /semi-annual

Semi-Annual Details

Base policy: \$ 3,880.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,474.80

Semi-Annual: \$ 4,354.80

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent for further details.

NAIC# 25178
IH-LTARROP

Figure 14: Glossary: Select

Long-Term Care - Your Quote

Preferred

Select

Select

Select

Insurable applicants who do not qualify for the Preferred rate will receive the Select rate.

Factors that may affect your eligibility for Long-Term Care Insurance.

Factors that may affect your eligibility for Long-Term Care Insurance.

For more information, contact your State Farm Long-Term Care Insurance policy series 97062.

Date quoted: May 13, 2011

With Spousal Discount*

\$472.67 /mo**

\$2,836.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,804.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,032.00

Semi-Annual: \$ 2,836.00

Without Spousal Discount*

\$725.80 /mo**

\$4,354.80 /semi-annual

Semi-Annual Details

Base policy: \$ 3,880.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,474.80

Semi-Annual: \$ 4,354.80

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

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NAIC# 25178
IH-LTARRQP

**State Farm Mutual Automobile
Insurance Company**

Home Office, Bloomington, Illinois 61710



June 14, 2012

Jay Bradford, Commissioner
1200 West 3rd Street
Little Rock, AR 72201-1904

Re: State Farm Mutual Automobile Insurance Company
Individual Accident and Health
NAIC #176-25178
Partnership Long Term Care Rate Quote for AR
Form #: IH-LTARGIP

<u>Forms#</u>	<u>Form Name</u>	<u>Replaces</u>	<u>Approved</u>	<u>Tracking#</u>
IH-LTARGIP	General Information page	IH-LTARGI.3	5/31/2012	SFCM-128395081
IH-LTARCIP	Coverage Information page	IH-LTARCI2.4	5/31/2012	SFCM-128395081
IH-LTARRQP	Long Term Care Insurance- Your Quote	IH-LTARRQ.4	5/31/2012	SFCM-128395081

Enclosed for filing on behalf of the State Farm Mutual Automobile Insurance Company of Bloomington, Illinois are the referenced Long Term Care internet rate quote pages. These forms are being filed for informational purposes in your state.

These pages are considered an Invitation to Contract.

The Welcome Page, ICC11-IH-LTWELC, which is part of the flow, was approved in your state September 26, 2011 under SERFF# SFCM-127620656. This form will be used countrywide including the Compact states. Therefore the form number is generic as possible so that it can work in all states.

The entire flow has been attached to the Supporting Documentation tab.

Your state approved the LTC Partnership Rider, 99717AR, on March 29, 2012 under SERFF #: STFH-128148464.

The format and colors that are on the internet pages are variable and may change from year to year.

We are not required to file Long Term Care marketing pieces in Illinois.

The anticipated effective date of these forms will be September 9, 2012

Sincerely,
Tammie Mills
Analyst-L/H Contracts & Compliance
1-309-994-0300
e-mail: tammie.mills.csag@statefarm.com

SERFF Tracking Number: SFCM-128479816 State: Arkansas
 Filing Company: State Farm Mutual Automobile Insurance State Tracking Number:
 Company
 Company Tracking Number: IH-LTARGIP
 TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership
 Product Name: 2012 Partnership Long-Term Care Rate Quote
 Project Name/Number: 2012 Partnership Long-Term Care Rate Quote/IH-LTARGIP

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
06/14/2012	Form	Genral Information page	06/20/2012	IH-LTARGIP.pdf (Superseded)
06/14/2012	Form	Coverage Information page	06/20/2012	IH-LTARCIP.pdf (Superseded)
06/14/2012	Form	Long Term care Insurance-Your Quote	06/20/2012	IH-LTARRQP.pdf (Superseded)
06/14/2012	Supporting Document	AR LTC Partnership Rate Quote- Entire flow	06/20/2012	AR Filing.pdf (Superseded)

General Information Screens

Figure 2: Coverage Type Options

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> Compound Inflation Protection (Partnership if Ages 30-79)

For more detailed information, please read the [Additional Information](#) page.

Outline of Coverage

Review the [Outline of Coverage](#). This provides detailed information about the Long-Term Care Insurance policy.

I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

[◀ Previous](#)

[Continue ▶](#)

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Figure 3: Glossary: No Inflation Protection (ages 76 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> S <input type="radio"/> C

For more detailed information, please read the [Additic](#)

Outline of Coverage

Review the [Outline of Coverage](#). This provides de

I have been given the opportunity to review th
a rate quote.

The purpose of this communication is the solicitation
producer or insurance company.

No Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Automatic inflation protection is not included in the policy, however, it does include a Future Purchase Option that is available at specific ages. This option allows you to increase your maximum daily benefit at an additional cost.

See the Outline of Coverage for a complete description of benefits and limitations.

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Continue ▶

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

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Figure 4: Glossary: Simple Inflation Protection (ages 61 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> C

For more detailed information, please read the [Additic](#)

Outline of Coverage

Review the [Outline of Coverage](#). This provides de

I have been given the opportunity to review th
a rate quote.

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[Continue](#)

Simple Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Simple Automatic Increase benefit increases the Maximum Daily Benefit by 5% of the original amount and the remaining Maximum Lifetime Benefit amount increases on a proportional amount on each policy anniversary.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

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Figure 5: Glossary: Compound Inflation Protection (ages 30 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> Compound Inflation Protection (Partnership if Ages 30-79)

For more detailed information, please read the [Additic](#)

Outline of Coverage

Review the [Outline of Coverage](#). This provides de

I have been given the opportunity to review th
a rate quote.

The purpose of this communication is the solicitation
producer or insurance company.

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Compound Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Compound Automatic Increase Benefit increases your previous Maximum Daily Benefit and your remaining Maximum Lifetime Benefit by 5% on each policy anniversary to help your coverage keep pace with rising costs of services.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Find an Agent



Choose

Figure 1: Welcome Screen

[Home](#) ▶ [Insurance](#) ▶ [Quotes](#) ▶ Long-Term Care Insurance Rate Quote - State Farm

State Farm Mutual Automobile Insurance Company

Long-Term Care Insurance



Get a Long-Term Care Insurance Quote

The Long-Term Care Insurance Protection You Need

Getting a Long-Term Care Insurance rate quote from State Farm to help pay for the care you need when you can no longer care for yourself.

Get A Quote

Getting your State Farm **Long-Term Care Insurance** quote is simple. Here's what you need to know:

- It takes only a few minutes.
- We'll be asking for basic information like date of birth and coverage preferences.
- After you finish the quote, you can forward your information to a State Farm agent / insurance producer to discuss the next steps.
- At this time, we don't offer **Long-Term Care Insurance** coverage in MA, NJ, RI (U.S.) or in AB, NB, ON (Canada).

NAIC# 25178
ICC11IH-LTCWELC

[Contact Us](#) | [Privacy Policy](#) | [Terms of Use](#)

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Long-Term Care Insurance Disclaimer

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The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

General Information Screens

Figure 2: Coverage Type Options

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> Compound Inflation Protection (Partnership if Ages 30-79)

For more detailed information, please read the [Additional Information](#) page.

Outline of Coverage

Review the [Outline of Coverage](#). This provides detailed information about the Long-Term Care Insurance policy.

I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

[◀ Previous](#)

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For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Figure 3: Glossary: No Inflation Protection (ages 76 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> S <input type="radio"/> C

For more detailed information, please read the [Additic](#)

Outline of Coverage

Review the [Outline of Coverage](#). This provides de

I have been given the opportunity to review th
a rate quote.

The purpose of this communication is the solicitation
producer or insurance company.

No Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Automatic inflation protection is not included in the policy, however, it does include a Future Purchase Option that is available at specific ages. This option allows you to increase your maximum daily benefit at an additional cost.

See the Outline of Coverage for a complete description of benefits and limitations.

◀ Previous

Continue ▶

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

Find an A



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Figure 4: Glossary: Simple Inflation Protection (ages 61 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> C

For more detailed information, please read the [Additic](#)

Outline of Coverage

Review the [Outline of Coverage](#). This provides de

I have been given the opportunity to review th
a rate quote.

The purpose of this communication is the solicitation
producer or insurance company.

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[Continue ▶](#)

Simple Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Simple Automatic Increase benefit increases the Maximum Daily Benefit by 5% of the original amount and the remaining Maximum Lifetime Benefit amount increases on a proportional amount on each policy anniversary.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

NAIC# 25178
IH-LTARGIP

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Figure 5: Glossary: Compound Inflation Protection (ages 30 thru 79)

General Information

To get the most accurate rate quote, please answer all the questions completely.

State	AR
Are you a current State Farm customer?	<input type="radio"/> Yes <input type="radio"/> No
Date of birth	<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Please Note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.	
Coverage type	<input type="radio"/> No Inflation Protection (Partnership if Ages 76-79) <input type="radio"/> Simple Inflation Protection (Partnership if Ages 61-79) <input type="radio"/> Compound Inflation Protection (Partnership if Ages 30-79)

For more detailed information, please read the [Additic](#)

Outline of Coverage

Review the [Outline of Coverage](#). This provides de

I have been given the opportunity to review th
a rate quote.

The purpose of this communication is the solicitation
producer or insurance company.

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Compound Inflation Protection

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30-79.

Compound Automatic Increase Benefit increases your previous Maximum Daily Benefit and your remaining Maximum Lifetime Benefit by 5% on each policy anniversary to help your coverage keep pace with rising costs of services.

See the Outline of Coverage for a complete description of benefits and limitations.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. If the information used to generate this example changes, or different rates are effective at the time of policy issuance, this rate quote may be revised. Premium rates are subject to change and may be increased, and any rate changes would apply to all policies in the same class in the state where the policy is issued. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent / insurance producer for further details.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

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Choose

Coverage Information Screen

Figure 6: Coverage Information

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the daily benefit amount.	<input type="text"/>
Select the number of years your policy will provide benefits, known as the benefit factor .	<input type="text"/>
Select a period of time for which you receive covered qualified Long-Term Care services before payment begins, known as the elimination period .	<input type="radio"/> 30 days <input type="radio"/> 90 days <input type="radio"/> 180 days
To have coverage continue if premiums are not paid subject to certain restrictions, select the non-forfeiture benefit rider .	<input type="radio"/> Yes <input type="radio"/> No

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

NAIC# 25178
IH-LTARCIP

Figure 7: Glossary: Daily Benefit

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select provide **factor**.

Daily Benefit

The amount of benefit payable for each day of covered expense.

Select covered before p **elimin**:

You should select an amount that is equal to or greater than the average cost of care in the area you expect to receive care. Your State Farm agent can help you select the appropriate daily benefit.

Selecting a higher daily benefit will increase your premium.

To have coverage continue if premiums are not paid subject to certain restrictions, select the **non-forfeiture benefit rider**. Yes No

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
IH-LTARCIP

Figure 8: Glossary: Benefit Factor

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select the number of years your policy will provide benefits, known as the **benefit factor**.

Select a period of time for which covered qualified Long-Term Care before payment begins, known as the **elimination period**.

To have coverage continue if premium not paid subject to certain restrictions, select the **non-forfeiture benefit**.

Benefit Factor

The length of time this policy will provide benefits.

This factor is used to determine the maximum amount payable by your policy for all benefits.

Selecting a longer Benefit Factor will increase your premium.

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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Figure 9: Glossary: Elimination Period

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select as the	Elimination Period
Select provide factor .	It is the number of days in which you receive qualified long-term care services before the policy begins to pay benefits. You will be responsible for paying long-term care services during the Elimination Period.
Select covered before payment begins, known as the elimination period .	Selecting a shorter Elimination Period will increase your premium. <input type="radio"/> 180 days
To have coverage continue if premiums are not paid subject to certain restrictions, select the non-forfeiture benefit rider .	<input type="radio"/> Yes <input type="radio"/> No

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
IH-LTARCIP

Figure 10: Glossary: Non-Forfeiture Benefit Rider

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select the number of years your policy will provide benefits, known as the **factor**.

Select a period of time for covered qualified Long-Term Care before payment begins, **elimination period**.

To have coverage continue if you stop paying premiums, select the **non-forfeiture benefit rider**.

Non-Forfeiture Benefit Rider

This rider provides continuation of coverage if you stop paying premiums for your Long-Term Care Insurance policy subject to certain conditions.

Selecting the Nonforfeiture Benefit may substantially increase your premium.

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
IH-LTARCIP

Rate Quote Screen

Figure 11: Preferred

Long-Term Care - Your Quote

Preferred [Select](#)

Preferred

Thank you for your interest in Long-Term Care Insurance.

This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance. For more detailed information, please read the [Additional Information](#) page.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.
Date quoted: May 15, 2011

<p>With Spousal Discount*</p> <p>\$236.25 /mo**</p> <p>\$1,417.50 /semi-annual</p> <p>Semi-Annual Details</p> <p>Base policy: \$ 1,015.00</p> <p><i>Optional Benefit Riders</i></p> <p>Non-Forfeiture Benefit Rider: \$ 402.50</p> <p>Semi-Annual: \$ 1,417.50</p>	<p>Without Spousal Discount*</p> <p>\$420.67 /mo**</p> <p>\$2,524.00 /semi-annual</p> <p>Semi-Annual Details</p> <p>Base policy: \$ 1,880.00</p> <p><i>Optional Benefit Riders</i></p> <p>Non-Forfeiture Benefit Rider: \$ 644.00</p> <p>Semi-Annual: \$ 2,524.00</p>
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* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information [Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information [Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer
The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent for further details.

NAIC# 25178
IH-LTARRQP

Figure 12: Glossary: Preferred

Long-Term Care - Your Quote

Preferred

Select

Preferred

This For For Date

Preferred

A preferred rating class is available to those who qualify. The final rate classification will be determined by underwriting based on all insurability factors. Some of the factors considered in the determination are:

- height and weight
- medical history
- tobacco use

nce.
ng-Term Care Insurance.

\$236.25 /mo**
\$1,417.50 /semi-annual

Semi-Annual Details

Base policy: \$ 1,015.00
Optional Benefit Riders
Non-Forfeiture Benefit Rider: \$ 402.50
Semi-Annual: \$ 1,417.50

\$420.67 /mo**
\$2,524.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,880.00
Optional Benefit Riders
Non-Forfeiture Benefit Rider: \$ 644.00
Semi-Annual: \$ 2,524.00

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

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General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

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NAIC# 25178
IH-LTARRDP

Figure 13: Select

Long-Term Care - Your Quote

Preferred

Select

Select

Thank you for your interest in Long-Term Care Insurance.

This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance. For more detailed information, please read the [Additional Information](#) page.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

Date quoted: May 15, 2011

With Spousal Discount*

\$472.67 /mo**
\$2,836.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,804.00
Optional Benefit Riders
Non-Forfeiture Benefit Rider: \$ 1,032.00
Semi-Annual: \$ 2,836.00

Without Spousal Discount*

\$725.80 /mo**
\$4,354.80 /semi-annual

Semi-Annual Details

Base policy: \$ 3,880.00
Optional Benefit Riders
Non-Forfeiture Benefit Rider: \$ 1,474.80
Semi-Annual: \$ 4,354.80

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

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NAIC# 25178
IH-LTARROP

Figure 14: Glossary: Select

Long-Term Care - Your Quote

Preferred

Select

Select

Select
 Insurable applicants who do not qualify for the Preferred rate will receive the Select rate.

Factors that may affect your eligibility for Long-Term Care Insurance.
 Factors that may affect your eligibility for Long-Term Care Insurance. See the [Additional Information](#) page.
 State Farm Long-Term Care Insurance policy series 97062.
 Date quoted: May 13, 2011

With Spousal Discount*

\$472.67 /mo**
 \$2,836.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,804.00
 Optional Benefit Riders
 Non-Forfeiture Benefit Rider: \$ 1,032.00
Semi-Annual: \$ 2,836.00

Without Spousal Discount*

\$725.80 /mo**
 \$4,354.80 /semi-annual

Semi-Annual Details

Base policy: \$ 3,880.00
 Optional Benefit Riders
 Non-Forfeiture Benefit Rider: \$ 1,474.80
Semi-Annual: \$ 4,354.80

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
 IH-LTARRQP

Coverage Information Screen

Figure 6: Coverage Information

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the daily benefit amount.	<input type="text"/>
Select the number of years your policy will provide benefits, known as the benefit factor .	<input type="text"/>
Select a period of time for which you receive covered qualified Long-Term Care services before payment begins, known as the elimination period .	<input type="radio"/> 30 days <input type="radio"/> 90 days <input type="radio"/> 180 days
To have coverage continue if premiums are not paid subject to certain restrictions, select the non-forfeiture benefit rider .	<input type="radio"/> Yes <input type="radio"/> No

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

NAIC# 25178
IH-LTARCIP

Figure 7: Glossary: Daily Benefit

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select provide **factor**.

Daily Benefit

The amount of benefit payable for each day of covered expense.

Select covered before p **elimin**:

You should select an amount that is equal to or greater than the average cost of care in the area you expect to receive care. Your State Farm agent can help you select the appropriate daily benefit.

Selecting a higher daily benefit will increase your premium.

To have coverage continue if premiums are not paid subject to certain restrictions, select the **non-forfeiture benefit rider**. Yes No

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
IH-LTARCIP

Figure 8: Glossary: Benefit Factor

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select the number of years your policy will provide benefits, known as the **benefit factor**.

Select a period of time for which covered qualified Long-Term Care before payment begins, known as the **elimination period**.

To have coverage continue if premium is not paid subject to certain restrictions, select the **non-forfeiture benefit**.

Benefit Factor

The length of time this policy will provide benefits.

This factor is used to determine the maximum amount payable by your policy for all benefits.

Selecting a longer Benefit Factor will increase your premium.

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
IH-LTARCIP

Figure 9: Glossary: Elimination Period

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select as the	Elimination Period
Select provide factor.	It is the number of days in which you receive qualified long-term care services before the policy begins to pay benefits. You will be responsible for paying long-term care services during the Elimination Period.
Select covered before payment begins, known as the elimination period.	Selecting a shorter Elimination Period will increase your premium. <input type="radio"/> 180 days
To have coverage continue if premiums are not paid subject to certain restrictions, select the non-forfeiture benefit rider.	<input type="radio"/> Yes <input type="radio"/> No

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
IH-LTARCIP

Figure 10: Glossary: Non-Forfeiture Benefit Rider

Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

Select the daily amount to be paid, known as the **daily benefit** amount.

Select the number of years your policy will provide benefits, known as **factor**.

Select a period of time for covered qualified Long-Term Care before payment begins, **elimination period**.

To have coverage continue if you stop paying premiums, select the **non-forfeiture benefit rider**.

Non-Forfeiture Benefit Rider

This rider provides continuation of coverage if you stop paying premiums for your Long-Term Care Insurance policy subject to certain conditions.

Selecting the Nonforfeiture Benefit may substantially increase your premium.

For more detailed information, please read the [Additional Information](#) page.

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

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NAIC# 25178
IH-LTARCIP

Rate Quote Screen

Figure 11: Preferred

Long-Term Care - Your Quote

Preferred [Select](#)

Preferred

Thank you for your interest in Long-Term Care Insurance.

This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance. For more detailed information, please read the [Additional Information](#) page.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.
Date quoted: May 15, 2011

<p>With Spousal Discount*</p> <p>\$236.25 /mo** \$1,417.50 /semi-annual</p> <p>Semi-Annual Details Base policy: \$ 1,015.00 <i>Optional Benefit Riders</i> Non-Forfeiture Benefit Rider: \$ 402.50 Semi-Annual: \$ 1,417.50</p>	<p>Without Spousal Discount*</p> <p>\$420.67 /mo** \$2,524.00 /semi-annual</p> <p>Semi-Annual Details Base policy: \$ 1,880.00 <i>Optional Benefit Riders</i> Non-Forfeiture Benefit Rider: \$ 644.00 Semi-Annual: \$ 2,524.00</p>
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* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.
** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information [Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information [Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer
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NAIC# 25178
IH-LTARRQP

Figure 12: Glossary: Preferred

Long-Term Care - Your Quote

Preferred

Select

Preferred

This For For Date

Preferred

A preferred rating class is available to those who qualify. The final rate classification will be determined by underwriting based on all insurability factors. Some of the factors considered in the determination are:

- height and weight
- medical history
- tobacco use

nce.
ng-Term Care Insurance.

\$236.25 /mo**
\$1,417.50 /semi-annual

Semi-Annual Details

Base policy: \$ 1,015.00
Optional Benefit Riders
Non-Forfeiture Benefit Rider: \$ 402.50
Semi-Annual: \$ 1,417.50

\$420.67 /mo**
\$2,524.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,880.00
Optional Benefit Riders
Non-Forfeiture Benefit Rider: \$ 644.00
Semi-Annual: \$ 2,524.00

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

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NAIC# 25178
IH-LTARRDP

Figure 13: Select

Long-Term Care - Your Quote

Preferred

Select

Select

Thank you for your interest in Long-Term Care Insurance.

This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance. For more detailed information, please read the [Additional Information](#) page.

For exact terms and conditions see: Long-Term Care Insurance policy series 97062.

Date quoted: May 15, 2011

With Spousal Discount*

\$472.67 /mo**

\$2,836.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,804.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,032.00

Semi-Annual: \$ 2,836.00

Without Spousal Discount*

\$725.80 /mo**

\$4,354.80 /semi-annual

Semi-Annual Details

Base policy: \$ 3,880.00

Optional Benefit Riders

Non-Forfeiture Benefit Rider: \$ 1,474.80

Semi-Annual: \$ 4,354.80

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

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NAIC# 25178
IH-LTARROP

Figure 14: Glossary: Select

Long-Term Care - Your Quote

Preferred

Select

Select

Select
 Insurable applicants who do not qualify for the Preferred rate will receive the Select rate.

Factors that may affect your eligibility for Long-Term Care Insurance. See the [Additional Information](#) page.
 State Farm Long-Term Care Insurance policy series 97062.
 Date quoted: May 13, 2011

With Spousal Discount*

\$472.67 /mo**
 \$2,836.00 /semi-annual

Semi-Annual Details

Base policy: \$ 1,804.00
 Optional Benefit Riders
 Non-Forfeiture Benefit Rider: \$ 1,032.00
Semi-Annual: \$ 2,836.00

Without Spousal Discount*

\$725.80 /mo**
 \$4,354.80 /semi-annual

Semi-Annual Details

Base policy: \$ 3,880.00
 Optional Benefit Riders
 Non-Forfeiture Benefit Rider: \$ 1,474.80
Semi-Annual: \$ 4,354.80

* Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. Spousal includes: Lawfully married individuals, or partners to a legally recognized domestic partnership or civil union.

** An additional charge may be required if the monthly payment option is selected.

[Forward To An Agent](#)

General Information

[Edit](#)

State	AR
Date of birth	11/15/1955
Coverage type	Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)

Coverage Information

[Edit](#)

Daily benefit	\$ 400
Benefit factor	5 years
Elimination period	30 days
Non-forfeiture benefit rider	Yes

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent / insurance producer or insurance company.

Long-Term Care Insurance Disclaimer

The quotes generated by this program are illustrative only and not a contract, binder or agreement to extend insurance coverage and are based on information you have supplied. No money should be sent to State Farm in response to this advertisement. To obtain coverage you must submit an application to State Farm. All applications for coverage are subject to underwriting approval and subject to applicable state and federal law. Upon application approval, coverage can only be effective after payment and receipt of the initial policy-required premium. All policies may not be available in all states. Benefits, exclusions and limitations will apply. Please contact a State Farm agent for further details.

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