

John Hancock

LIFE INSURANCE

John Hancock's Long-Term Care Rider

Technical Guide



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Product Overview

Accelerating the Policy Death Benefit for Long-Term Care Expenses

When added to a permanent John Hancock life insurance policy, the Long-Term Care (LTC) rider¹ allows for a partial monthly acceleration of the policy's death benefit to help pay qualified long-term care expenses. The acceleration of the death benefit may continue until the death benefit is fully exhausted.

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

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

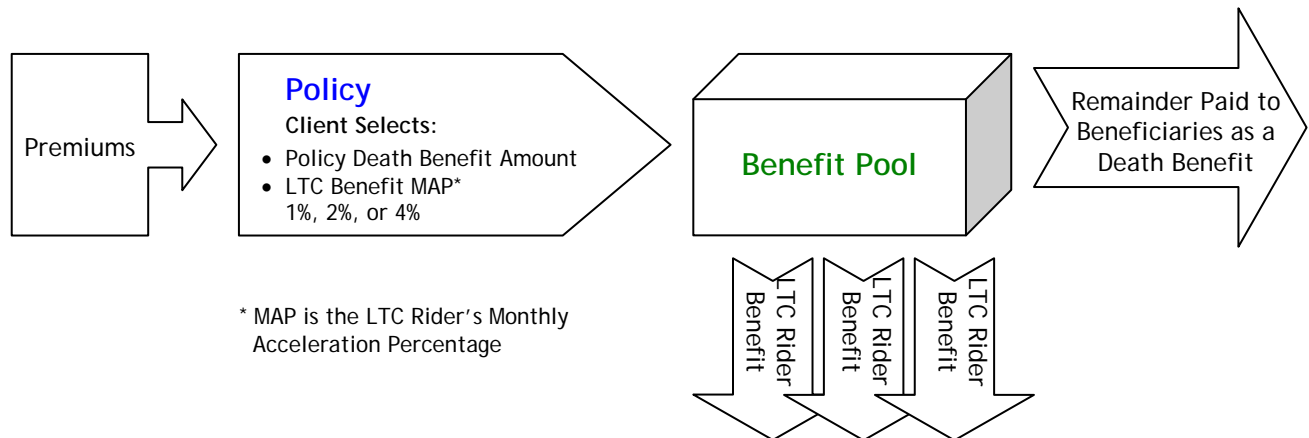
Permanent life insurance with the LTC rider is an innovative and appropriate solution in many situations. However, there are issues clients should consider when deciding if the LTC rider is right for them. The first is whether they have a need for *both* life and long-term care insurance. If there is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

Clients should also consider the following:

- Is there a need for *separate* pools of money for life insurance and long-term care? If there is, separate insurance policies may be more appropriate.
- The LTC rider may not be appropriate if the policy is owned by a business or trust. (See the section on Third-Party Ownership, page 11.)
- Permanent life insurance policies with the LTC rider provide many of the core benefits that separate long-term care insurance policies offer. However, John Hancock's standalone long-term care products offer many additional riders including: Shared Care; an Enhanced Return of Premium at Death rider, a Restoration of Benefits rider and a Waiver of Home Health Care Elimination Period. As you evaluate your clients' needs, you should consider whether your clients would benefit from some of the customized features available only on a standalone LTC policy.
- The LTC rider does not offer an inflation option. However, the LTC rider's Maximum Monthly Benefit Amount is based on the net death benefit of the policy at the time of claim. This monthly benefit will increase over time if the net death benefit increases. By over funding the policy, the owner can create an increasing death benefit and thereby, an increasing LTC rider MMBA (within certain limits). The timing and amount of the death benefit increases will affect the amount of policy value and other non-guaranteed factors.
- The LTC rider does not qualify for the Long-Term Care Partnership Program.

¹ The Long-Term Care (LTC) rider is an accelerated death benefit rider and may not be available in some states. Maximum face amount \$5 million with the LTC rider. The LTC rider is not considered long-term care insurance in some states. When the death benefit is accelerated for long-term care expenses, the death benefit is reduced dollar for dollar, and the cash value is reduced proportionally. The policy account value is also reduced proportionally. There are additional costs associated with this rider. Please go to www.jhsalesnet.com for a complete list of up-to-date state approvals. **For prospective policyholders in New York, this product is a life insurance policy that accelerates the death benefit for qualified long-term care services and is not a health insurance policy providing long-term care insurance subject to the minimum requirements of New York Law, does not qualify for the New York State Long-Term Care Partnership program and is not a Medicare supplement policy.**

How the Long-Term Care Rider Works



Policyholder Elections

At issue, the policy owner selects a desired life insurance Face Amount and LTC rider Monthly Acceleration Percentage (MAP) – either 1%, 2% or 4%. The MAP determines the Maximum Monthly Benefit Amount (MMBA) available to help pay covered long-term care expenses.

To determine the appropriate benefit percentage, consider both the monthly benefit amount desired as well as the possible duration of any long-term care need. The higher the MAP, the greater the amount available each month to cover long-term care expenses but the shorter the duration. If less than the maximum benefit is used in any month, the remainder will extend the rider benefit period. The MAP cannot be changed after issue.

Benefit Amount

The LTC rider benefit is equal to the full life insurance Death Benefit. This benefit is available as either life coverage, long-term care coverage – or some combination of the two. Any unused portion of the LTC rider benefit remains in the policy as a death benefit.

Benefit Flexibility

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

Benefit Assurance

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

² Life insurance death benefit proceeds are generally excludable from the beneficiary's gross income for income tax purposes. There are few exceptions such as when a life insurance policy has been transferred for valuable consideration. No legal, tax or accounting advice can be given by John Hancock, its agents, employees or registered representatives. Prospective purchasers should consult their professional tax advisor for details.

Example 1 – \$500,000 Policy Face Amount with a 2% Monthly Acceleration Percentage:

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

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

Monthly Benefit Options

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

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

Long-Term Care Rider Issue Limits

The LTC rider is available:

- On all John Hancock permanent single life insurance policies except for LifeCare (which has its own form of long-term care coverage)
- Only at issue
- To issue ages 20-80 (policies cannot be backdated to save age 80)

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

- The maximum policy Face Amount varies based on the Monthly Acceleration Percentage selected; for policies with a 1% MAP, the maximum face amount is \$5,000,000; with a 2% MAP, the maximum face is \$2,500,000; and with a 4% MAP, the maximum face is \$1,250,000 (see the table that follows).
- In no event may the policy Face Amount be greater than \$5,000,000 at issue; however, should the policy death benefit increase after issue due to policy performance; the additional death benefit can also be used to help pay for long-term care expenses.
- The LTC rider is not available on policies with Death Benefit Option 2, the Return of Premium (ROP) rider, or Scheduled Supplemental Face Amount (SFA) Increases.
- The LTC rider will not be available if the insured has purchased a LifeCare policy.

Maximum Policy Face Amount Table

The Maximum Policy Face Amount at Issue varies with the Maximum Acceleration Percentage (MAP) selected:

Monthly Acceleration Percentage Selected	Maximum Policy Face Amount at Issue	Maximum Monthly (LTC) Benefit
1%	\$5,000,000	\$50,000
2%	\$2,500,000	\$50,000
4%	\$1,250,000	\$50,000

Long-Term Care Rider Features

- Eligibility for Payment** The insured is eligible to receive Accelerated Benefits if he or she becomes Chronically Ill. For purposes of this rider, Chronic Illness means that:
- The insured is unable to perform – without Substantial Assistance – two of the six Activities of Daily Living that are outlined in the contract (bathing, maintaining continence, dressing, eating, toileting, and transferring). The disability must be expected to last at least 90 days, and be certified by a licensed health care practitioner; or
 - The insured requires Substantial Supervision to protect themselves from threats to health and safety due to a demonstration of Cognitive Impairment.

- Elimination Period** The LTC rider provides long-term care benefits after the satisfaction of an elimination (waiting) period.
- The elimination period begins on the first day that long-term care services are received; this period need only be satisfied once during the life of the policy.
 - The elimination period is generally 100 days; however, it may vary by state.
 - The 100 days do not have to be consecutive; each day of service counts toward the waiting period, regardless of any breaks in service.
 - For Home Care, seven days are counted toward the waiting period as long as at least one day of service was given that week.

- Choice of Setting** Clients may elect to receive long-term care assistance in their choice of setting:
- Home Health Care
 - Assisted Living Facility³
 - Adult Day Care Center
 - Nursing Home
 - Hospice Center

Note that there are exclusions and limitations outlined in the rider contract, including that all covered long-term services must be provided within the United States.

- Bed Hold Benefit** If the insured's stay in a Nursing Home or Assisted Living Facility is interrupted, the Accelerated Benefit can pay the cost of reserving a bed in the facility for up to 10 days per policy year, up to the selected monthly benefit. The number of days may vary by state.

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

Monthly Benefits	The LTC rider pays benefits on a monthly basis which means that all approved charges are paid each month up to the selected monthly benefit regardless of the daily or weekly charges. This is a significant advantage over Daily Benefit Plans, particularly with Home Health Care. Under a Daily Benefit Plan, those charges might exceed the limit on some days during the month causing them to be excluded from reimbursement.
Extension of Benefits Provision⁴	<p>If the rider terminates while the insured is confined to a Nursing Home and receiving continuous, uninterrupted benefits under the rider, the Extension of Benefits Provision guarantees that benefits for the Nursing Home services will continue during the lifetime of the insured until the earliest occurrence of the following:</p> <ul style="list-style-type: none"> • The date that the insured is discharged from the Nursing Home; • The date when the Face Amount remaining after any monthly benefit payment is zero (i.e. the benefit is fully accelerated). <p>If benefits are continued under the Extension of Benefits Provision, the remaining Face Amount (referred to above) is calculated as if the policy had remained in force, however, no Insurance Benefit will be paid to the beneficiary upon death.</p>
Rider Termination	<p>The rider will terminate, and no further benefits will be paid (except as provided in the Extension of Benefits Provision) on the earliest of the date:</p> <ul style="list-style-type: none"> • Of exchange or termination of the policy; • The rider is discontinued on request; • When the face amount remaining after any monthly benefit payment is zero; • A request for an increase in either base face amount or supplemental face amount is approved, if applicable; • A request for a change to policy Death Benefit Option 2 is approved; or • The life insured dies.

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

Additional Features – Long-Term Care Information Services

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

Seniorlink⁵

The insured (and immediate family members) have immediate access to *Seniorlink* which provides professional and personalized advice on topics such as home care, assisted living, home maintenance and repair services, and legal services. *Seniorlink* offers complete resources and advice about care issues. Additional information is available regarding this service in a consumer flyer that may be obtained at www.jhsalesnet.com.

⁴ In **Maine** this provision also applies to Assisted Living Facilities and Home Health Care. In **New Jersey**, there is no restriction on the setting in which care is received. In **Pennsylvania** and **Texas**, this provision also applies to an Assisted Living Facility. In **New York**, this provision also applies to Home Health Care and to care received in a Qualified Nursing Home or Assisted Living Facility.

⁵ *Seniorlink* is not affiliated with John Hancock Life Insurance Company (U.S.A.) and John Hancock Life Insurance Company of New York. Seniorlink is the current referral service provider for John Hancock and can be changed at any time.

Advantage List⁶

The *Advantage List* program provides access to competitive rates at over 10,000 participating providers nationwide. These cost savings can help stretch benefit dollars at selected:

- Home Health Care Providers
- Assisted Living Facilities
- Adult Day Care Facilities
- Nursing Homes
- Hospice Centers
- Providers of Durable Medical Equipment

The *Advantage List* program gives your clients access to some of the best long-term care providers in the country. The administrator of this program is LifePlans, an independent company that specializes in long-term care. They can help your client identify long-term care providers from the categories mentioned above. Please note that LifePlans does not choose the facility – the choice is always up to the client. This program is yet another way that John Hancock helps to maximize the value of your clients' policies.

Please refer to the *Advantage List* flyer for more information regarding this benefit; it is available on www.jhsalesnet.com.

Underwriting

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

- The same underwriting process is used for all single life insurance policies, whether the LTC rider is elected or not; however additional underwriting guidelines are applied for the LTC rider.
- Application Supplement – LTC rider NB5018 must be completed and submitted with the application for life insurance.
- If necessary, an APS may be ordered for more information on a disabling – but not life threatening – disorder.
- Some proposed insureds who are standard or mildly substandard may not qualify for the LTC rider due to morbidity risk.
- If the underlying life insurance policy is rated higher than 175% or has a flat extra, the LTC rider will not be permitted.

Rider Cost

Universal Life & Variable UL Policies

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

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

Commissions

Universal Life & Variable UL Policies

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

⁶ *Advantage List* is not affiliated with John Hancock Life Insurance Company (U.S.A.) and John Hancock Life Insurance Company of New York. *Advantage List* is a current referral service provider for John Hancock and can be changed at any time. *Advantage List* is not available in Puerto Rico.

Long-Term Care Rider Claims

How Claims are Calculated and Paid

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

Accelerated payments continue until the earliest occurrence of the following:

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

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

If the insured recovers (i.e., long-term care claim payments cease) and later files a new claim, the MMBA will not be recalculated at that time; it retains the same value unless a withdrawal or partial surrender also occurred. If a loan⁷ is outstanding at the time of claim payment, a proportionate amount of the MMBA will be used to pay back a portion of the loan. The net amount (Monthly Benefit Payment minus the loan repayment) will be sent to the policy owner as the benefit payment for that month.

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

John Hancock works directly with Providers

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

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

⁷ Loans, withdrawals or partial surrenders will reduce the death benefit, policy value and cash value and may cause the policy to lapse. Lapse or surrender of a policy with a loan may cause the recognition of taxable income. Policies classified as modified endowment contracts may be subject to tax when a loan or withdrawal is made. A federal tax penalty of 10% may also apply if the loan or withdrawal is taken prior to age 59½. Cash value available for loans and withdrawals may be more or less than originally invested.

Long-Term Care Claim Payment Mechanics

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

Example 2 – Decreases at Time of Claim Payment

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

Assumptions:

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

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

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

What if there are loans?

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

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

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

What is the Effect of Monthly Deductions While on Claim?

For universal life or variable universal life policies: Unless the Waiver of Monthly Deductions rider or Disability Payment of Specified Premium rider⁸ is also in effect, all policy and rider charge deductions continue while on claim. The hypothetical example on the next page demonstrates the effect of those charges. The figures shown are for illustrative purposes only.

⁸ The Waiver of Monthly Deductions rider and the Disability Payment of Specified Premium riders are not offered on all products.

Example 3 – Universal Life Policy

The example below assumes the following:

- UL-G
- \$250,000 Total Face Amount
- Male, 45, Preferred Non Smoker risk class
- Paying the Policy Protection Rider premium annually
- LTC claim beginning at age 75, fully reimbursable 2% LTC benefit at \$5,000/month for 50 months

Policy Year	Base Policy Insurance/ Benefit LTC Benefit Pre-Claim	Policy Value ⁹ (Start of Year)	Annual Policy and Rider Charges	LTC Max Monthly Benefit (Annualized)	Net Insurance Benefit Post-Claim
31	250,000	32,468	4,208	60,000	190,000
32	190,000	22,970	3,591	60,000	130,000
33	130,000	14,108	2,706	60,000	70,000
34	70,000	6,445	1,444	60,000	10,000
35	10,000	707	492	10,000 ¹⁰	0
36	0	0	0	0	0

This is a hypothetical example that illustrates the impact of policy and rider charges on fully accelerating the LTC Benefit. This is a supplemental illustration. Not all benefits and values are guaranteed. The assumptions on which the non-guaranteed elements are based are subject to change by the insurer. Actual results may be more or less favorable.

Accessing the Policy Value¹¹

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

Withdrawals/Partial Surrenders

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

Policy Loans

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

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

⁹ The policy value also affects the Cost of Insurance and rider charges

¹⁰ No loans or withdrawals assumed. After month 50, death benefit is fully accelerated.

¹¹ Loans, withdrawals or partial surrenders will reduce the death benefit, policy value and cash value and may cause the policy to lapse. Lapse or surrender of a policy with a loan may cause the recognition of taxable income. Policies classified as modified endowment contracts may be subject to tax when a loan or withdrawal is made. A federal tax penalty of 10% may also apply if the loan or withdrawal is taken prior to age 59½. Cash value available for loans and withdrawals may be more or less than originally invested.

Tax Considerations

Long-Term Care Rider Tax-Qualified

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

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

Effect of Long-Term Care Charges on Cost Basis¹²

Universal Life and Variable Universal Life

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

Third-Party Ownership of a Policy with the LTC Rider

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

Trusts

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

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

Producer Requirements

Licensing, Appointment & Continuing Education

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

Licensing

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

¹² Note that as of January 1, 2010 the IRS will treat charges or premiums for the LTC rider differently. Universal life or variable universal life rider charges as well as whole life rider premiums paid from policy cash value will continue to be reportable distributions, but will no longer be taxable. Rider charges or premiums paid out of the policy's cash value will also continue to be considered policy distributions, and will always reduce the cost basis, even if the policy is a modified endowment contract. These charges/premiums will no longer be considered taxable, even in situations where the policy cost basis was reduced to zero. It is recommended that clients seek the advice of a tax professional for further information on this subject.

authority from your state insurance department.

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

Appointment

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

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

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

Continuing Education

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

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

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

Required Materials at Time of Solicitation

In all states, the following is required:

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

Some states may also require:

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

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

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

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

