

LTC

LONG TERM CARE UPDATE: NEW TAX LAW

Government programs such as Medicare and Medicaid cannot afford to expand to provide long-term care. New legislation has recently been signed into law providing tax advantages for purchasing Long-Term Care protection. This sends a message-

YOU MUST PROVIDE YOUR OWN LONG-TERM CARE!

Specific provisions benefiting consumers most: *Deductible LTC premiums *Tax-Free Benefits *Annual Tax Deductions

***THERE IS NOW AVAILABLE A NEW PLAN THAT WILL PAY FOR YOUR LONG TERM CARE
IF YOU NEED IT OR WILL RETURN YOUR PREMIUM PAYMENTS IF YOU DON'T.**

To receive a complete plan design and learn how the new legislation will benefit you, fill out and return this card today.

Name: _____

Date of Birth: ____/____/____

Spouse: _____

Date of Birth: ____/____/____

Phone: (____)_____

Not affiliated with or endorsed by any government agency.

N05-10-5

Are you in a Partnership State? We have mailers for states that have a Partnership program!!

Medicare Supplement

MEDICARE SUPPLEMENT UPDATE

Every year several Medicare Supplement insurers increase their rates. Some seniors may see an increase of up to 30% on Medicare supplement coverage.

Based on this, there is now available a plan to supplement your Medicare coverage at lower rates for residents over 65 years of age, policies A - G are available.

Send in this card to see if you qualify for premium savings from \$200 - \$500 per year.

Sign: _____

Date of birth: _____

Husband: ____/____/____

Wife: ____/____/____

Phone: (____)_____

Not affiliated with any government agency. Insurance related

S06-7-2Q

2009 MEDICARE HEALTH PLAN UPDATE

Message: You may not be getting all the Medicare benefits for which you are entitled? There are new plans for 2009 that you should be aware of.

You may be missing out on what you are entitled to receive. Return this free card to find out if you currently receive all the benefits you are entitled to. There is no obligation and all the information is FREE!

*2009
Healthcare
Plan*

Please acknowledge by:

Complete information below:

Your Name: _____

Birth Date: ____/____/____

Spouse's Name: _____

Birth Date: ____/____/____

Phone: (____) _____

Not affiliated with any government agency.

S09-10-1

PLEASE VERIFY ADDRESS—RETURN CARD TODAY

Turning 65

MEDICARE OPEN ENROLLMENT QUALIFICATION REQUEST CARD

Message: You will soon be in a unique position when you turn 65. You will be in your "Open Enrollment" period. This means you can choose any Medigap plan, Part D or take advantage of any new plans, without medical questions. The right choices can save you hundreds of dollars each year. Don't delay, you only have one "Open Enrollment." Take advantage of this free review of your healthcare benefits and information about Medicare programs for little or no premium cost.

Please acknowledge by: <<DATE>>

Complete information below:

Your Name: _____

Birth Date: ____/____/____

Spouse's Name: _____

Birth Date: ____/____/____

Phone: (____) _____

County: _____

Not affiliated with any government agency. No cost or obligation.

OE08-10-1

PLEASE VERIFY ADDRESS—RETURN CARD TODAY

*These mail pieces are not approved for all states. Some states will require additional disclaimers.