



SignatureCare® 600

Long Term Care Insurance

A Product Reference Guide

Massachusetts Mutual Life Insurance Company

ICC18 LTC6002P

LTC6002P



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SignatureCare® Base Policy

MassMutual's SignatureCare (SignatureCare) is a long term care insurance policy that provides you the freedom to choose features that help meet your unique and changing needs while helping you protect your assets, your family, and your future from long term care expenses.

Comprehensive Base Policy Design

This policy provides you with the independence to receive care in a familiar home or community based setting or in a facility.

Facility Services Benefit

This benefit pays eligible expenses you incur for care provided in a nursing home facility, assisted living facility or hospice facility.

Facility Bed Reservation Benefit

If you are receiving Facility Services, this benefit reserves your bed in a facility in the event of a temporary absence.

Home and Community Based Services Benefit (HCBS)

This benefit pays eligible expenses you incur for care provided at home (Hospice Care and Home Health Care) or in a community based setting (Adult Day Care) by a licensed or certified home health care agency or a licensed or certified home health care agency or independent home health caregiver.

Live at Home Benefit

This benefit pays eligible expenses you incur for Live at Home Services. Live at Home Services include:

- Emergency Response System Services;
- Ambulance Services;
- Caregiver Training;
- Home Modification; and
- Durable Medical Equipment.

Eligible Live At Home Services must be cost effective and appropriate to your needs. This benefit is not available if you are confined in a nursing facility, assisted living facility or hospice facility.

Respite Care Benefit

This benefit pays for eligible expenses you incur for care provided on a short-term basis to relieve a primary caregiver. Respite Care may be provided in a Nursing Facility, Assisted Living Facility, or in a home or community based setting.

Care Coordination Benefit

This benefit entitles you to the assistance of an approved Care Coordination Services Provider who can help assess and coordinate your overall care needs. There are no additional charges for this voluntary benefit.

Underwriting is necessary for SignatureCare long term care insurance and coverage may also require a medical examination.

Customizing Your SignatureCare Policy

The features and options outlined below are chosen at the time you apply for coverage and are used to determine the benefits available to you under the policy.

Daily Benefit Amount (DBA)

This is the maximum amount your policy may pay on a daily basis. The DBA is available in \$10 increments, from \$100 to \$400 per day.

Total Benefit Amount (TBA)

The TBA is the maximum amount of benefits that may be paid under this policy, not including the Live at Home Benefit or Care Coordination Benefit. The TBA available over the life of the policy is determined by the Benefit Period (BP) (2, 3, 4, 5 or 6 years) and the DBA. The TBA is equal to 365 times the number of years in the BP times the DBA.

FOR EXAMPLE

If you choose a \$200 DBA and a 5-year BP, your policy would provide a TBA of \$365,000.

$$(BP \times 365) \times DBA = TBA$$

$$1825 \text{ days} \times \$200 = \$365,000$$

Total Live at Home Benefit Amount

The Total Live at Home Benefit Amount is the maximum amount of Live at Home Benefits that may be paid under this policy. The Total Live at Home Benefit Amount over the life of the policy is determined by multiplying the DBA by sixty.

If the policy's TBA is exhausted, any remaining Total Live at Home Benefit Amount will be used to provide benefits that would otherwise reduce the TBA until the Total Live at Home Benefit Amount is also exhausted.

Elimination Period (EP)

This is the number of days that you must receive either Facility Services or HCBS before benefit payments begin under the policy. For each day you receive covered Facility Services, one day will be credited toward the satisfaction of the EP. Seven days will be credited toward satisfaction of the EP for a calendar week provided you receive HCBS on at least one day during that calendar week. No more than seven days will be credited toward the EP for any calendar week. Once the EP is satisfied, no future EP is required. The EP does not apply to the Live at Home Benefit or the Care Coordination Benefit.

SignatureCare Riders

We offer a variety of optional riders, for an additional cost, that can be used to customize a policy to meet your individual needs. The availability of optional riders may be limited by state or other restrictions.

Compound Inflation Protection Rider

3% or 5% Compound Inflation Protection Options

This rider, if chosen, increases the DBA by either 3% or 5% per year on a compound basis for the life of the policy, even while you are receiving benefits. Inflation protection options may be limited in your state.

Home and Community Based Services (HCBS) Riders

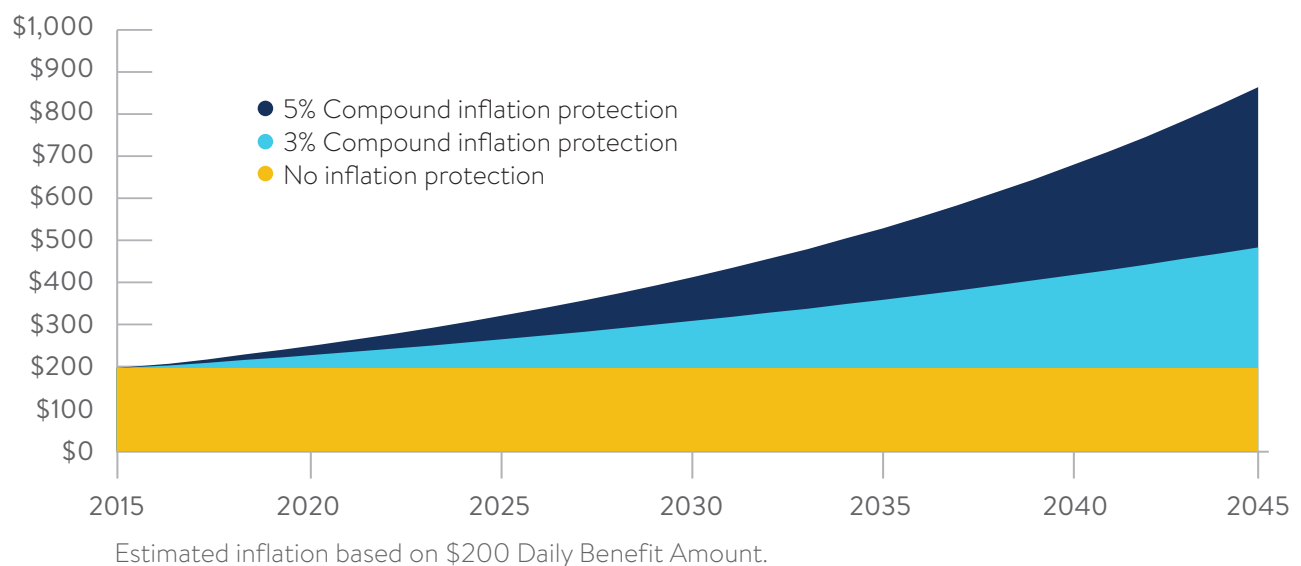
HCBS Monthly Benefit Rider

This rider changes the amount payable under the HCBS Benefit from a DBA to a Monthly Benefit Amount. This rider gives you more flexibility around services you may not receive every day. For instance, if you need assistance bathing three times per week, this rider allows the cost to be covered on a monthly rather than daily basis.

HCBS Waiver of Elimination Period Rider

This rider waives the requirement to satisfy the EP while you are receiving HCBS. Days for which you receive HCBS benefits will be credited toward satisfaction of the EP.

COMPARING INFLATION PROTECTION OPTIONS



Covered Partner Riders*

Paid Up Survivor Benefit Rider

If both partners purchase and maintain this rider on their individual policies, and both of the following occur:

- the 10th policy year anniversary, and
- the death of your Covered Partner,

The policy and any attached riders will be paid-up and no further premiums will be due for the surviving insured.

Waiver of Premium for Covered Partner Rider

We will waive the premium for the policy to which this rider is attached during any period in which the Covered Partner's premium is waived. Both partners must purchase and maintain this rider on their individual policies.

* To be eligible for the Covered Partner Riders applicant(s) must certify that they are legally married or part of a civil union or domestic partnership as defined under applicable state law.

Shortened Benefit Period Nonforfeiture Rider

If you lapse your policy due to non-payment of premium after it has been in force for at least three years, your coverage will continue under this rider. However, the new TBA and Total Live at Home Benefit Amount is limited to the greater of the total of all of the premiums paid prior to the date of lapse, or 30 times the DBA in effect at the time of lapse.

The policy will remain in force until the new benefit amount described above is exhausted or until the date of your death. Upon your death, there is no return of any unpaid benefit amount.



Important Considerations

Payment Option

Premiums may be paid once a year (annually), twice a year (semi-annually), four times a year (quarterly) or twelve times a year (monthly). Premiums paid more frequently than annually will incur an additional charge.

We may change premiums on a class basis subject to regulatory approval.

Spousal Discount¹

This 15% discount applies to the policy if it is sold to an individual who is married, or has a state-recognized domestic partnership or civil union.

Dividends²

Because MassMutual's long term care insurance is a participating product, your policy may be credited with dividends. Due to the tax qualified nature of these policies, any dividends credited to the policy will first be used to reduce your future premiums. If the dividend exceeds the premium due, any dividend remaining after payment of premiums will be used to increase the future benefits of this policy in an amount equal to the remaining dividend. Additional benefits provided by dividend will be used to pay any claim covered by the Policy before reducing any benefits otherwise available under the policy.

30-Day Free Look Period

You will have 30 days from the date you receive your SignatureCare policy to review it and all of the provisions you elected. Within this free look period, you may cancel and return the policy to your MassMutual financial professional or the company and your entire premium will be refunded.

Policy Limitations and Exclusions

No benefits will be paid and the Elimination Period will not be satisfied for any confinement, care, treatment, or service(s):

- provided to the Insured by a Family Member;
- provided Outside of the United States;
- provided for the treatment of alcoholism or drug addiction;
- for which You or the Insured have no financial liability or that is provided at no charge in the absence of insurance;
- while engaged in an illegal occupation;
- due to participation in a felony, riot or insurrection;
- which results from an act of war, declared or undeclared; or service in any of the armed forces or auxiliary units;
- due to attempted suicide; or
- due to any intentionally self-inflicted injury.

Non-Duplication of Benefits

Benefits are not payable under the policy for expenses incurred to the extent that such expenses are reimbursable under Medicare or would be so reimbursable but for the application of a deductible or coinsurance amount; or for any other state or federal worker's compensation plan, or other governmental program (except Medicaid). Days on which you are eligible for benefits, but coverage is excluded due to the Non-Duplication of Benefits provision, will count toward the satisfaction of the Elimination Period (EP).

¹ Discounts are subject to state approval and may not be available in all states.

² Dividends are not guaranteed.

Long Term Care Partnership Program

A long term care Partnership Program is a joint effort by your state government and the private insurance industry that helps you plan to meet your future long term care needs without depleting all of your assets to pay for care. This program allows you to protect some or all of your assets if your long term care needs extend beyond the period covered by your private insurance policy.

Partnership policyowners may be able to protect assets from Medicaid spend-down requirements through a feature known as ‘asset disregard.’ Partnership policyowners who apply for Medicaid coverage are able to earn dollar-for-dollar asset protection, lessening the burden to ‘spend down’ assets to qualify for the Medicaid program. Dollar-for-dollar asset protection allows you to protect an amount of your assets equal to your insurance benefit payments if in the future you need to apply for Medicaid.

The purchase of a long term care Partnership insurance policy does not guarantee eligibility for Medicaid. Please also note that states do not take part in company-specific marketing plans, and states do not endorse specific companies or company specific policy and certificate forms. If you have questions about the availability of this Program in your state, please contact MassMutual or your state insurance department.

Special Requirements

In addition to the standards that all long term care insurance policies must meet, Partnership policies must satisfy certain additional requirements.

Inflation Protection

Partnership policies are required to include inflation protection coverage in accordance with state laws. Therefore, the Compound Inflation Protection Rider must be attached to any Signature Care Partnership policy. Aside from the inclusion of this required rider, there is no additional cost for adding Partnership protection to your policy.

SignatureCare offers a Compound Inflation Protection Rider that provides a choice between 3% or 5% inflation protection options. These options may provide more or less coverage than required by your state’s partnership program. It is important to ensure the policy and riders you are considering meet your state’s requirements prior to purchasing your policy.

Residency Requirements

A Partnership policy may only be purchased in the insured’s state of residence. Not every state has a Partnership Program, your MassMutual financial professional can help you identify if your state has one.

Reciprocity

To qualify for a state's long term care insurance Partnership Program, the policy must cover an insured person who was a resident of the state when coverage first became effective under the policy. If the insured later relocates to another state, the Medicaid asset protection offered by the Partnership policy may be available subject to state reciprocity rules.

Here's How It Works

Choose your Policy and Pay Premiums

You choose your Partnership long term care insurance policy according to your needs and ability to pay. You pay the insurance premiums, generally until the point you need to receive care.

Have a Long Term Care Need

Once you need long term care and you meet the benefit eligibility criteria (also known as the insured event) and deductible (Elimination Period) for the policy, MassMutual will pay benefits based on the policy terms you selected. MassMutual will continue to pay benefits as long as you need long term care and you continue to be eligible for benefits, or until all obligations of the policy, usually measured in number of years or a preset dollar amount, are met.

Apply for Medicaid Assistance

In the future, you may decide to apply for Medicaid assistance. Most Medicaid programs consider level of care, income and resource requirements in determining your eligibility.

With dollar-for-dollar asset protection, for every \$1 of benefits you receive from your Partnership policy, you will earn \$1 of asset protection. In determining your eligibility for Medicaid benefits, Medicaid will disregard your assets up to the amount of benefits received under your Partnership insurance policy. Once you are eligible for Medicaid assistance, you will be able to receive services covered under the Medicaid program. These services could be less than or more than the services provided to you under your Partnership insurance policy.

Benefits for Policyowners

You may receive benefits from your SignatureCare Partnership policy anywhere in the United States, based on the terms of the policy you select. Benefits received under the policy can accumulate Medicaid asset protection, even if you are in another state.

A policyowner who applies for Medicaid in a state other than the state where the policy was purchased may be eligible for Medicaid asset protection in that state. Eligibility will depend on whether the state in which the policy was purchased has Medicaid asset protection reciprocity with the other state at the time the policyowner applies to that state's Medicaid program.

At Claim Time

Benefit eligibility*

Provided all other eligibility requirements have been met, you will be eligible for SignatureCare benefits if, and within the last 12 months, a Licensed Health Care Practitioner certifies that you are Chronically Ill. Chronically Ill means:

- You are unable to perform at least 2 of 6 Activities of Daily Living (ADLs) due to loss of functional capacity. This means you require substantial assistance in at least 2 of the following ADLs: bathing, eating, dressing, transferring, toileting or continence, for a period expected to last at least 90 consecutive days; or
- You have a Severe Cognitive Impairment. This means you require continual supervision due to a deterioration or loss of intellectual capacity. This includes Alzheimer's disease or similar forms of dementia.

* Subject to all the terms and provisions of the policy.

Waiver of Premium

Premiums will be waived while you are receiving benefits for Facility Services, HCBS or Facility Bed Reservation. Premiums will resume when you are no longer receiving benefits for these services.

Care Coordination Services

The Care Coordination Benefit is available at claim time. Please see page 1 for a description of the benefit.

Notes:

Since 1851, Massachusetts Mutual Life Insurance Company has been operating for the benefit of our members and policyholders. For more than 160 years, we've made business decisions based on their need. Our mutuality, along with our long-term business approach, has helped keep us strong. In 2000, we expanded our broad portfolio of products to include long term care insurance



Policy provisions and benefits may vary from state to state and some of the benefits illustrated here may not be available in your state.

The information provided is not written or intended as tax or legal advice. MassMutual, its subsidiaries, employees and representatives are not authorized to give tax or legal advice. Individuals are encouraged to seek advice from their own tax or legal counsel.

Long Term Care Insurance (MM600-2017 and ICC17MM600P in certain states including NC) is a participating long term care insurance policy issued by MassMutual, Springfield, MA 01111-0001. For costs and further details of coverage, including exclusions and reductions or limitations contact your financial professional or MassMutual at 800-272-2216 for a referral to a financial professional who will contact you.

The purpose of this material is the solicitation of insurance.

This brochure is intended solely to provide a general overview of the SignatureCare policy. This is not a contract and the terms of the policy govern.

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