



## Long-Term Care Insurance Suitability Letter

Dear [\_\_\_\_\_ (Insert name of applicant)]:

Your recent application for long-term care insurance included a "Long-Term Care Insurance Personal Worksheet," which asked questions about your finances and your reasons for buying long-term care insurance. For your protection, state law requires us to consider this information when we review your application, to avoid selling a policy to those persons who may not need coverage.

[Your answers indicate that long-term care insurance may not meet your financial needs. We suggest that you review the information provided along with your application, including the booklet entitled "A Shopper's Guide to Long-Term Care Insurance" and the form entitled "Things You Should Know Before Buying Long-Term Care Insurance." The Division of Insurance also has information about long-term care insurance and may be able to refer you to a counselor free-of-charge who can help you decide whether to buy this policy.] [You chose not to provide any financial information for us to review.]\*

We have suspended our final review of your application. If, after careful consideration, you still believe this policy is what you want, check the appropriate box below and return this letter to us within the next 60 days. We will then continue reviewing your application and issue a policy if you meet our medical standards.

If we do not hear from you within the next 60 days, we will close your file and not issue you a policy. You should understand that you will not have any coverage until we hear back from you, approve your application and issue a policy to you.

*Please check one box and return in the enclosed envelope.*

Yes, although my worksheet indicates that long-term care insurance may not be a suitable purchase, I wish to purchase this coverage. Please resume review of my application.

No, I have decided not to buy a policy at this time.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Applicant)

Please return to [\_\_\_\_\_ (Insert name of insurer)] at [\_\_\_\_\_ (Insert address of insurer)] by [\_\_\_\_\_ (Insert date)].

\*Drafter's note: Choose the appropriate sentences depending on the information received from the applicant.