COMPARISON OF THE STATE PROGRAM VERSUS ALLSTATE INSURANCE

THE PROGRAMS	Washington State Program	Allstate Insurance Plan
Life Insurance	None included	You choose your coverage amount, from \$40,000 minimum up to a maximum of \$250,000
Long-Term Care Lifetime Maximum	Provides up to \$36,500 per lifetime. May increase over time if the state approves increases, which would be based on the Washington State Consumer Price Index, but there is no guaranteed increase.	Provides up to the amount you choose for Life Insurance coverage. For example, if you choose \$70,000 in Life coverage, you would be able to use up to \$70,000 for Long-Term Care needs.
"Walk Away" Benefits	None	Accumulated <i>Cash Value</i> at the time you surrender (cancel) the policy
Long-Term Care Benefit Payments	This is a reimbursement program. You send receipts to the state and they will reimburse you. They will require you to use certain providers and reimburse at Medicaid payment levels. Providers can bill you for charges not covered by the state program.	Once you qualify for benefits, you would begin receiving a <i>flat monthly benefit</i> after 90 days. The program pays 4% of your life insurance benefit for up to 25 months. For example, if you choose \$70,000 in Life coverage you would receive \$2800/month to use for long-term care.
Spouse Enrollment	Your spouse/domestic partner would only be eligible <i>if they work as a W-2 employee</i> and pay the state tax through their job.	You can enroll your spouse/domestic partner for coverage if you enroll on coverage yourself. The minimum election is \$40,000. Your spouse cannot elect more coverage than you elect for yourself. Other limitations apply.
Rates	The tax is currently set to start at 0.58% of your wages. Wages include base, bonus, commission, overtime, etc. with no cap. As your wages increase, the amount you pay in tax will increase.	Rates are based on each insured's age and tobacco use in the last 12 months.
Rate Changes	The tax may increase over time. Also, as your wages increase, the amount you pay in tax will increase.	These rates do not increase as you get older. We call this "locking in" your rates at your age on the policy effective date.
Needing Benefits	You must have a loss of 3 of 10 Activities of Daily Living. Activities include medication management, personal hygiene, eating, toileting, cognitive functioning, transfer assistance, body care, bathing, ambulation/mobility, and dressing	You can qualify in one of two ways. Either you must have a loss of 2 or 6 Activities of Daily Living or you must have a Cognitive Impairment. Activities include bathing, continence, dressing, eating, toileting and transferring.
Eligibility for Benefits	You must pay into the program for 10 years (without more than a 5-year consecutive break) to be permanently eligible for benefits. You can become temporarily eligible for benefits once you pay into the program for at least 3 years, but there are certain requirements.	Your coverage begins on the effective date of the policy. When you qualify for benefits, there will be a 90-day waiting period for benefits. As long as you continue to pay premiums for the policy you will be eligible for benefits. Note that benefits will not be paid for a period of illness that begins within the first 6 months after the policy effective date due to a preexisting condition.
Portability	This benefit is only available while you are a resident of the state of Washington. The program will only reimburse you for services received in Washington state.	This benefit is available anywhere in the US and its territories. If you retire or change employment, you can take this policy with you. The benefits and the premium would remain the same – you would just pay the premiums from your bank account.
Payments End	Once retired and no longer earning W-2 wages.	Payments end once you reach age 95. Also, premiums are not charged when you are receiving Long-Term Care benefits.