Supplemental Long-Term Care Insurance: Application Instructions

(Regular status employees, 75% - 100% FTE)

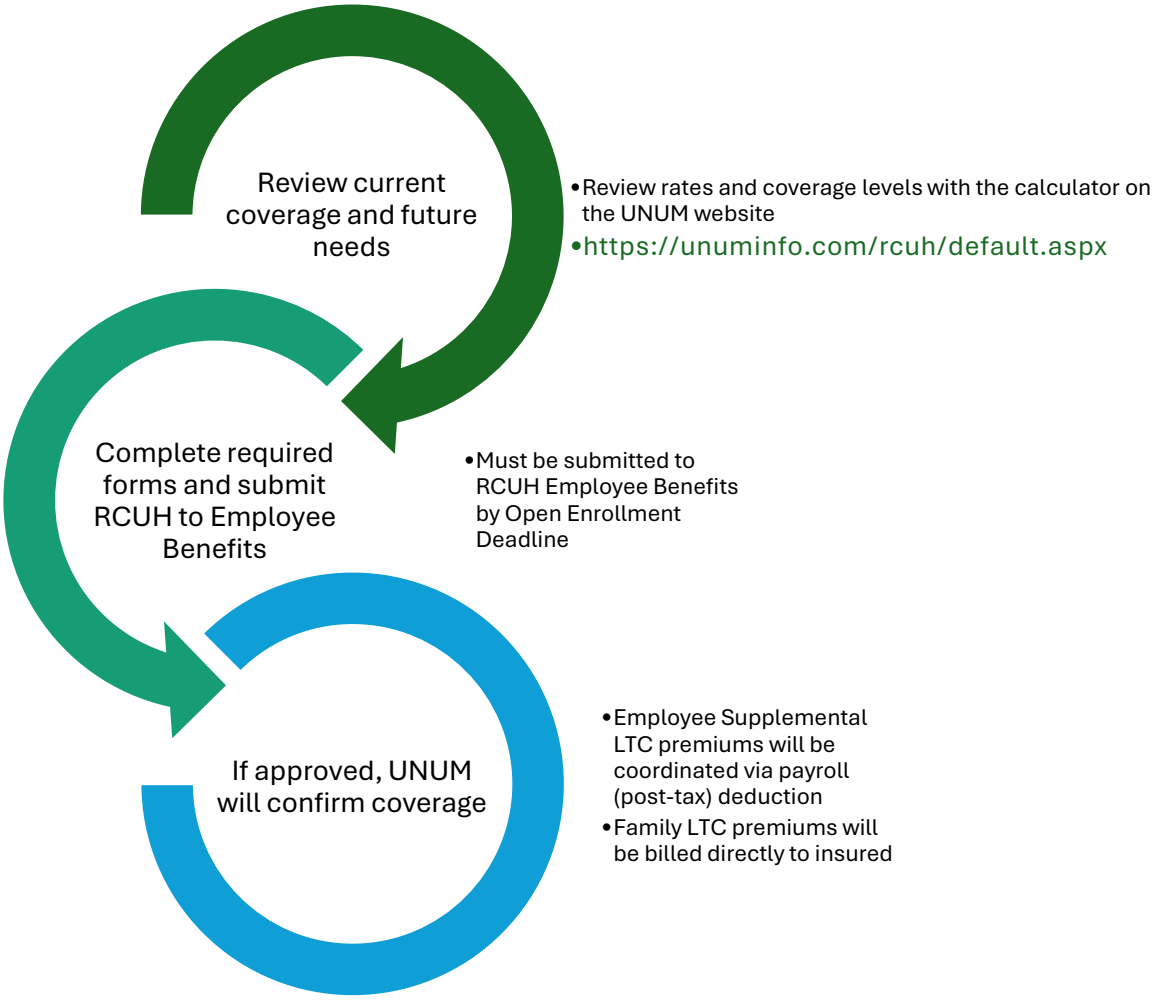
All eligible employees are automatically enrolled into the RCUH Group Long-Term Care base plan benefit. During the Open Enrollment period, employees in the base plan benefit may request to buy up or enroll themselves and/or a qualified family member into Supplemental Long-Term Care (Supp LTC). Employee and/or Family Members may be subject to medical underwriting as determined by the insurance company prior to approval.

Refer to Guide to RCUH Health and Welfare Benefits for details on eligibility and coverage under the RCUH Long-Term Care base plan. Visit RCUH Employee Self-Service > Benefits Summary to confirm your enrollment.

What is long-term care?

Long-term care involves a variety of services designed to meet a person's health or personal care needs when they can no longer perform everyday activities on their own. The National Institutes of Health (NIH)'s article, What is Long Term Care? provides an overview of long-term care planning, services, as well as other resources.

What is the process?



IMPORTANT: Submitting an application for Supplemental Group Long-Term Care Insurance does not guarantee enrollment into this benefit.

https://www.rcuh.com/document-library/3-000/benefits/supplemental-long-term-care-application-instructions/
Updated 03/28/2025

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Forms and Documents:

Plan Highlights (external links to UNUM website)

Outline of Coverage

Rates (June 2021 or earlier) (July 2021 and later)

If Enrolling Self into Supplemental LTC:

1. Employee Enrollment Form
2. Long Term Care Insurance Application (7010-04) with HIPAA Authorization (6720-03)
3. Request to Change Coverage (AE -1181)

If Enrolling Spouse into Supplemental LTC:

1. Spouse/Reciprocal Beneficiary Enrollment Form
2. Long Term Care Insurance Application (7010-04) with HIPAA Authorization (6720-03)
3. Additional Forms required for Family Member Coverage:
    a. LTC Personal Worksheet (AE-7009)
    b. 3rd Party Notice of Prem Lapse (7606-04)
    c. Authorization & Agreement for Auto Payments (7713-04)
4. Eligible spouses who are currently enrolled and would like to change their coverage – Request to Change Coverage (AE -1181)

If Enrolling Family Member into Supplemental LTC:

1. Family Enrollment Form – Choose your plan options and submit the form
2. Long Term Care Insurance Application (7010-04) with HIPAA Authorization (6720-03)
3. Additional Forms required for Family Member Coverage:
    a. LTC Personal Worksheet (AE-7009)
    b. 3rd Party Notice of Prem Lapse (7606-04)
    c. Authorization & Agreement for Auto Payments (7713-04)
4. Eligible family members who are currently enrolled and would like to change their coverage – Request to Change Coverage (AE -1181)