

## LONG-TERM CARE INSURANCE

### *Preparing for the Personal Health Interview*

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#### **WHAT IS THE PERSONAL HEALTH INTERVIEW?**

Completing a personal health interview is your next step in applying for a long-term care insurance policy. The interview – typically conducted by a registered nurse – is used to assess your eligibility for long-term care insurance.

#### **HOW IS THE INTERVIEW CONDUCTED?**

Your insurance agent will set up the interview for you at your convenience.

- If you are age 64 or younger, the interview will be conducted over the telephone and will take approximately 30-45 minutes to complete
- If you are age 65 or older, the interview will be conducted in person and will take approximately one hour
- We will make every attempt to try and contact you within the two hour window specified on the application. For example, if you indicate 5:00pm, the contact window is from 5:00-7:00pm. The time zone will reflect the legal residence address you have indicated on your application.

#### **WHAT QUESTIONS WILL I BE ASKED?**

We will ask you a series of questions about your current health, the medications you take and your daily activities. Questions also will be asked to evaluate your memory and mental ability. The questions are not difficult, and will include things like:

- The name of your primary care physician and any specialists you see

- The names of the medications you take
- Your future plans for surgery, medical testing or medical consultation
- Your living arrangements and social activities
- Your use of medical devices, such as a wheelchair

#### **WHY IS THE INTERVIEW SO IMPORTANT?**

The information you provide will be used to determine if you are eligible for a long-term care insurance policy. For that reason, it's important to give the interviewer your full attention and answer all questions completely and accurately.

- Turn off the television or radio
- Move to a quiet spot where you will not be distracted
- Make sure you can hear the interviewer clearly
- Answer all questions to the best of your ability
- If a distraction should occur while the interview is being conducted, please let the nurse know and ask to reschedule at a better time

#### **YOUR INFORMATION IS STRICTLY CONFIDENTIAL**

We protect your privacy by safeguarding the information you provide. Mutual of Omaha Insurance Company will use the contents of your personal health interview solely during the application process for long-term care insurance and will not release the information without your written authorization.

## USE THIS FORM TO PREPARE FOR THE PERSONAL HEALTH INTERVIEW

Take a few minutes now to collect the following information so you'll be prepared for your personal health interview.

### APPLICANT A

### APPLICANT B

#### Primary Care Physician

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date/Reason Last Seen: \_\_\_\_\_ Date/Reason Last Seen: \_\_\_\_\_

#### Specialist

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date/Reason Last Seen: \_\_\_\_\_ Date/Reason Last Seen: \_\_\_\_\_

#### Current Medications (prescription and over-the-counter)

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Dosage: \_\_\_\_\_ Dosage: \_\_\_\_\_

Frequency: \_\_\_\_\_ Frequency: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Dosage: \_\_\_\_\_ Dosage: \_\_\_\_\_

Frequency: \_\_\_\_\_ Frequency: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Dosage: \_\_\_\_\_ Dosage: \_\_\_\_\_

Frequency: \_\_\_\_\_ Frequency: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Dosage: \_\_\_\_\_ Dosage: \_\_\_\_\_

Frequency: \_\_\_\_\_ Frequency: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Dosage: \_\_\_\_\_ Dosage: \_\_\_\_\_

Frequency: \_\_\_\_\_ Frequency: \_\_\_\_\_

#### YOUR PERSONAL HEALTH INTERVIEW REFERENCE NUMBER

You will be provided a reference number when you complete your personal health interview.

Record that number here: \_\_\_\_\_ Record that number here: \_\_\_\_\_