

The Pacific PremierCare® Choice Suite

Whole Life Insurance Products with Long-Term Care Benefits



PACIFIC LIFE

Pacific Life Insurance Company



When Life Happens **We Give You Choices**, Not Restrictions

REIMBURSEMENT OR INDEMNITY BENEFITS

Choice of long-term care benefit payments

LONG-TERM CARE (LTC) DURATION

5 to 8 years

INFLATION BENEFIT OPTIONS

3% Simple, 5% Simple, or 5% Compound annual interest

RETURN OF PREMIUM BENEFIT

100% from day one or vested over time

PREMIUM SCHEDULES

1, 5, 10, 15, or 20 years

See inside for limits, restrictions, and other details.



The Power of Choice

More than 90% of your clients may self insure against the risk of long-term care.¹
Do they have a rainy day fund that's well-suited for long-term care protection?

Help your clients in or near retirement consider a potentially better rainy day fund.

Pacific PremierCare Choice² is life insurance that offers flexible options for long-term care:

Greater tax-free³ funds for long-term care expenses.⁴

Return of premium benefit upon policy surrender.⁴

Death proceeds to policy beneficiaries at insured's death.^{4,5}

¹ Less than 8% of Americans have insurance for long-term care. Source: Robert Wood Johnson Foundation, Health Policy Snapshot "Long-Term Care: What Are the Issues?" February 2014.

² Policy Form #P17PCH and S17PCH100M or ICC17 P17PCH and ICC17 S17PCH100M; P17PCH and S17PCHMAXM or ICC17 P17PCH and ICC17 S17PCHMAXM; P17PCH and S17PCH100S or ICC17 P17PCH and ICC17 S17PCH100S; P17PCH and S17PCHMAXS or ICC17 P17PCH and ICC17 S17PCHMAXS; based on product and state of policy issue.

³ These products are intended to provide federally tax-qualified long-term care insurance as defined in IRC Section 7702B(b). Tax treatment of long-term care benefits may depend on factors such as the amount of benefits in relation to certain IRS limitations (referred to as "per diem" limitations), the amount of qualified expenses incurred or if similar benefits are being received under other contracts. When benefits are received from multiple policies providing long-term care for a given insured, including policies with different owners, those benefits must be aggregated to determine their taxability. Pacific Life cannot determine whether the benefits are taxable. Clients are advised to consult with qualified and independent legal and tax advisors for more information.

⁴ Long-Term Care Benefits are reduced by any policy distributions (loans or terminal illness benefit). Death Proceeds and Return of Premium Benefit will also be reduced by any policy distributions and Long-Term Care Benefits.

⁵ For federal income tax purposes, life insurance death benefits generally pay income tax-free to beneficiaries pursuant to IRC Section 101(a)(1). In certain situations, however, life insurance death benefits may be partially or wholly taxable. Situations include, but are not limited to: the transfer of a life insurance policy for valuable consideration unless the transfer qualifies for an exception under IRC Section 101(a)(2) (i.e. the "transfer-for-value rule"); arrangements that lack an insurable interest based on state law; and an employer-owned policy unless the policy qualifies for an exception under IRC Section 101(j). Additionally, a portion of the Death Proceeds may be income taxable if the policy was issued as part of an IRC Sec. 1035 income tax-free exchange and/or in certain situations where long-term care benefits were paid out prior to death. Clients should consult with qualified and independent legal and tax advisors.

Benefits Whether Clients Live, Quit, or Die

IF CLIENTS **LIVE**



What Your Clients May Need

Help paying for long-term care expenses.



What Your Clients Can Get With **Pacific PremierCare Choice**

Greater funds available for long-term care expenses.

IF CLIENTS **QUIT**



What Your Clients May Need

Access to asset if long-term care is never needed.



What Your Clients Can Get With **Pacific PremierCare Choice**

Return of premium benefit upon policy surrender.

IF CLIENTS **DIE**



What Your Clients May Need

Ability to leave asset to heirs if long-term care is never needed.



What Your Clients Can Get With **Pacific PremierCare Choice**

Death proceeds paid to policy beneficiaries at the insured's death.

When Life Happens **We Give Your Clients Choices**, Not Restrictions
Pacific PremierCare Choice

Distinct Features

Which product choice is right for your client?



	REPOSITION A PORTION OF CLIENT'S	RETURN OF PREMIUM BENEFIT	PREMIUM MODE	PROTECTION WHILE PAYING PREMIUM
PACIFIC PREMIERCARE CHOICE 100	Assets (Able to fund policy in one premium)	100% of single premium	Single premium	One premium fully funds the policy. No further premiums are allowed. Full policy protection starts from day one.
PACIFIC PREMIERCARE CHOICE MAX		Vesting schedule reaches 100% of single premium over time ⁶		
PACIFIC PREMIERCARE CHOICE MULTI- PAY 100	Income (Need to fund policy over time with multiple premiums)	100% of paid planned premiums	Fixed premiums over 5 or 10 years Choice of annual or monthly premiums	Each premium payment guarantees policy benefits. (Premiums may not exceed the planned premium amounts.) 1. RETURN OF PREMIUM —The client may surrender the policy at any time for at least the Return of Premium Benefit. ⁶ 2. GUARANTEED FULL PROTECTION —If the insured needs long-term care or dies while still paying premiums, the policy's benefits for long-term care and death proceeds are available from day one of the policy as if all planned premiums had been paid. And while the insured is receiving LTC Benefits, no premiums are due. To receive these benefits, all prior premiums must have been paid when due. 3. LOCKABLE BENEFITS —Each premium paid guarantees benefits for Long- Term Care, Death Proceeds, and Return of Premium, even if no additional premiums are paid. Each subsequent planned premium paid guarantees benefits up to the fully-funded amounts.
PACIFIC PREMIERCARE CHOICE MULTI- PAY MAX		Vesting schedule reaches 100% of paid planned premiums over time ⁶	Fixed premiums over 5, 10, 15, or 20 years Choice of annual or monthly premiums	

The policy's guaranteed benefits are Long-Term Care Benefits, Death Proceeds, and the Return of Premium Benefit. Long-term care benefits are reduced by any policy distributions (loans or terminal illness benefit). Death Proceeds and Return of Premium Benefit will also be reduced by policy distributions and long-term care benefits.

⁶ The policyowner is guaranteed to receive at least the Return of Premium Benefit upon policy surrender. The Return of Premium benefit is based on cumulative premium paid to date and is subject to a vesting schedule.

⁷ As long as the premium(s) is paid when due, the long-term care (LTC) coverage as issued will continue as long as the insured lives, or until the policy is surrendered at the owner's request, or until the maximum LTC benefits have been paid, or until policy lapse. Prior to lapse, the policy provides a Grace Period of 61 days to pay an amount sufficient to keep the policy in force as issued.

⁸ At the time of first claim, the policyowner must elect either the indemnity or reimbursement LTC benefit payment option. Once elected, the LTC benefit payment option may not be changed. Benefit Payments for Qualified Long-Term Care (LTC) Services may be subject to a one-time elimination period and are provided by the Accelerated Benefit Rider (ABR) for Long-Term Care (Form # R17ABR or ICC17 R17ABR, R17ABRI or ICC17 R17ABRI) and the Extended Benefit Rider (EBR) for Long-Term Care (Form # R17EBR or ICC17 R17EBR, R17EBRI or ICC17 R17EBRI) (form #s based on state of policy issue and policy elections.) The amount and duration of the policy's maximum LTC Benefits and premium will be based on policy elections. The actual amount and duration of LTC benefit payments may vary based on policy use. Covered LTC Benefit payments may occur until the total LTC Benefits are exhausted. Your clients should be provided with additional information on other available options. Coverage durations elected for longer than two years are provided through a combination of the ABR and EBR. Charges for the ABR, EBR, and any Inflation Benefit Option are included in the scheduled premium payment(s).

Common Features

The following features are found in all versions of the product.



LONG-TERM CARE PROTECTION

LONG-TERM CARE (LTC) BENEFIT OPTIONS^{7,8}	Policy Elections: - Choice of LTC Benefit duration from 5 to 8 years at policy issue. - Choice of annual inflation benefit options (3% Simple, 5% Simple, 5% Compound, or none for a level monthly LTC Benefit) at policy issue. - Choice of indemnity or reimbursement style LTC Benefit payments at the time of first LTC claim.				
ELIMINATION PERIOD BY BENEFIT PAYMENT TYPE	Period during which insured receives and pays for qualified long-term care services. Must only be satisfied once per lifetime; days need not be consecutive. If Reimbursement LTC Benefits are elected at initial claim: 0 days for qualified in-home and community services 90 days for facility-based services Where monthly benefit payments are made as reimbursements, the monthly maximum benefit may be limited to the cost of covered long-term care expenses actually incurred, which may be less than the Monthly Maximum Benefit. The Monthly Maximum Benefit available may be prorated based on the actual number of days that the insured is chronically ill or confined to a facility. If Indemnity LTC Benefits are elected at initial claim: 90 days for all qualified services Indemnity LTC Benefits allow policyowner to request a cash payment up to the policy's Monthly Maximum LTC Benefit amount after it has been multiplied by the Indemnity Factor stated in the policy. The Indemnity Factor varies by issue age, gender, and inflation benefit option.				
QUALIFIED LTC SERVICES COVERED	More than just nursing home care, the policy covers: <table> <tr> <td data-bbox="410 1371 670 1428">Home and Community Services</td><td data-bbox="686 1371 946 1428">Facility-Based Services</td></tr> <tr> <td data-bbox="410 1455 670 1770"> - Adult Day Care Center - Alternative Care - Care Coordination - Caregiver Training - Durable Medical Equipment - Home and Community Care - Home Modification </td><td data-bbox="686 1455 946 1738"> - Assisted Living Facility - Hospice Facility Care - Nursing Home Facility - International Benefit (nursing home facility care received outside the U.S.)* </td></tr> </table> <i>*International benefit is available only with Indemnity style LTC Benefit payments. If available, it is limited to the amount payable under the ABR LTC Rider and so is typically available within the policy's first two years of LTC claims.</i> To qualify for LTC Benefit payments: - The insured must be certified by a Licensed Health Care Practitioner as chronically ill (unable to perform at least 2 of the 6 Activities of Daily Living—bathing, continence, dressing, eating, toileting, and transferring—for a period of at least 90 days; or requiring Substantial Supervision due to Severe Cognitive Impairment). - Licensed Health Care Practitioner must approve a written Plan of Care for Covered Long-Term Care Services that the insured receives while the policy is in force and recertify that the insured is still chronically ill and verify the Plan of Care at least annually thereafter.	Home and Community Services	Facility-Based Services	- Adult Day Care Center - Alternative Care - Care Coordination - Caregiver Training - Durable Medical Equipment - Home and Community Care - Home Modification	- Assisted Living Facility - Hospice Facility Care - Nursing Home Facility - International Benefit (nursing home facility care received outside the U.S.)*
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- Adult Day Care Center - Alternative Care - Care Coordination - Caregiver Training - Durable Medical Equipment - Home and Community Care - Home Modification	- Assisted Living Facility - Hospice Facility Care - Nursing Home Facility - International Benefit (nursing home facility care received outside the U.S.)*				

Long-Term Care Benefits are reduced by any policy distributions (loans or terminal illness benefit). Death Proceeds and Return of Premium Benefit will also be reduced by any policy distributions and Long-Term Care Benefits.

For Financial Professional Use Only. Not for Use with the Public.

Common Features *continued*

The following features are found in all versions of the product.

ISSUE AGES AND RISK CLASSES

Issue Age (Last Birthday)	Single Pay	5-Pay	10-Pay	15-Pay	20-Pay
	30-75	30-75	30-70	30-65	30-60

- Risk Classes: Male and female, smoker and nonsmoker
- Couples discount applied if applicable (insured is in a state-sanctioned marriage, civil union, or domestic partnership)

PREMIUM LIMITS

- Minimum Premium: Sufficient to fund an initial face amount of at least \$60,000 (may vary by state)
- Maximum Premium: May not result in an initial face amount greater than \$600,000; maximum premium may not exceed \$600,000
- Note: LTC coverage amount may not to exceed Pacific Life's total \$2.4 million total LTC retention per insured

DEATH PROCEEDS

- Amount guaranteed to be no less than the planned premium(s) paid, less any prior policy distributions
- Residual Death Benefit: If the only distributions to occur under the policy are for long-term care benefits, the policy death proceeds are guaranteed to be equal to the lesser of 5% of the initial face amount or \$5,000

TERMINAL ILLNESS BENEFIT

Allows the policyowner to accelerate 75% of the policy's face amount not to exceed \$250,000 of death benefit if the insured is diagnosed as terminally ill (12 months or fewer to live).⁹

WITHDRAWALS AND POLICY LOANS

The policy is intended to increase the funds available for long-term care expenses. If the policyowner needs liquidity, it may be advisable to surrender the policy for its return of premium benefit. Withdrawals are not available. While policy loans are available, they will reduce the death proceeds, net cash surrender value, and the long-term care benefits the policyowner may receive.

Long-Term Care Benefits are reduced by any policy distributions (loans or terminal illness benefit). Death Proceeds and Return of Premium Benefit will also be reduced by any policy distributions and Long-Term Care Benefits.

PRE-SALE REQUIREMENTS

Prior to soliciting a sale for Pacific PremierCare Choice, you will need the following.

- Appointment with Pacific Life Insurance Company.
- Valid life and health insurance licenses for each state in which you plan to solicit business.
- Completion of any state-required long-term care pre-sale and continuing education requirements.

Contact your licensing coordinator for details. Reminder: You may not solicit business in a state where the product is not available. Check with your Pacific Life representative for current state approvals.

⁹ Tax laws relating to accelerated death benefits are complex. Receipt of accelerated death benefits may affect eligibility for public assistance programs such as Medicaid. Clients are advised to consult with qualified and independent legal and tax advisors for more information. There is no up-front cost or monthly rider charge. The cost of exercising the terminal illness benefit is that the death benefit is reduced by an amount greater than the rider benefit payment itself to reflect the early payment of the death benefit. Rider benefit payments will reduce the death proceeds, Return of Premium Benefit, net cash surrender value, any remaining future unpaid premium, and any policy debt. Additionally, benefit payments may adversely affect the benefits under other riders.

How to Conduct the Client Meeting

IN THE MEETING



1 Present the Product

For a personalized sales presentation, use the Product Quote with its optional Pre-Sale Presentation with your clients. Verify your client's eligibility for coverage using the **Pre-Qualifying Questionnaire**.



2 Submit a Ticket

Complete the paper ticket and fax it to (866) 964-4860, email it to NBSUnderwriting@PacificLife.com, or mail it to Pacific Life Insurance Company, 6750 Mercy Road, 5th Floor, Omaha, NE 68106.

Need help? Call the LTC Sales Desk at (855) 584-0661.



3 Prepare Your Client for Next Steps

Give clients the **Telephone Interview Worksheet** to help them prepare for the follow-up phone interview.

AFTER THE MEETING



4 Client Interview Conducted

Within 24 to 48 hours of successful application, a Pacific Life representative will phone the client for a Personal History Interview and Cognitive Assessment (if required). A Medical Information Bureau and prescription report will be ordered on all applicants. For applicants age 50 and older, we will also order an Attending Physician Statement.



5 Underwriting Decision

After completing the interview and reviewing any required Attending Physician Statement, underwriting decisions are typically made in about one week.



6 Collect Premium and Policy Issued



7 Deliver Policy and Collect Signatures

AVOID POTENTIAL DELAYS AND COSTLY MISTAKES!

Use the **Point of Sale Checklist** to help make sure the application is in good order.

The Pacific PremierCare Choice products are subject to underwriting and approval of the application and may include obtaining records from your physician. No medical exam is required, but a Medical Information Bureau (MIB) and prescription report will be ordered and a Personal History Interview and Cognitive Assessment will be performed via telephone as part of the underwriting process.

See the power of choice. Request a quote today.

CONTACT THE LTC SALES DESK AT (855) 584-0661.

This material is not intended to be used, nor can it be used by any taxpayer, for the purpose of avoiding U.S. federal, state or local tax penalties. This material is written to support the promotion or marketing of the transaction(s) or matter(s) addressed by this material. Pacific Life, its affiliates, their distributors, and respective representatives do not provide tax, accounting, or legal advice. Any taxpayer should seek advice based on the taxpayer's particular circumstances from an independent tax advisor or attorney.

Pacific Life is a product provider. It is not a fiduciary and therefore does not give advice or make recommendations regarding insurance or investment products.

Pre-Existing Conditions Limitation: A pre-existing condition means a condition for which medical advice or treatment was recommended by, or received from, a provider of health care services, within six months of the Policy Date. We will not reduce or deny any claim under this Rider because of a pre-existing condition or disease that is disclosed on the Application. Any loss occurring within six months of the Policy Date with respect to a pre-existing condition or disease not disclosed on the application will not be covered.

Exclusions, Exceptions, and Limitations: Pacific Life will not pay benefits for care or services: 1) provided by the Insured's Immediate Family unless he or she is a regular employee of an organization which is providing the treatment, service or care; and the organization receives the payment for the treatment, service or care; or provided by the Insured's Immediate Family unless the Indemnity Benefit Option is in effect and benefits are being paid for Home and Community Care; 2) for which no charge is normally made in the absence of insurance; 3) provided outside the United States of America except as provided under the Indemnity Option's International Benefit; 4) that result from an attempt at suicide (while sane or insane) or an intentionally self-inflicted injury; 5) that result from alcoholism or drug addiction; 6) that result from committing or attempting to commit or participating in a felony, riot or insurrection; 7) provided in a government facility (unless otherwise required by law); 8) for which benefits are available under Medicare (including amounts that would be reimbursable but for the application of a deductible or coinsurance amount) or other governmental program (except Medicaid), any state or federal workers' compensation, employer's liability or occupational disease law, or any motor vehicle no-fault law. No benefits will be paid for services received while the Accelerated Benefit Rider (ABR) and the Extended Benefit Riders (EBR) for Long-Term Care are not in effect.



PACIFIC LIFE

Pacific Life Insurance Company
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Pacific Life Insurance Company is licensed to issue insurance products in all states except New York. Product availability and features may vary by state. Insurance products and their guarantees, including optional benefits and any crediting rates, are backed by the financial strength and claims-paying ability of the issuing insurance company. Look to the strength of the life insurance company with regard to such guarantees as these guarantees are not backed by the broker-dealer, insurance agency, or their affiliates from which products are purchased. Neither these entities nor their representatives make any representation or assurance regarding the claims-paying ability of the life insurance company.

Pacific Life Insurance Company's individual life insurance products are marketed exclusively through independent third-party life insurance producers, which may include bank affiliated entities. Some selling entities may limit availability of some optional riders based on their client's age and other factors. Your broker-dealer or firm can help you determine which optional riders are available and appropriate for your clients.

Investment and Insurance Products: Not a Deposit	Not Insured by any Federal Government Agency	
Not FDIC Insured	No Bank Guarantee	May Lose Value