A PRACTICAL GUIDE

THE LONG-TERM CARE TRUTH

What Medicare Won't Pay For and 3 Ways to Protect Your Savings

Protect your home. Preserve your hard-earned savings. Keep the burden off your children.

PRESENTED BY

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INTRODUCTION

Why You’re Reading This

If you have spent the last thirty or forty years working hard, paying off a mortgage, and carefully building a retirement nest egg, you deserve to feel secure. You have earned the right to look forward to your future with peace of mind.

But there is a silent, massive gap in the American retirement system that most families do not discover until it is too late.

Every single day, thousands of hardworking adults aged 55 to 70 realize that the plan they built has a single point of failure. That failure is not the stock market, inflation, or taxes. It is the cost of long-term care.

There is a common assumption that if you get sick, recover from surgery, or simply reach a point where you need help around the house, Medicare will step in and pay for it. **This assumption is completely wrong.** Medicare does not cover long-term custodial care—the kind of care required for daily living, whether that is in a nursing home, an assisted living facility, or right in your own living room.

When this care becomes necessary, families are forced to pay for it entirely out of pocket. At rates that can easily exceed $8,000 to $10,000 every single month, these costs do not just dent a retirement account—they wipe it out. In a matter of months, a lifetime of saving and the equity in your home can vanish, leaving your spouse financially vulnerable and your children holding the emotional and physical burden of care.

This guide was written to show you exactly how to prevent that from happening. You will learn the brutal truth about what Medicare will and will not pay for, the three practical strategies you can use to shield your assets, and how to put a plan in place that preserves your independence and keeps your family protected.

CHAPTER 1

The Medicare Myth: What Really Happens When You Need Care

To protect your retirement, you must first understand the difference between two terms: **“Skilled Care”** and **“Custodial Care.”**

Medicare is designed to pay for **skilled care**. This is medical treatment provided by licensed medical professionals, such as doctors, registered nurses, and physical therapists. If you undergo hip surgery, Medicare will pay for your hospital stay and a limited amount of physical therapy to help you recover.

However, Medicare does not pay for **custodial care**.

Custodial care is assistance with what professionals call the Activities of Daily Living (ADLs). These are the basic, everyday tasks we all take for granted: bathing, dressing, eating, using the restroom, getting in and out of bed, and moving around safely.

If you develop a chronic illness, experience cognitive decline like dementia or Alzheimer’s, or simply become too frail to manage these tasks on your own, you do not need a doctor or a registered nurse twenty-four hours a day. You need someone to help you live. You need custodial care.

> **Because this care is not classified as “medical treatment,” Medicare pays exactly $0 toward it.**

This leaves you with three options: rely on Medicaid (which requires you to spend down your assets and sell your home until you are practically destitute to qualify), pay for the care entirely out of your own pocket, or rely on your children to quit their jobs or disrupt their lives to become your full-time caregivers.

According to industry statistics, nearly **70% of Americans turning age 65** will need some form of long-term care services during their lives. This is not a rare emergency; it is a statistical probability. When it happens, the bills start immediately.

What Care Really Costs

TYPE OF CARE	AVERAGE ANNUAL COST
Nursing home (private room)	**$100,000+**
Assisted living facility	**$65,000+**
Home health aide (part-time)	**$50,000+**
Amount Medicare pays toward custodial care	**$0**

Without a plan, your retirement savings become the primary source of funding for these bills. Your hard-earned assets are spent down dollar-for-dollar until they are gone. At these rates, a typical nest egg can be completely depleted within two to three years.

CHAPTER 2

The Three Ways to Protect Your Savings

Once you understand the risk, the next step is to choose your strategy. There are three primary ways to handle the potential cost of long-term care. Every family must choose one of these paths.

Strategy 1: Self-Funding (The Default Route)

Self-funding means you decide to act as your own insurance company. You set aside a portion of your savings or rely on your home equity to pay for care if and when you need it.

The problem with this strategy is the math. If you set aside $300,000 for potential care costs, that is $300,000 that you cannot safely spend during your retirement. It must sit idle, losing purchasing power to inflation. Worse, if you or your spouse requires several years of care, that $300,000 can easily be exhausted, leaving the surviving spouse with nothing. Self-funding is not a plan; it is a gamble where you risk your home and your legacy.

Strategy 2: Traditional Long-Term Care Insurance

This is the classic approach to risk transfer. You pay an ongoing monthly or annual premium to a top-rated insurance carrier. In exchange, the carrier agrees to pay a specified daily or monthly benefit to cover your care costs, whether that care is delivered in a facility or in your own home.

This strategy allows you to leverage your money. Instead of keeping hundreds of thousands of dollars locked away in emergency savings, you pay a predictable premium and let the insurance company assume the risk. This frees up the rest of your retirement portfolio, allowing you to spend your retirement savings with confidence, knowing your care costs are covered.

Strategy 3: Modern Hybrid Plans (Asset-Based Care)

For many modern retirees, hybrid plans represent the ideal solution. These plans combine the benefits of long-term care coverage with life insurance or an annuity.

With a traditional policy, if you pay premiums for twenty years and never need care, the money is gone. It works just like car insurance. Modern hybrid plans eliminate this downside. If you need long-term care, the policy pays out tax-free benefits to cover your care. But if you pass away without ever needing care, a tax-free death benefit is paid directly to your children or beneficiaries. Your money is never lost.

Additionally, many modern plans include riders that allow family members—including your adult children—to get paid for providing your care at home. This allows you to receive care from the people you trust most, while ensuring they are financially compensated for their time and effort, removing the financial strain from your family.

Your Three Paths at a Glance

SELF-FUNDING HIGH RISK	TRADITIONAL LTC RISK TRANSFER	MODERN HYBRID ZERO WASTE
You act as your own insurance company Savings sit idle, losing power to inflation Several years of care can wipe it all out Your home and legacy are on the line	Predictable premium, carrier takes the risk Pays a set benefit for facility or home care Frees your portfolio to be spent with confidence If care is never needed, premiums are gone	LTC coverage combined with life insurance Tax-free benefits if you need care Tax-free death benefit if you never do Riders can pay family members to provide care

CHAPTER 3

How to Compare the Top Carriers Without the Stress

If you decide to protect your savings through an insurance or hybrid plan, you will quickly discover that the market is highly competitive. Different insurance companies target different age brackets, health profiles, and budget levels.

To get the best possible protection for the lowest possible cost, you must compare options from the top-rated carriers in the industry. The five leading carriers that consistently offer the strongest financial stability and the most flexible policy features are:

THE FIVE TOP-RATED CARRIERS WE COMPARE

Mutual of Omaha
Genworth
Transamerica
National Guardian Life
United Security

Each of these companies has unique underwriting guidelines. For example, one carrier might offer highly competitive rates for a married couple in their late 50s, while another carrier might offer better options for a single individual in their mid-60s with a minor pre-existing health condition.

Attempting to contact each of these carriers individually to gather quotes, compare policy details, and decipher the fine print is an exhausting, time-consuming process.

The most efficient way to secure the right coverage is to work with an independent specialist who has access to all five of these top-rated carriers. A licensed specialist can run a side-by-side comparison tailored to your specific age, health status, and financial goals, showing you exactly which company offers the maximum amount of protection for your budget.

THE BIGGER PICTURE

What Most People Miss

When it comes to long-term care planning, the single biggest mistake people make is waiting too long to take action.

Long-term care protection is unique because **you cannot buy it when you need it. You can only secure it when you are healthy.** The cost of your premium is determined by two primary factors: your age and your health status.

Every year you wait, two things happen. First, the baseline cost of the coverage increases simply because you are older. Second, you run the risk of developing a health condition—such as high blood pressure, diabetes, or a joint issue—that could either dramatically increase your premiums or disqualify you from coverage entirely.

> **Waiting is not a neutral decision. Waiting is a decision to accept 100% of the risk yourself.**

The sweet spot for securing this protection is **between the ages of 55 and 70**. This is the window where your health is typically stable, your retirement plans are solidifying, and the premiums are at their most affordable. By taking action during this window, you lock in your insurability, protect your home equity, and ensure that your children will never be forced to make difficult financial or personal sacrifices to manage your care.

YOUR NEXT STEP

Reach Out for More

You have taken the first step by educating yourself on the realities of long-term care and the limitations of Medicare. Now, it is time to turn this knowledge into a practical plan for your family.

At GoldenCare, we make this process entirely stress-free. We do not believe in high-pressure sales tactics or complicated jargon. Our job is to give you the clear, unbiased facts so you can make an informed decision.

We invite you to request your **free, personalized side-by-side quote comparison.**

When you request your comparison, a licensed specialist will review your details, compare the latest plans from Mutual of Omaha, Genworth, Transamerica, National Guardian Life, and United Security, and present you with a clear, easy-to-understand breakdown of your options.

You will see exactly what is available, what it costs, and how you can structure a plan to protect your home, preserve your savings, and keep your family secure.

This service is completely free, and there is absolutely no obligation. It is simply the easiest way to get the answers you need to protect your hard-earned future.

REQUEST YOUR FREE SIDE-BY-SIDE

QUOTE COMPARISON TODAY

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ABOUT

GoldenCare

GoldenCare has been a trusted leader in the long-term care planning industry since 1976. Now proud to be a part of Integrity Marketing Group, one of the nation's leading independent distributors of life and health insurance products, we are dedicated to helping American families navigate the complexities of retirement planning.

Over the past four decades, we have helped hundreds of thousands of people secure their assets and maintain their independence. With licensed specialists operating in every state, we provide independent, unbiased guidance, comparing options from the country's top-rated carriers to find the perfect fit for your unique needs. We believe in integrity, clarity, and helping you build a secure foundation for the years ahead.

IMPORTANT DISCLOSURE

This guide is for educational purposes only and does not constitute financial, legal, tax, or insurance advice. Costs, statistics, and program rules referenced are general industry figures and are subject to change; actual costs and coverage vary by state, carrier, plan design, age, and health status. Insurance products are subject to underwriting approval, and benefits, riders, and availability vary by carrier and state. Medicare and Medicaid eligibility rules are set by federal and state governments and may change. Individual results are not guaranteed. Please consult a licensed insurance professional regarding your specific situation before making any purchasing decision.