



Nationwide®

A simple underwriting experience

Nationwide CareMatters® Annuity is a streamlined long-term care (LTC) solution that can help you protect more clients. The simplified underwriting experience has fewer requirements, including no health interview¹ or Part B application and no attending physician statement (APS) or paramedical exam.

Application Submission (financial professional and client)

Pre-application:

- [Pre-screen](#) your client or review the height and weight guidelines and 6 underwriting questions below that determine insurability and rate class
- Verify your licensing appointment with Nationwide
- Complete annuity suitability (see section below)
- Ensure you have completed all [required training](#)
- Provide an outline of coverage to the client

The proposed insured must complete:

- The application
- The LTC personal worksheet
- 1035 paperwork, if applicable
- Other state-specific forms

Annuity Suitability must be completed at or before application submission.

This process may be completed through your firm or through Nationwide. If utilizing Nationwide's suitability process, the following guidelines must be met:

- Annuity concentration must be less than 75% of client's net worth
- Client must have liquid assets to cover 3 to 6 months of expenses
- Your client's surrender charges cannot exceed 8% (e.g., CDSC, MVA, Bonus Recapture)
- Any contracts being replaced must be at least 3 years old

Height and weight guidelines:

Height	Minimum weight (lbs)	Maximum weight (lbs)	Height	Minimum weight (lbs)	Maximum weight (lbs)
4'10"	82	191	5'10"	119	278
4'11"	84	197	5'11"	122	286
5'0"	87	204	6'0"	125	294
5'1"	90	211	6'1"	129	302
5'2"	93	218	6'2"	133	311
5'3"	96	225	6'3"	136	319
5'4"	99	232	6'4"	140	328
5'5"	102	240	6'5"	143	336
5'6"	106	247	6'6"	147	345
5'7"	109	255	6'7"	151	354
5'8"	112	262	6'8"	155	363
5'9"	115	270			

¹ A cognitive screening is required for clients aged 70 or older or for cause.

Insurability and rate class are determined by 6 underwriting questions within the application:

1. Is any Proposed Insured currently experiencing any of the following?
 - Hospitalization
 - Confinement to a bed
 - Residing in an assisted living facility
 - Receiving any home health care services
 - Receiving any adult day care services
 - Receiving care in a nursing facility
 - None of these

2. Is any Proposed Insured currently using or have been medically advised by a licensed healthcare professional within the past 5 years to use any of the following?
 - Walker
 - Wheelchair
 - Multi-prong cane
 - Hospital bed
 - Stair lift
 - Oxygen
 - Dialysis treatment
 - Hospice care
 - Motorized scooter
 - None of these

3. Does any Proposed Insured require assistance or supervision in performing any of the following activities?
 - Taking medication
 - Dressing
 - Bathing
 - Eating
 - Use of the restroom
 - Getting in or out of bed
 - Walking
 - Managing bowel or bladder
 - None of these

4. In the past 5 years, has any Proposed Insured been diagnosed or treated by a medical professional for any of the following?
 - Multiple sclerosis, Parkinson's disease, paralysis, muscular dystrophy, ALS (*Lou Gehrig's disease*) or Huntington's disease
 - Back surgery with ongoing pain, weakness, limitations, use of corticosteroids, or use of narcotic pain medication
 - Memory loss, mild cognitive impairment, dementia, or Alzheimer's
 - COPD (*Chronic Obstructive Pulmonary Disease*) or Emphysema with tobacco use
 - Cirrhosis of the liver
 - None of these

5. In the past 5 years, has any Proposed Insured been medically advised to have any surgery, hospitalization, treatment or test that was not completed or results that you have not received (excluding HIV)?
 - Yes
 - No

STOP: If any of the above conditions listed in questions 1-5 are applicable, the Proposed Insured is not eligible for coverage.

6. In the past 2 years, has any Proposed Insured been diagnosed, treated, or prescribed medication by a licensed healthcare professional for any of the following?
 - Aneurysm
 - Heart Disease
 - Head Injury
 - Peripheral vascular disease
 - Peripheral neuropathy
 - Diabetes
 - Stroke or Transient ischemic attack (*TIA*)
 - Multiple falls and/or fall resulting in a fracture
 - Balance disorder
 - Tremors
 - Blood clotting disorder
 - Organ transplant (excluding Cornea)
 - Rheumatoid arthritis with joint replacement or deformity
 - Arthritis with narcotics pain medication
 - Bipolar disorder, schizophrenia or psychosis disorder
 - None of these

Contact us today if you have questions or would like to inquire about Nationwide CareMatters® Annuity.

Life Insurance Solutions Center:	800-321-6064
Brokerage General Agents Solutions Center:	888-767-7373
Producer Group Solutions Center	844-867-8159

• Not a deposit • Not FDIC or NCUSIF insured • Not guaranteed by the institution
• Not insured by any federal government agency • May lose value



Nationwide®

FOR FINANCIAL PROFESSIONAL USE — NOT FOR DISTRIBUTION TO THE PUBLIC

This material is not a recommendation to buy or sell a financial product or to adopt an investment strategy. Investors should discuss their specific situation with their financial professional.

Fixed annuities are contracts purchased from a life insurance company. They are designed for long-term retirement goals. Withdrawals are subject to income tax, and withdrawals before age 59½ may be subject to a 10% early withdrawal federal tax penalty.

If you annuitize a nonqualified annuity, a portion of your payment will be considered a return of premium and will not be subject to ordinary income tax. The amount that is taxable will be determined at the time you elect to annuitize the policy. Upon annuitization, LTC benefits terminate unless the LTC Nonforfeiture Rider was elected in the contract, in which case benefits are significantly reduced. Withdrawals also reduce the available LTC benefits.

Nationwide CareMatters Annuity is a cash indemnity product that pays LTC benefits when the insured person is certified to have a qualifying condition and a need for LTC services. Bills and receipts showing actual expenses do not have to be submitted for payment of benefits once a claim has been approved. Each year, the contract owner can receive, tax free, the greater of the HIPAA per diem amount or actual LTC costs incurred. However, benefits may be taxable under certain circumstances. Taxpayers should consult with their tax and legal advisors about their specific situation.

Individual care needs and costs will vary, and there is no guarantee that the long-term care benefits paid under the contract will cover the entire cost of the insured's long-term care. Nationwide pays benefits to the contract owner. If the contract is owned by someone other than the insured, there is no guarantee that the contract owner will use the benefits to pay for LTC services.

All guarantees and benefits of the contract are backed by the claims-paying ability of the issuing insurance company. Contract guarantees and benefits are not backed by the broker/dealer and/or insurance agency selling the policy, nor by any of their affiliates, and none of them makes any representations or guarantees regarding the claims-paying ability of the issuing insurance company.

Approval for long-term care coverage under the contract and attached riders is subject to underwriting based on questions in the application and a cognitive screening for applicants age 70 and older.

Nationwide CareMatters Annuity might not be available in some states. Please contact Nationwide to determine product availability in your state.

Products are issued by Nationwide Life and Annuity Insurance Company, Columbus, Ohio.

Nationwide, The Nationwide N and Eagle and Nationwide CareMatters are service marks of Nationwide Mutual Insurance Company. © 2025 Nationwide

FAM-1814AO.1