

Long-Term Care Policyholder Services  
 John Hancock Life Insurance Company (U.S.A.) (not licensed in NY)  
 P.O. Box 55978  
 Boston, MA 02205-5978



Date: June 9, 2023

0012368 SP 4750 -C11-P12380-I 23



Nikolai Schlegel  
 #6 Elizabeth Ln  
 Danville, CA 94526

## Premium Notice

for your group long-term care insurance coverage

**Minimum payment due: \$1,291.20**  
**Due Date: 07/13/2023**

Account number: EPA0000625831252339N

Payment Period: 07/2023 - 12/2023



### Payment options

**Online** – make a one-time payment from a checking or savings account by visiting [johnhancock.com/ltc](http://johnhancock.com/ltc). This is the fastest and a secure option.

**Mail** – detach payment coupon and return in the enclosed envelope.

- Please do not write on the payment coupon (other than amount being paid)
- Please do not include any miscellaneous correspondence

**See page 2 for additional important notes before mailing a payment.**

### Your Premium

| LTC ID-<br>Name                    | Annual<br>premium | Payment<br>received<br>(minus) | Remaining<br>premium<br>(equal) | Minimum<br>payment due |
|------------------------------------|-------------------|--------------------------------|---------------------------------|------------------------|
| 10549872-<br>Nikolai Schlegel      | \$1,267.20        | \$633.60                       | \$633.60                        | \$633.60               |
| 10550366-<br>Stephanie<br>Schlegel | \$1,315.20        | \$657.60                       | \$657.60                        | \$657.60               |
| <b>Total</b>                       | <b>\$2,582.40</b> | <b>\$1,291.20</b>              | <b>\$1,291.20</b>               | <b>\$1,291.20</b>      |

If you have already mailed us your premium payment, you may disregard this notice; the payment and bill may have simply crossed in the mail. If you have not yet made a payment, please submit as soon as possible to ensure it is received by the premium due date. For additional information about the premium amount due, please see page 2.

Tear off and return the bottom portion with your payment. Keep this portion for your records.



**Please make your check payable to:**  
 John Hancock Life Insurance Company  
 (U.S.A) and enter your account number  
 on the memo field

|                       |                  |
|-----------------------|------------------|
| LTC ID                | 10549872         |
| Coverage payor        | Nikolai Schlegel |
| Minimum payment due   | \$1,291.20       |
| Payment due date      | 07/13/2023       |
| Total amount enclosed | \$               |

Mail payment to:

John Hancock  
 Group Long-Term Care  
 P.O. Box 7247-0356  
 Philadelphia, PA 19170-0356

EPA000062583125233931IR0001202307000129120000129120



### Important details for payments by mail

Thank you for choosing John Hancock to help meet your financial protection needs. If you wish to send a payment via the mail, please review the following details to help ensure there are not processing delays:

- Include the coupon on page one with your payment, and return in the enclosed envelope
- Do not write anything on the payment coupon other than the payment amount enclosed
- Do not include any miscellaneous correspondence. If you need to send us a form or other information and are not sure how to submit it to us, please visit [johnhancock.com/ltc](http://johnhancock.com/ltc) or call us
- Checks must be written from a personal checking or savings account (i.e., third-party checks are not allowed)

Please also note that premiums are being sent to a P.O. Box that does not accept overnight payments. If you are concerned about your check arriving in time, we encourage you to use our one-time payment option, available at [johnhancock.com/ltc](http://johnhancock.com/ltc).

### Understanding your premium

As the payor for this group long-term care insurance plan, you may choose to pay the insurance premiums annually or semi-annually. The details below provide additional details about your premium breakdown:

- **Annual premium:** this is the annual amount of your base premium currently due
- **Payment received:** a payment may have been required due to a premium or benefit change. This amount reflects any payment made toward that change.
- **Remaining payment:** this is any remaining premium due to pay for the premium or benefit change.
- **Minimum payment due:** this is the semi-annual premium, and minimum amount that must be paid to keep the coverage in-force.

For questions or concerns, please call at 800-482-0022 (for the TDD hearing/speech impaired, please call 800-555-5421). We are available Monday through Friday, 8:00 a.m. to 5:00 p.m. Eastern Time.

## Manage your long-term care policy online - visit [johnhancock.com/ltc](http://johnhancock.com/ltc)

By creating an account, you will have quick, easy, and secure access to:

- ✓ **Online payments.** Make one-time payments via a checking or savings account
- ✓ **Paperless delivery.** Go green and sign up for digital notifications and documents
- ✓ **Policy details.** View premium history and coverage information
- ✓ **Claims center.** Start a new claim and manage once approved