

FILED

JUN 05 2015

**SONYA KRASKI
SNOHOMISH COUNTY CLERK
EX-OFFICIO CLERK OF COURT**

**STATE OF WASHINGTON
SNOHOMISH COUNTY SUPERIOR COURT**

STATE OF WASHINGTON,

Plaintiff,

v.

**PETER G. COOK and CAROLYN Y.
COOK,**

Defendants.

NO. **15 2 04345 3**

**COMPLAINT FOR INJUNCTIVE
AND OTHER RELIEF**

COMES NOW, Plaintiff, State of Washington (hereinafter “the State”), by and through its attorneys Robert W. Ferguson, Attorney General, and Jeffrey G. Rupert, Assistant Attorney General, and brings this action against Defendants Peter G. Cook and Carolyn Y. Cook. The State alleges the following on information and belief:

I. INTRODUCTION

1.1 Peter G. Cook and Carolyn Y. Cook have been doing business as C & C Consulting (“C&C”) for approximately ten (10) years. C&C’s clients were and are elderly residents of Washington concerned about their dwindling financial resources in their final years of life. These elderly Washington residents needed advice on the laws, rules, regulations, and applications of state and federal government needs-based programs – namely, Medicaid and Veterans Administration (VA) Aid and Attendance – to obtain necessary care. C&C provided Medicaid and VA Aid and Attendance planning services whereby they advised their elderly clients

1 on how to obtain government needs-based benefits while also preserving assets for a spouse, child,
2 or heir. As part of its Medicaid and VA Aid and Attendance planning services, C&C gathered
3 facts from each client and then applied Medicaid and/or VA Aid and Attendance law, rules, and
4 regulations to those facts. C&C then prepared a recommended course of action for its client, which
5 might include gifting, the purchase of certain annuities, divestiture of assets, the use of trusts, and
6 other financial and legal estate planning strategies. C&C charged clients consulting fees that
7 typically ranged from \$2,500 to \$5,900 per client and also received commissions for the sale of
8 annuities that it sold to these clients.

9 **1.2** Every C&C client seeking Medicaid and/or VA Aid and Attendance planning
10 services entered into a Service Agreement with C&C. This Service Agreement, which was
11 drafted by C&C, provided that "Medicaid planning represents a complex area of the law and
12 no two cases are exactly alike. It is essential to obtain competent legal advice from an attorney
13 who understands this particular area of the law." See sample Service Agreement attached as
14 Exhibit A, Paragraph C. To address the need for legal advice, the Service Agreement for every
15 C&C client provided that "A portion of the fee you pay to C & C Consulting will be paid to
16 your C & C Consulting appointed attorney for legal services." See Exhibit A, Paragraph C.
17 This was a lie.

18 **1.3** Peter Cook admitted under oath that Paragraph C of the C&C's Service
19 Agreement, which was the basis for every C&C client relationship, was a misrepresentation.
20 C&C never paid any portion of its fee to any attorney. Indeed, Cook admitted that C&C never
21 obtained an attorney for any client, nor did C&C consult with an attorney paid for by C&C
22 regarding C&C's advice to any specific client. Except for the few clients that had their own
23 separate private attorney, no attorney reviewed the clients' needs and assets, the application of
24 Medicaid and VA law to those facts, or the appropriateness of C&C's proposed plan.

25 **1.4** C&C's dealings with elderly Washington citizens were and are a pattern and practice
26 of unfairness and deception. In addition to the misrepresentations described above, C&C violated

1 state and federal law by providing VA Aid and Attendance services without being accredited by the
2 VA and by charging a fee. Further, C&C offered and sold fixed immediate annuity products offering
3 an unconscionably low 0% interest rate that was not approved by the Insurance Commissioner.
4 When asked how any agent could recommend a fixed immediate annuity with a 0% rate of return,
5 Peter Cook testified that this was the best rate possible. This was yet another lie. Peter Cook also
6 deceptively acted as an insurance agent even though he did not have an insurance license.
7 Additionally, when clients complained, C&C refused to provide refunds as permitted under its
8 Service Agreement or claimed that C&C had provided hours of service that it did not provide.
9 Moreover, for clients applying for government benefits, C&C at times took months to respond to
10 clients and delayed their Medicaid filings, forcing the client to submit the application themselves
11 even though they had paid C&C thousands of dollars for the service. Numerous C&C clients were
12 denied or experienced a delay in obtaining Medicaid and VA Aid and Attendance benefits.

13 **1.5** Peter Cook and Carolyn Cook have violated and continue to violate the
14 Washington Consumer Protection Act, RCW 19.86.

15 **II. JURISDICTION AND VENUE**

16 **2.1** This Complaint is filed and these proceedings are instituted under the provisions
17 of the Consumer Protection Act (“CPA”), RCW 19.86.

18 **2.2** Jurisdiction of the Attorney General to commence this action is conferred by RCW
19 19.86.080. Venue is proper in Snohomish County pursuant to RCW 4.12.020 and 4.12.025. For
20 all times relevant to the complaint, Defendants have resided in Snohomish County. The violations
21 alleged herein have been committed in part in Snohomish County, Washington by Defendants.
22 Further, a number of the agreements at issue were entered into in Snohomish County.

23 **III. DEFENDANTS**

24 **3.1** Defendant Peter Cook was at all times relevant to this action doing business as
25 C&C based in Snohomish County at several locations as well as from his home located at 7617
26 201st Street SE, Snohomish, WA 98296-5159. Defendant Peter Cook participated in,

1 formulated, directed, executed, controlled, had the authority to control or participate in, and
2 had knowledge of the acts and practices set forth in this Complaint.

3 **3.2** Defendant Carolyn Cook was at all times relevant to this action doing business
4 as C&C based in Snohomish County at several locations as well as from her home located at
5 7617 201st Street SE, Snohomish, WA 98296-5159. Defendant Carolyn Cook participated in,
6 formulated, directed, executed, controlled, had the authority to control or participate in, and
7 had knowledge of the acts and practices set forth in this Complaint.

8 **3.3** C & C Consulting is a trade name that Peter Cook and Carolyn Cook use and
9 have used to do business. From 2003 to present, C & C Consulting was registered with the
10 Washington Department of Revenue as sole proprietorship for Carolyn Cook under several
11 different tax registration numbers. The Cooks never registered C & C Consulting with the
12 Washington Secretary of State. However, from 2005 to 2011, there was a related entity named
13 C & C Consulting Services Corp. registered with the Washington Secretary of State. C & C
14 Consulting Services Corp. was purportedly owned and run by Perry Cook, who is Peter Cook's
15 son. Peter Cook testified that he assisted Perry Cook in running C & C Consulting Services
16 Corp., which performed the same services as those provided by Peter Cook. Both C & C
17 Consulting entities used the same letterhead and Peter Cook provided services to both. When
18 C & C Consulting Services Corp. closed in 2011, all of its clients apparently became clients of
19 Peter Cook doing business as C & C Consulting.

20 **IV. NATURE OF TRADE OR COMMERCE**

21 **4.1** Defendants Peter and Carolyn Cook were at all times relevant to this lawsuit
22 engaged in trade or commerce within the meaning of RCW 19.86.020 by offering and
23 providing Medicaid and VA Aid and Attendance planning services and the sale of annuities
24 and other insurance products.

25 **V. FACTS**

26 **5.1** Medicaid is a state and federal government program available to people with

1 very limited income and resources. Medicaid eligibility is based on an applicant's needs,
2 income, and assets. Community Options Program Entry System (COPES) is one of
3 Washington State's Medicaid programs. During the time that C&C has been providing
4 Medicaid planning services, Medicaid has undergone substantial changes, including many
5 changes related to the Affordable Care Act. The state and federal programs have numerous
6 rules and regulations. Throughout all of these changes, Medicaid has included a look-back rule
7 that includes gifts and asset transfers made during the look-back period when evaluating an
8 applicant's countable assets.

9 **5.2** For any veteran with 90 days of active duty with one day of service during a
10 period of war, VA Aid and Attendance is an increased monthly pension amount added to a
11 veteran or surviving spouse's monthly pension amount if certain conditions are met. To
12 qualify medically, a veteran or surviving spouse either must be (a) a patient in a nursing home
13 or assisted living facility due to mental or physical incapacity, (b) in need of the assistance of
14 another person to perform daily tasks, or (c) blind. *See* 38 C.F.R. § 3.352. Additionally, the
15 applicant must have income and assets below a certain amount, but certain assets such as a
16 home are exempted from the asset test. *See* 38 C.F.R. § 3.271, et seq. VA Aid and Attendance
17 currently does not have a look-back period for countable assets.

18 **5.3** Peter Cook, doing business as C & C Consulting and on behalf of C & C
19 Consulting Services Corp., provided Medicaid and VA Aid and Attendance planning services
20 to over 75 clients since at least 2008. Carolyn Cook acted on behalf of C&C mainly in the sale
21 or offer of sale of annuity policies to clients of both entities.

22 **5.4** As part of its Medicaid planning and VA Aid and Attendance planning services,
23 C&C gathered facts from each client and then applied Medicaid and/or VA Aid and
24 Attendance law, rules, and regulations to those facts. C&C then prepared a recommended
25 course of action for its client, and this recommended plan might include gifting, the purchase
26 of certain annuities, divestiture of assets, the preparation and use of trusts, and other financial

1 and legal estate planning strategies.

2 **5.5** Peter Cook and Carolyn Cook misrepresented that they were qualified to
3 provide Medicaid and VA Aid and Attendance planning services. Neither Peter Cook nor
4 Carolyn Cook has ever been a licensed attorney. Peter Cook claims that he taught himself
5 Medicaid and VA Aid and Attendance law as well as the applicable rules and regulations by
6 examining the laws, rules, and regulations for an unknown time period and asking a lawyer
7 approximately ten (10) hours of general questions on the programs over a period of ten (10)
8 years. Carolyn Cook apparently does not claim to have any expertise in Medicaid or VA Aid
9 and Attendance planning.

10 **5.6** C&C's services were explained in a C&C document that it gave to each of its
11 clients titled Washington State Senior's Guide to Long Term Care and Asset Protection.
12 (Attached as Exhibit B). C&C described its services as follows:

13 C & C Consulting Offers many services to enable clients to gather and evaluate
14 information, make wise decisions, and implement plans for care and asset
15 preservation.

- 16 • No cost initial consultation
- 17 • Medicaid qualification issues and questions.
- 18 • Clarification of Medicaid and COPES rules.
- 19 • Preservation of assets and savings.
- 20 • Reducing care costs.
- 21 • Applying for Medicaid or COPES benefits.
- 22 • Completing Medicaid and COPES applications.
- 23 • Examining your best options for payment of care.
- 24 • Education on Long Term Care issues and costs.
- 25 • Preserving assets for your spouse.
- 26 • Preserving assets for future care.

- 1 • Preserving access to future quality care.
- 2 • Making the best use of Medicaid benefits.
- 3 • Developing asset protection strategies.
- 4 • Asset transfers and gifts.
- 5 • Full service PLAN implementations.
- 6 • Meeting with family members.
- 7 • Protecting your primary residence.
- 8 • Help with evaluating your best care options.
- 9 • Medicaid planning services.
- 10 • Adult Family Homes, reducing your care cost.

11 See Exhibit B, Bates Label C&CC 000144.

12 **5.7** Noticeably absent from C&C's promotional material was any mention of VA Aid
13 and Attendance benefits. When asked if C&C provided specific VA Aid and Attendance advice to
14 clients or appeared before the VA, Peter Cook repeatedly denied under oath that C&C had any
15 involvement in advising clients on VA Aid & Attendance issues. When later confronted with
16 C&C's own customer files, Cook eventually admitted that C&C had provided advice on specific
17 VA Aid and Attendance applications and had even written letters to the VA on behalf of clients.

18 **5.8** In providing VA Aid and Attendance planning services, C&C violated federal
19 and state law. Federal regulations specify that only accredited agents and attorneys may advise
20 clients on specific issues and applications. 38 C.F.R. §14.629(b). Further, only accredit agents
21 or attorneys may charge a fee, and this may only occur after an initial application is denied
22 unless the fee is paid by a disinterested third party. 38 C.F.R. §14.636(b) and (c). Neither
23 Peter Cook nor Carolyn Cook were or are accredited VA agents or attorneys. Further, C&C
24 charged for its VA Aid and Attendance services that included advice on specific files,
25 completing VA applications, and for letters written to the VA on behalf of clients. C&C
26 misrepresented that it was permitted to provide advice to clients on specific claims, that it was

1 permitted to appear for clients before the VA, and that it was permitted to charge a fee for
2 doing so.

3 **5.9** Every C&C client seeking Medicaid or VA Aid and Attendance planning
4 services entered into a Service Agreement drafted by C&C that provided in part as follows:

5 C. A portion of the fee you pay to C & C Consulting will be paid to your C
6 & C Consulting appointed attorney for legal services. Medicaid planning
7 represents a complex area of the law and no two cases are exactly alike.
8 It is essential to obtain competent legal advice from an attorney who
9 understands this particular area of the law.

10 D. The portion of your one time fee that pays legal services covers those
11 basic services that are required for every Medicaid or COPES plan. This
12 includes evaluation of legal planning documents, recommendations and
13 consultation during plan implementation. Your attorney may
14 recommend additional legal services if it is determined to be necessary
15 or advisable to protect your assets. Your one time fee will include
16 payment for legal services necessary to defend your position with
17 DSHS, including, but not limited to Administrative Hearings and legal
18 filings. Your one time fee does not cover legal fees for services that are
19 necessary for financial planning, including preparation of Trusts, Powers
20 of Attorney, Wills, Deeds, and revising estate planning documents.
21 Moreover, your one time fee does not include legal services that are
22 reasonably determined to be outside the scope of matters routinely
23 involved in obtaining initial eligibility for Medicaid and protecting
24 assets from estate recovery.
25
26

18 See Exhibit A, Paragraphs C and D.

19 **5.10** Despite its express obligations under the Service Agreement to obtain and pay for
20 necessary legal services for its client, neither Peter Cook nor Carolyn Cook ever obtained an
21 attorney for, or consulted with an attorney regarding C&C's advice to any specific client. Further,
22 C&C never paid any portion of its fee to any attorney. Except for the few clients that had their
23 own separate private attorney, no attorney reviewed the clients' needs and assets, the application of
24 Medicaid and VA law to those facts, or the appropriateness of C&C's proposed plan.
25
26

1 **5.11** Numerous C&C clients experienced a delay in obtaining benefits or were denied.
2 Moreover, for clients applying for government benefits, C&C at times took months to respond to
3 clients and delayed their Medicaid filings. In some instances, C&C was so unresponsive and/or
4 inept that the client had to submit the application themselves even though they had paid C&C
5 thousands of dollars for the service.

6 **5.12** Washington law prohibits an unlicensed person from selling, soliciting, or
7 negotiating insurance. RCW 48.17.060. Peter Cook formerly had an insurance license, but did
8 not attempt to renew his license in 2007 or thereafter due to probation arising from a lawsuit of
9 an elder fraud scheme in California. In 2008, Carolyn Cook obtained an insurance license.
10 Despite the fact that Peter Cook did not have a license after 2007, he with the assistance of
11 Carolyn Cook continued to act as an insurance agent by selling, soliciting, and negotiating
12 insurance while misrepresenting that he was able to do so.

13 **5.13** C&C recommended to many of its clients included that the client purchasing an
14 annuity policy that was "Medicaid friendly" from C&C. For certain irrevocable non-
15 transferrable annuities where the Washington Department of Social and Health Services
16 (DSHS) is listed as a beneficiary, DSHS will not include the purchase price of the annuity as a
17 countable asset when evaluating countable assets during the Medicaid look-back period. If a
18 person dies during this period, DSHS will only collect the amounts used for the cost of care
19 and the remainder of the annuity can pass to the other annuity beneficiaries.

20 **5.14** C&C recommended that numerous clients purchase 5-year irrevocable non-
21 transferrable "Medicaid friendly" annuities with a 0% interest rate (i.e., the client pays the
22 insurance company \$100,000, and receives a yearly payment of \$20,000 for five years) from
23 Western United Life Insurance Company ("Western United"), and some clients purchased such
24 annuities. Washington law requires that a recommendation by an insurance agent must be
25 reasonable under all circumstances actually known to the agent at the time of the recommendation.
26 RCW 48.23.015. Further, unless an insurance policy interest rate and form is approved by the

1 Insurance Commissioner, it may not be issued or sold in Washington. RCW 48.18.100. The
2 Insurance Commissioner never approved the Western United forms containing the 0% interest
3 annuity rate for sale and issuance in Washington, but C&C misrepresented that such form was
4 approved for sale and issuance. This interest rate was unconscionably low and any
5 recommendation to purchase it was unreasonable. Nonetheless, Peter Cook testified under oath
6 that 0% interest rate was the best rate that C&C could obtain for many of its annuity clients. This
7 was an unfair and deceptive practice. RCW 19.86; RCW 48.30.010; WAC 284-30-330(1).

8 **5.15** When clients complained, C&C refused to provide refunds as permitted under its
9 Service Agreement or claimed that C&C had provided hours of service that it did not provide.
10 Paragraph E of the Service Agreement that every C&C client entered into provided that a client
11 could terminate the relationship at any time. If termination occurred, C&C would retain a set
12 termination fee “as well as costs incurred in connection with the services incurred.” Peter Cook
13 stated under oath that he valued his time at \$150 per hour and would multiply that figure by the
14 amount of time spent. However, for clients seeking a refund, Cook falsified the amount of time
15 that C&C actually spent when calculating the refund amount. Even though his own files listed
16 the amount of time spent on that specific file, Cook testified that he did not use this amount but
17 rather had other methods of calculating the time spent that only he knew but could not describe.
18 In one instance, C&C entered into a Service Agreement with a client for \$5,900, recommended
19 that the client buy an annuity from C&C, and requested that the client provide financial
20 documents. A week later, the client informed C&C that the client would not buy an annuity and
21 terminated the Service Contract. After repeated demands from the client for a refund, Cook
22 responded approximately five (5) months later and claimed that the balance of the account –
23 \$5,400 after the cancellation fee was deducted – “had been used” with no documentation of any
24 kind regarding the time spent for the short time period of the client relationship. The client
25 continued to demand a refund. Nearly seven (7) months after the termination of the Agreement,
26 Cook refunded the client \$2,900. C&C never provided the client with a description of the time

1 spent by C&C justifying the amount retained by C&C, and Cook could not recall any of the
2 services that he provided in the one (1) week before the Service Agreement was terminated.

3 **5.16** Defendants Peter Cook and Carolyn Cook engaged in an unfair and deceptive
4 scheme of acts and practices in trade or commerce that are contrary to the public interest and
5 are not in reasonable relation to the development or preservation of business in violation of
6 RCW 19.86.020. Defendants engaged in numerous unfair and deceptive acts in the course of
7 its dealing with Washington consumers, some of which are continuing. Notably, it is an unfair
8 and deceptive practice to misrepresent that a portion of a fee will be used to consult with an
9 attorney when that was not true. It is an unfair and deceptive act or practice to represent that
10 legal services are necessary and that they will be provided, and then not provide those services.
11 It is an unfair and deceptive act or practice to act as an unaccredited VA agent and collect fees
12 for your services. It is an unfair and deceptive practice to sell unapproved 0% interest rate
13 annuity policies. It is an unfair and deceptive practice to act as an insurance agent when one
14 does not possess the necessary licenses. Defendants Peter Cook and Carolyn Cook engaged in
15 numerous other unfair and deceptive acts as detailed throughout this Complaint.

16 **VI. FIRST CAUSE OF ACTION – VIOLATIONS OF THE CONSUMER
17 PROTECTION ACT**

18 **6.1** Plaintiff realleges and incorporates by reference the allegations set forth in each
19 of the preceding paragraphs of this Complaint.

20 **6.2** As detailed throughout this Complaint, Defendants Peter Cook and Carolyn Cook
21 engaged in, and continue to engage in, a pattern of practices and acts related to their Medicaid
22 and VA Aid and Attendance planning and annuity sales services; the net impression of which
23 was deceptive. Further, Defendants' actions were procedurally and substantively unfair. It is an
24 unfair and deceptive practice to misrepresent that a portion of a fee will be used to consult with
25 an attorney when that is not true. It is an unfair and deceptive act or practice to represent that
26 legal services are necessary and that they will be provided, and then not provide those services.

1 It is an unfair and deceptive act or practice to act as an unaccredited VA agent and collect fees
2 for your services. It is an unfair and deceptive practice to sell unapproved 0% interest rate
3 annuity policies. It is an unfair and deceptive practice to act as an insurance agent when one
4 does not possess the necessary license. Defendants Peter Cook and Carolyn Cook participated
5 in, formulated, directed, executed, controlled, had the authority to control or participate in, and
6 had knowledge of these and other unfair and deceptive acts and practices as set forth throughout
7 this Complaint.

8 **6.3** Given the totality of circumstance described throughout this complaint,
9 Defendants' acts and practices affect the public interest, have the capacity to deceive a
10 substantial number of consumers, and are an unfair or deceptive act or practice in trade or
11 commerce and unfair method of competition in violation of RCW 19.86.020. Defendants Peter
12 Cook and Carolyn Cook violated the CPA.

13 **VIII. PRAYER FOR RELIEF**

14 **WHEREFORE**, Plaintiff, State of Washington, prays for relief as follows:

15 **7.1** A Declaration that Defendants Peter Cook and Carolyn Cook have engaged in the
16 conduct complained of herein.

17 **7.2** A Declaration that Defendants Peter Cook and Carolyn Cook's acts described
18 above are unfair or deceptive acts or practices in trade or commerce, affecting the public interest,
19 and in violation of the Consumer Protection Act, RCW 19.86.

20 **7.3** That the Court issue a permanent injunction enjoining and restraining
21 Defendants Peter Cook and Carolyn Cook, their representatives, successors, assigns, officers,
22 agents, servants, employees, and all other persons acting or claiming to act for, on behalf of, or
23 in active concert or participation with Defendants from continuing or engaging in the unlawful
24 conduct complained of herein.

1 7.4 That the Court assess civil penalties, pursuant to RCW 19.86.140, of up to two
2 thousand dollars (\$2,000) per violation against Defendants Peter Cook and Carolyn Cook for each
3 and every violation of RCW 19.86.020 caused by the conduct complained of herein.

4 7.5 That the Court make such orders pursuant to RCW 19.86.080 as it deems
5 appropriate to provide for equitable relief to Washington consumers as a result of the conduct
6 complained of, including but not limited to restitution.

7 7.6 That the Court make such orders pursuant to RCW 19.86.080 to provide that
8 Plaintiff, State of Washington, recover from Defendants Peter Cook and Carolyn Cook the costs
9 of this action, including reasonable attorney's fees.

10 7.7 That the Court order such other relief as it may deem just and proper to fully and
11 effectively dissipate the effects of the conduct complained of herein, or which may otherwise
12 seem proper to the Court.

13
14 DATED this 5 day of June, 2015.

15 ROBERT W. FERGUSON
16 Attorney General

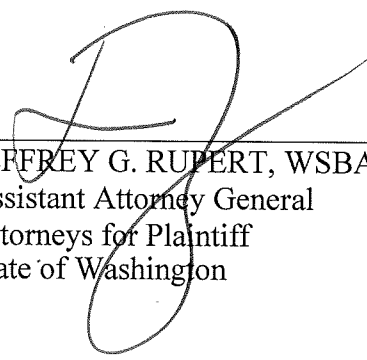
17
18 
19 _____
20 JEFFREY G. RUPERT, WSBA #45037
21 Assistant Attorney General
22 Attorneys for Plaintiff
23 State of Washington
24
25
26

EXHIBIT A

C & C Consulting
Service Agreement

"Implementation of Personal Plan"

- A. C & C Consulting agrees to provide services to you, [REDACTED] and [REDACTED] in connection with preserving resources and securing eligibility for Federal and State medical and personal care benefits, as follows:
1. Assist you with gathering information necessary to determine eligibility for Federal and State medical and personal care benefits programs.
 2. Evaluate your finances: including, income, assets, expenses, need for medical and personal care services and eligibility for available State and Federal medical and Long Term Care benefit programs.
 3. Assist in choosing an appropriate Plan and strategy for preservation of existing assets and property, and for obtaining accelerated eligibility for State and Federal Long Term Care funding programs that pay for medical and personal care services.
 4. Review and integrate existing Health Insurance plans, Prescription Drug Insurance plans and Long Term Care Insurance policies, as necessary to complete your Plan.
 5. Work closely with your personal attorney or your appointed C & C Consulting attorney to implement the eligibility plan as directed by you and your attorney.
 6. Preparation and filing of the Medicaid or COPES applications as necessary to complete the implementation of your Plan. Attend and provide counsel for a Fair Hearing with the Department of Health and Social Services if necessary to obtain qualification for benefits.
 7. Create as necessary, "Extended Care Contracts" with your existing or future Adult Family Home or Assisted Living facility that will effectively enable you to gain access to quality care facilities as well as reduce your cost of care.
 8. Although C & C Consulting does not pay for or provide legal services for Estate Planning services, such as; Wills, Powers of Attorney, etc., we can make referrals to Attorneys who provide these services.
 9. C & C Consulting will provide consultation as needed, manage and supervise the process of evaluation, planning and implementation of your individual Plan for asset preservation, Long Term Care and qualification for State and Federal medical and personal care funding programs.
- B. C & C Consulting will provide the above services for a one time flat fee of \$ 2500.-. If your Medicaid application is denied, C & C Consulting will continue to provide the above services, including a subsequent application, at no additional charge, until the application is approved.
- C. A portion of the fee you pay to C & C Consulting will be paid to your C & C Consulting appointed attorney for legal services. Medicaid planning represents a complex area of the law and no two cases are exactly alike. It is essential to obtain competent legal advice from an attorney who understands this particular area of the law.
- D. The portion of your one time fee that pays legal services covers those basic services that are required for every Medicaid or COPES plan. This includes evaluation of legal planning documents, recommendations and consultation during plan implementation. Your attorney may recommend additional legal services if it is determined to be necessary or advisable to protect you or your assets. Your one time fee will include payment for legal services necessary to defend your position with DSHS, including, but not limited to Administrative Hearings and legal filings. Your one time fee does not cover legal fees for services that are necessary for financial planning, including preparation of Trusts, Powers of Attorney, Wills, Deeds, and revising estate planning documents. Moreover, your one time fee does not include legal services that are reasonably determined to be outside the scope of matters routinely involved in obtaining initial eligibility for Medicaid and protecting assets from estate recovery.

- E. You may terminate your relationship with C & C Consulting at any time for any reason. If you choose to terminate your relationship with C & C Consulting, your one time fee will be refunded to you, provided however, that C & C Consulting will retain a cancellation fee of \$ 500., as well as all costs incurred in connection with services already rendered. Such costs shall include, but are not limited to, telephone charges, special-cost mailing, courier delivery charges, photocopying, reasonable hourly fee for services performed, and any legal fees already earned as described in paragraph D, above.
- F. C & C Consulting reserves the right to withdraw its services if you refuse to follow important legal advice or otherwise pursue a course of action that C & C Consulting, in its sole discretion, deems to be inconsistent with its judgment and advice regarding the best practice for obtaining Medicaid or COPEs eligibility. If services are withdrawn, C & C Consulting will refund your fee to you, provided however, that C & C Consulting will retain all costs incurred in connection with services already rendered. Such costs shall include, but are not limited to, long-distance telephone charges, special-cost mailing, courier delivery charges, photocopying, reasonable hourly fee for services performed, and any legal fees already earned as described in paragraph D, above.
- G. C & C Consulting will perform all agreed tasks with care and will work diligently to secure your eligibility for Medicaid or COPEs benefits. However, the laws that govern Medicaid and COPEs eligibility and other medical entitlement programs change frequently. As such, C & C Consulting cannot promise that you will obtain Medicaid eligibility. If C & C Consulting is unable to secure your eligibility for Medicaid benefits, C & C Consulting will refund your fee to you, provided however, that C & C Consulting will retain all costs incurred in connection with services already rendered. Such costs shall include, but are not limited to, long-distance telephone charges, special-cost mailing, courier delivery charges, photocopying, reasonable hourly fee for services performed, and any legal fees already earned as described in paragraph D, above.

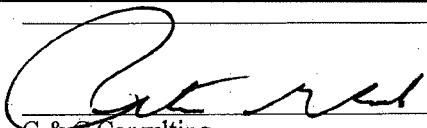
We, the undersigned, have read the above Service Agreement and Attachment A, "Disclosure Statement."



Date: 9/15/10

Date: / / Client

Date: 9/15/10



C & C Consulting
5400 Carillon Point
Bldg 5000, Suite 400
Kirkland, WA 98033

ATTACHEMENT A

DISCLOSURE STATEMENT

Government Program. Medicaid is a government program authorized by the federal government and administered by the State of Washington Department of Social and Health Services. COPES is one of Washington State's Medicaid programs. Medicaid and COPES are not insurance products and C & C Consulting does not purport to be marketing or offering Medicaid as a product sponsored by or provided by C & C Consulting.

Application. Any person who meets certain financial and medical requirements may become eligible for Medicaid (or COPES). You may apply for Medicaid on your own by contacting the Washington State Department of Social and Health Services (DSHS). DSHS offers assistance to those who need help applying for Medicaid. You are not required by law to use C & C Consulting to access Medicaid. You are not required by law to retain an attorney or any other professional in connection with your application for benefits.

Legal Advice. Information provided to you by C & C Consulting is not legal advice. Neither C & C Consulting, nor any agent of C & C Consulting, purports to be an expert in the laws and regulations that govern Medicaid eligibility.

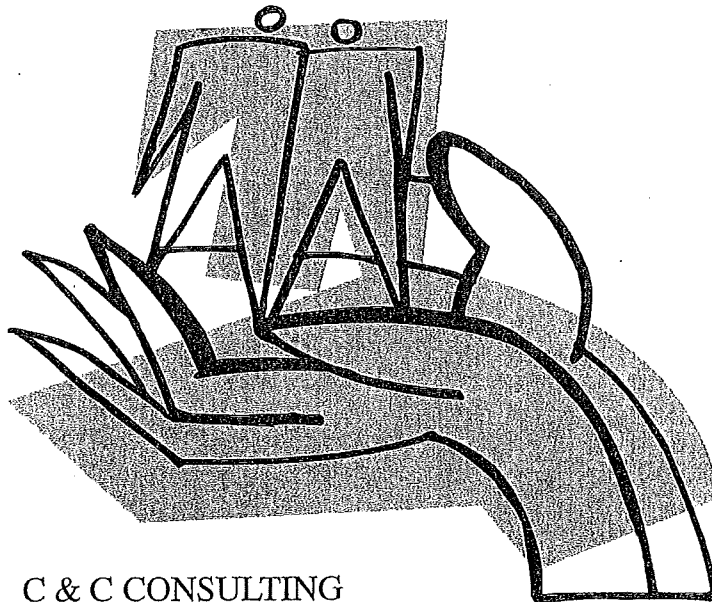
Changing Law. Medicaid programs are governed by federal and state law. The rules and regulations are constantly changing and future changes in the rules regarding qualification may or may not be retroactive. It is the law in effect at the time of the application that controls. C & C Consulting does not give any assurance that you will remain eligible for benefits after obtaining initial eligibility. C & C Consulting is not able to make a commitment to notify all clients about rule changes if or when they occur in the future.

Death of Applicant. Many of the clients to whom C & C Consulting provides assistance are in poor health. It is not uncommon for a client to die before all of the planning has been fully implemented. Some planning (estate recovery planning in particular) may take months or even years to fully implement, and if the Medicaid Applicant predeceases the completion of the plan, the planning objective may not be realized. C & C Consulting is not responsible for any problems or losses that may arise as a result of the death of the Applicant before all recommended steps have been taken.

EXHIBIT B

WASHINGTON STATE

SENIORS' GUIDE TO
LONG TERM CARE
AND
ASSET PROTECTION



C & C CONSULTING

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Introduction

The Seniors' Guide to Long Term Care and Asset Protection provides valuable information on selecting proper care, determining the best way or ways of reducing care costs, and also preserving resources for future use. Providing continuous quality Long Term Care to a loved one who has limited financial resources for care is a common problem for many families. Sometimes, a spouse's well being is jeopardized if care costs for their ill spouse exceeds their income and financial assets — assets are in jeopardy of being spent-down. The early preservation of financial assets ensures availability of quality long term care options when needed — without financial assets many quality care options are gone.

Obtaining unbiased and accurate information on Long Term Care is not simple. Some information is available from the Government and private sources. The information has to be integrated and applied to each individual's needs and circumstances before a PLAN is developed. Unfortunately, there is no one single PLAN, since each person has their own needs and circumstances. Most seniors and their families do not have the experience or knowledge to develop a PLAN for Long Term Care and Asset Protection without some type of Professional assistance.

True Story with a Happy Ending

The names in the following true story have been changed, but the story will still give a perspective on Long Term Care. Alice age 71, and Norman age 74, have been mar-

ried for 52 years. Norman was in the early stages of Alzheimer's disease and Alice was finding it more and more difficult each day to care for Norman. She was getting only four hours sleep each day, since Norman required her constant attention and care. At times, Norman would get up and wander away from home. The police would find him wandering and lost. The locked doors and gates were no longer keeping him safe at home. Alice was forced to remove the microwave, since Norman tried cooking anything that was in the refrigerator or kitchen including lettuce and canned goods. All the knobs on the stove and oven were removed for safety purposes. Alice put child proof locks on all the cupboards, cabinets and doors. Alice was physically and emotionally drained and felt at the end of her rope. She knew that they needed help, but was afraid of the cost. The care and help for Norman would be expensive and costs would rapidly eat away their life savings. Alice remembered an ad in her local paper and called for information and help. A Long Term Care Financial Planner came and evaluated their finances and needs to develop a PLAN for their situation. The PLAN enabled Alice to know the options for the best care for Norman and different ways of paying for the care. She learned how to have Norman's care completely paid, including prescription drugs, without spending her savings that would be needed for living expenses after Norman passed away. Alice never dreamed she would find the help they needed and was grateful for the PLAN and the help and compassion during their difficult time. Within two weeks, Norman entered a quality nursing home close to their home where Alice could visit daily. She knew Norman would receive the best care possible and that their assets were preserved and pro-

tected. The PLAN enabled them to keep their home, prevented spend down of their savings and found a government program that paid for Norman's care.

Healthcare and Financial Issues

Retirement is great... No more work and you have freedom and leisure time to do what you want. This is the case for most retirees; however, retirement does not always go as planned. The older and wiser we become, we realize the greatest financial issue facing seniors is not being able to pay for Long Term Care. Yes: the biggest financial risk for seniors is that of spending years in a Nursing Home and spending-down life savings, and possibly losing their home.

Developing a PLAN is Essential

C & C Consulting has helped hundreds of seniors evaluate and develop individual PLANs to address their issues on Long Term Care, protection of assets, income for the well spouse and maintaining quality care for a lifetime. C & C Consulting knows the difficulty seniors face in developing a PLAN for their Long Term Care and asset protection. Planning starts by evaluating your Long Term Care needs and how you want them met. You will need to think about your view of government assistance versus you paying for care. You will need to consider the importance of preserving your assets for your spouse or heirs. Will future income be needed if you or your spouse requires some type of Long Term Care assistance? The above issues are just some of the issues that need to be considered

before one can develop a PLAN for Long Term Care. Seniors with a PLAN know their possibilities for care, how to minimize what they spend on care, and how to maximize the assets they can keep.

Choosing the Best Type of Care

Needing personal assistance to perform Activities of Daily Living, such as, bathing, dressing, walking, cooking or eating, etc., can qualify one to receive care. The care can be provided at a facility (Nursing Home, Assisted Living, etc.) or at home. The type of personal assistance one needs with Activities of Daily Living will also be a determining factor as to where one can receive care—a Facility or In-home Care. The final determining factor as to where your care is provided is dependent on doctor's recommendation, family decisions, personal resources, government programs and private funding organizations.

1- In-Home Care. Most seniors that require care want to receive the care at home as long as possible. Although this may be your choice, it is not always possible. There are several ways or combinations of ways to receive care at home. All or part of your care can be provided by a spouse, a relative, a friend or professional Home Care provider. When a family member or friend provides the In-home care, they usually have limited time and resources. The limitations could prevent them from providing full care, seven days a week. A single person, widow, or widower may require more care. Government agencies, Medicare, COPES and private agencies can provide additional home care.

Permanent daily In-home care becomes necessary when you need extended periods of care. Cost becomes an issue when professional outside care is needed. If professional care is needed, the cost could be small or as much as \$8,000 per month or more, depending upon the type and amount of outside services needed.

2. Living with a family member or friend Living with a family member or friend generally works best as long as you are healthy. The difficulty occurs when you require more care due to poor health. Your caregiver, family member or friend is required to stay at home more to provide you with the 5, 10 or 20 hours per day of necessary care. The caregiver usually has a family and the time required to provide the care is a constant demand of time and can cause a serious disruption of the family routine. The cost of staying with a family member is minimal. Sometimes your Social Security and other income will more than pay for your living expenses. If you were to need outside professional care in the home, the cost could be as high as \$8,000 per month or more.

3. Assisted Living Assisted Living facilities are designed to provide different degrees of assistance with various Activities of Daily Living. The degree of assistance can range from no help to some help, but 24 hour care is not provided. The facilities are similar to a Retirement Facility. You have your own living quarters and meals are eaten in a common dining room. Cleaning of your living quarters and laundry are provided. You can come and go as you wish. The cost of Assisted Living can run between \$2,000 and \$4,000 per month, depending on the amount of care needed.

4. Nursing Home Care Most seniors will say they do not want to go into a Nursing Home. Seniors feel that going into a Nursing Home means their life will soon be ending. The average Nursing Home stay is about 2.4 years. Nursing Homes provide 24 hour Skilled Nursing Care which is essential for some senior's care. It is very helpful for a senior that needs Nursing Home Care to have a family member or friend to oversee their Nursing Home care. Cost for a Nursing Home is about \$4,000 to \$7,000 per month depending on where you live and your level of care.

5. Adult Family Home Care Adult Family Home Care is provided in a converted home for adults in a residential neighborhood. The home usually cares for one to six people. Due to the smaller size of the facility, Adult Family Home care is usually more personalized. Therefore, Adult Family Home care can be a good alternative to Nursing Home care. Cost for an Adult Family Home is about \$3,000 to \$5,000 per month.

6. Adult Day Care Adult Day Care facilities provide care during the day for those that cannot care for themselves. Skilled Nursing Care is not provided. Adult Day Care is primarily used as a fill-in for the primary caregiver, who may work or need to have the time free. Transportation is not provided. Meals and snacks and some recreation are provided. Adult Day Care can be provided on an as needed basis or daily during the scheduled daytime hours. Cost for Adult Day Care is about \$50.00 per day.

Government and Private Programs

An evaluation of your choice of care, assets, income, insurance and funding programs will lead you to the best PLAN for care and asset protection. Some Government and Private programs require a person to spend a percentage or all of their assets prior to receiving care. Other Government and Private programs allow you to keep all or part of your assets if you meet their requirements.

1. **Medicare** Medicare is a Federal Health Insurance Program available to all seniors over age 65. For a low cost and a co-pay, Medicare provides payment for hospital and doctor expenses. Medicare is primarily a medical insurance program and is not designed to pay for Long Term Care such as Nursing Home or Assisted Living care. Medicare will pay Nursing Home care under these conditions: 1) A medical issue which required a hospital stay for a minimum of three full days, 2) The medical issue which resulted in a hospital stay is the same condition which now requires nursing home care, 3) Continued significant improvement of the medical issue. Medicare will pay for up to 100 days of nursing home care as long as the medical issue is improving. Most medical issues of seniors do not improve for 100 days; therefore, Medicare usually pays for 10 to 30 days of nursing home care. Medicare is just a temporary solution for Long Term Care.
2. **Medicaid** Medicaid is a Federal Program funded by the State and Federal government. Each state has a different program. Medicaid is a broad program that includes such things as food stamps, medical and financial help and Nursing Home care. This booklet deals with the Nursing Home benefit through Medicaid in Washington State. Medicaid will pay for Nursing Home care if you have a need and meet their income and asset requirements.

Medicaid will pay for Nursing Home costs plus what Medicare does not pay. Prescription drugs, eye glasses, hearing aids and dental care are also covered by Medicaid. A PLAN developed by C & C Consulting may include the use of Medicaid.

3. **COPEs** COPEs is a state program which is administered by the state of Washington through Home and Community Services (HCS) and Department of Social and Health Services (DSHS). Washington State developed COPEs as a way to pay the necessary care costs for you to live at home rather than go to a Nursing Home. COPEs pays costs of care provided by In-home caregivers, Adult Family Homes, Boarding Homes and Assisted Living facilities. The program will pay a professional service or a family member (not a spouse), or a friend to provide the necessary care for you to live at home rather than in a Nursing Home. Long Term Care services for Activities of Daily Living, such as: bathing, dressing, cooking, cleaning, laundry, shopping and medications are provided by COPEs. In addition to these services, COPEs will pay for prescription drugs, eye glasses, hearing aids and dental care. In-home services provided by COPEs are limited to care only during the day, not for 24 hour care. Adult Family Homes, Boarding Homes and Assisted Living Facilities provide twenty-four hour care. The qualification requirement for COPEs is similar to Medicaid: (1) need for care, (2) income, and (3) assets. In order to utilize COPEs benefits and avoid spend-down and preserve assets, it is essential to have your care needs, income and assets evaluated prior to applying for COPEs benefits. If you cannot qualify for COPEs benefits, you will need to explore other op-

tions.

4. **Veterans Administration Benefits** The Veterans benefits for Nursing Home Care and Assisted Living are very limited with only a few facilities that have long waiting lists. The income and asset requirements for Veterans benefits are exactly the same as Medicaid. Medicaid has numerous facilities in numerous locations.
5. **Long Term Care Insurance** Long Term Care Insurance is provided by private insurance companies. It is designed to protect assets and pay for Nursing Home Care, Assisted Living and In-Home care. The main concern with Long Term Care Insurance is appropriateness and affordability. If you are retired and living on a fixed income, the affordability of Long Term Care Insurance will be determined by your income and assets. As a guideline, you should not spend more than 7% of your gross income on Long Term Care Insurance premiums. Some types of Long Term Care Insurance may be appropriate if you are not able to qualify for Medicaid or COPES benefits. The appropriateness of Long Term Care Insurance must be determined after close evaluation of your possible care needs, income and assets.
6. **Other Private Programs** Other private program options are available from select Nursing Homes and Assisted Living facilities. The private programs generally require having to pay large amounts of one's assets to pay for extended Long Term Care. Private programs can work well for your care, however, it is important to remember that private programs do not work well to preserve financial assets.

Payment Options for Care

Most seniors have limited resources and find their savings insufficient to pay the continued cost of Long Term Care. Knowing what options exist for Long Term Care payment enable you to make better decisions on the use of your resources.

1. **Private-Pay**. With Private-pay you pay for your Nursing Home care, In-home care or Assisted Living care with your own resources. The cost of a Nursing Home today is about \$4,000 or \$7,000 per month. The cost of paying privately can be reduced by early planning to use other funding and payment methods that cost you little or nothing. Many seniors pay privately simply because they lack planning or do not know their options. When you have someone ill and in need of care, your attention is focused on the person, not finances. Early planning is essential to maximize protection of assets and minimize costs of care.
2. **Medicare** Medicare, as previously mentioned pays for very little, if any, Nursing Home, In-home or Assisted Living care. It is not a good option to consider for Extended Long Term Care needs.
3. **Family Members** Family members or friends may offer to provide care or pay for Long Term Care costs. Although, their intentions are well meaning, many times situations change and the family member or friend can no longer provide for care or finances. It is best to have a plan that is not entirely dependent on family members or friends.
4. **Medicaid and COPES** Medicaid and COPES are excellent ways of receiving payment for your current or future care needs. Once you qualify for benefits by: (1) need or care, (2) income and (3) asset requirements, most of your care cost will be paid for. There may be a participation payment required depending on you or your spouse's in-

come. Medicaid and COPEs do not disclose or explain how to protect your assets. Medicaid and COPEs workers will tell you to spend-down your assets first. Then, when you have reached the Medicaid and COPEs asset limit, you can qualify for benefits.

5. **Long Term Care Insurance** The appropriate Long Term Care Insurance policy pays the cost of your care and also protects assets. There are many parts to a Long Term Care Insurance Policy and care must be taken to ensure proper and complete coverage. If you are not totally covered, you may be required to pay privately for the part not covered by private insurance. Long Term Care Insurance is appropriate for someone who cannot qualify for State or Federal programs, or has high net worth.

6. **Medicaid Qualified Annuities** Medicaid Qualified Annuities are a way to shelter assets by converting assets to income. The ability of annuities to reduce excess assets to income enables you to meet the asset requirements of Medicaid and COPEs. It is important to choose the appropriate Medicaid Qualified Annuity. You will need to consult with an attorney or professional Long Term Care Planner to choose the appropriate annuity.

7. **Government Assistance** Many times people are told by Nursing Homes and Department of Social and Health Services (DSHS) that they do not qualify for government programs, because their income or assets are too high. However, there are laws that determine the qualification for government programs. The laws have specific provisions making it possible to qualify for government assistance if your assets or income are too high. Usually, Nursing Homes and the Department of Social and Health Services do not adequately disclose the provisions that allow for asset protection.

Financial Planning

Most seniors want to preserve their life savings for themselves, their spouse or heirs. They do not want to spend down all their savings on Long Term Care. However Nursing Homes and other types of care are costly and can range from \$4,000 to \$10,000 per month. A financial plan developed from one's needs, income and assets is essential for any Long Term Care PLAN to pay the cost of care and preserve and protect assets.

1. **Protection from Spend-down** When spending costs for care in a Nursing Home or other care facility exceeds income, you face serious financial spend-down. Protection from spend-down is accomplished in several ways: 1) Long Term Care Insurance, 2) In-home care provided by family and, 3) early qualification for State and Federal funding programs.

2. **Protection of Your Home From Asset Recovery** The State of Washington can and will lien one's estate at the time of death to repay any costs for medical or Long Term Care incurred by Medicaid or COPEs. Yes, asset recovery happens too frequently. The solution to prevent asset recovery from taking your home is to have a PLAN that includes not having your home in your estate upon your death. Married couples can transfer homes to their spouse without penalty. Transferring a home to any one other than a spouse is complex and requires the proper method to avoid disqualification for benefits. With a PLAN, assets are positioned so that the assets are protected and asset recovery prevented.

3. **Protection of Future Income** When the need for Long Term Care arrives, the immediate spend-down of assets

and income starts to pay for Long Term Care costs which spends down future income. The spend-down of assets used to generate future income can be avoided with a PLAN of asset protection in place.

4. **Protection of Assets** The important issues to protecting and preserving assets are: 1) Do you anticipate needing the asset in the future? 2) Is your intent to leave certain assets to someone in your Will? 3) Would it matter if the assets were in the name of another family member? 4) Can the assets be converted to cash quickly? 5) Will the assets be needed to produce income in the future? 6) Will the assets need to be sold in the future as part of downsizing? These issues need to be evaluated before a PLAN of care is developed.

5. **Increasing Income in the Future** An important part of planning is one's future need for income. If one's spouse passes away, living costs increase, or you require Long Term Care, then one's income will need to increase. Your ability to increase income in the future will depend on the value of your assets at that time. Protection of these assets are vital if you want to ensure increased income in the future. Depending on your actual income needs, there are different income producing options available to you from different sources.

6. **Downsizing options** Downsizing is a great way to inject financial strength into your life. Many seniors, single or married, find themselves, living in their paid-for home, and have barely enough to live on. If they continue using savings to live on, they can eventually end up broke. Downsizing by selling a home will immediately generate large amounts of cash that can be used to produce additional income that can be used for housing and living expenses. When done properly, living expenses can be reduced, income increased, and assets preserved.

7. **Reducing Prescription Drug Costs** Until Medicare Part D was passed to help seniors pay for prescription drugs, prescriptions were a major problem for seniors. It is not uncommon to have drug costs of \$200 to \$500 per month. Even though the Federal Government has a new comprehensive prescription drug program that will save you money, there are additional ways of reducing or eliminating prescription costs. Numerous private programs are available that can save you money. Extra help to reduce or eliminate prescription costs are available for low income individuals. COPEs and Medicaid programs will pay 100% of prescription drug costs and deductibles if you qualify for benefits.

8. **Gifting and Asset Transfers** Gifting of assets is one way of transferring assets to friends or family members. Gifting will also preserve assets, eliminate asset recovery, costly spend-down and accelerate qualification for COPEs or Medicaid benefits. The gifting of assets needs to be done properly to protect and preserve assets. The State of Washington has a three year look-back period on gifting assets. Gifts made during the three year look-back period can result in lengthy disqualification penalties.

PLAN for Long Term Care and Estate Preservation

C & C Consulting provides comprehensive Long Term Care Evaluations that match personal, financial and health care needs with the best options for Long Term Care and asset preservation.

1. Care Provider Options

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The options for providers are varied and are: 1) In-home care 2) Assisted Living 3) Boarding Homes 4) Adult Family Homes and 5) Nursing Homes. It is essential to match your needs with services of the care providers. Available funding programs can effect your options for caregiver providers.

2. Financial Evaluation

An income and asset evaluation with your personal need requirements, will help to determine your financial well being. Knowing what government programs you may, or may not, qualify for and what private funding programs are available to you will determine your best strategy.

3. Estate Preservation PLAN

Each PLAN is individualized and developed to meet the needs and choices for care and estate preservation. The PLAN provides the necessary elements to preserve assets and protect the home. Included in each PLAN are options to maximize asset retention, minimize the cost of care and utilization of government and private funding programs.

4. Strategies for Payment of Long Term Care

The strategy for paying Long term Care costs has to be through evaluation of an individuals care needs, their assets and resources. C & C Consulting helps clients develop a strategy that makes the best use of their assets, income and resources. Each PLAN is developed using the best strategies to qualify for Government funding programs.

5. Next?

1. Learn about your care options.
2. Learn about your financial options.

3. Learn about State, Federal and Private funding programs.
4. Learn what questions you need to have answered.

C & C Consulting Services

C & C Consulting offers many services to enable clients to gather and evaluate information, make wise decisions, and implement plans for care and asset preservation.

- No cost initial consultation.
- Medicaid qualification issues and questions.
- Clarification of Medicaid and COPEs rules.
- Preservation of assets and savings.
- Reducing care costs.
- Applying for Medicaid or COPEs benefits.
- Completing Medicaid and COPEs applications.
- Evaluating your best options of payment of care.
- Education on Long Term Care issues and costs.
- Locating the best Care Facility.
- Preserving assets for your spouse.
- Preserving assets for future care.
- Preserving access to future quality care.
- Making the best use of Medicaid benefits.
- Developing asset preservation strategies.
- Asset transfers and gifts.
- Full service PLAN implementations.
- Meeting with family members.
- Protecting your primary residence.
- Help with evaluating your best care options.
- Medicaid planning services.
- Adult Family Homes, reducing your care cost.