

SERFF Tracking Number: MUTM-125870096 State: Arkansas  
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 40654  
Company Tracking Number: KAREN HOWLAND  
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A  
Standard Plans  
Product Name: Medicare Supplement Advertising - UC6526\_1108  
Project Name/Number: Medicare Supplement Advertising /UC6526\_1108

## Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: Medicare Supplement Advertising - UC6526\_1108 SERFF Tr Num: MUTM-125870096 State: ArkansasLH

TOI: MS051 Individual Medicare Supplement - Standard Plans SERFF Status: Closed State Tr Num: 40654

Sub-TOI: MS051.001 Plan A

Co Tr Num: KAREN HOWLAND

State Status: Filed-Closed

Filing Type: Advertisement

Co Status:

Reviewer(s): Stephanie Fowler

Author: Karen Howland

Disposition Date: 11/20/2008

Date Submitted: 10/22/2008

Disposition Status: Filed

Implementation Date Requested:

Implementation Date:

State Filing Description:

## General Information

Project Name: Medicare Supplement Advertising

Status of Filing in Domicile:

Project Number: UC6526\_1108

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 11/20/2008

Deemer Date:

State Status Changed: 11/20/2008

Corresponding Filing Tracking Number:

Filing Description:

NAIC #261-69868

FEIN #47-0322111

United of Omaha Life Insurance Company

Medicare Supplement Advertising

UC6526\_1108

*SERFF Tracking Number:* MUTM-125870096 *State:* Arkansas  
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Enclosed for review by your Department is a copy of the above-captioned advertising. The form is new and is not intended to replace any previously approved form. It will be used with appropriate approved forms in your state.

This is a postcard-prospecting piece that agents/independent producers can use to advertise United of Omaha's monthly premiums. This particular piece has a grid that will allow the agents/independent producers to determine which age, ZIP code/location/state, and plan they want to advertise to the consumers. After the information has been compiled, the advertisement will be printed by our Home Office and sent to the agent/independent producer for their distribution. The advertisement will only show a sample of a potential rate.

We request that any information in brackets be considered variable. A Memorandum of Variable Material describing the variable items is attached.

Your notice of acceptance of this filing will be greatly appreciated.

Sincerely,

Mike Trebold  
Product and Advertising Compliance Consultant  
Regulatory Affairs  
Phone: 402-351-2654  
Fax: 402-351-5298  
E-mail: [advfilings@mutualofomaha.com](mailto:advfilings@mutualofomaha.com)

kh

## **Company and Contact**

### **Filing Contact Information**

Mike Trebold, Product & Advertising Compliance Consultant [mike.trebold@mutualofomaha.com](mailto:mike.trebold@mutualofomaha.com)

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Regulatory Affairs (402) 351-2654 [Phone]  
Omaha, NE 68175 (402) 351-5298[FAX]

**Filing Company Information**

United of Omaha Life Insurance Company CoCode: 69868 State of Domicile: Nebraska  
Mutual of Omaha Plaza Group Code: 261 Company Type: Life Insurance  
Omaha, NE 68175 Group Name: State ID Number:  
(402) 351-6420 ext. [Phone] FEIN Number: 47-0322111  
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## Filing Fees

Fee Required? Yes  
Fee Amount: \$25.00  
Retaliatory? No  
Fee Explanation:  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United of Omaha Life Insurance Company	\$25.00	10/22/2008	23405883

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	11/20/2008	11/20/2008

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Stephanie Fowler	11/14/2008	11/14/2008	Karen Howland	11/20/2008	11/20/2008

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## **Disposition**

Disposition Date: 11/20/2008

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.



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## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 11/14/2008  
Submitted Date 11/14/2008  
Respond By Date 12/15/2008

Dear Mike Trebold,

This will acknowledge receipt of the captioned filing.

Code Ann. 23-79-109(a)(4) states, "all Medicare supplement rates shall be based on a composite age basis only, and shall not be based on any age banding or other groupings." With that being said, please remove the "Age" column, as it would not be appropriate.

Please feel free to contact me if you have questions.

Sincerely,

Stephanie Fowler

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 11/20/2008  
Submitted Date 11/20/2008

Dear Stephanie Fowler,

### Comments:

#### Response 1

Comments: Your File No.: 40654

NAIC #261-69868

FEIN #47-0322111

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This letter is in response to your Objection Letter dated November 14, 2008.

In your letter you stated "Code Ann. 23-79-109(a)(4) states, "all Medicare supplement rates shall be based on a composite age basis only, and shall not be based on any age banding or other groupings." With that being said, please remove the "Age" column, as it would not be appropriate. -- "Because the Home Office is responsible for customizing each advertisement prior to its use, the state specific layout and disclosures would be correct. I have attached a sample of what the advertisement would look like when used in Arkansas. Also, on the Memorandum of Variability we have explained that " The rate chart is "overprinted" on to each piece. The "Age" column will be removed from the states that are not age rated."

Your further review and approval of this submission will be most appreciated.

Thank you.

**Changed Items:**

**Supporting Document Schedule Item Changes**

Satisfied -Name: Sample of AR ad

Comment: Attached is a sample of what the advertisement would look like when used in Arkansas.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,  
Karen Howland

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## Form Schedule

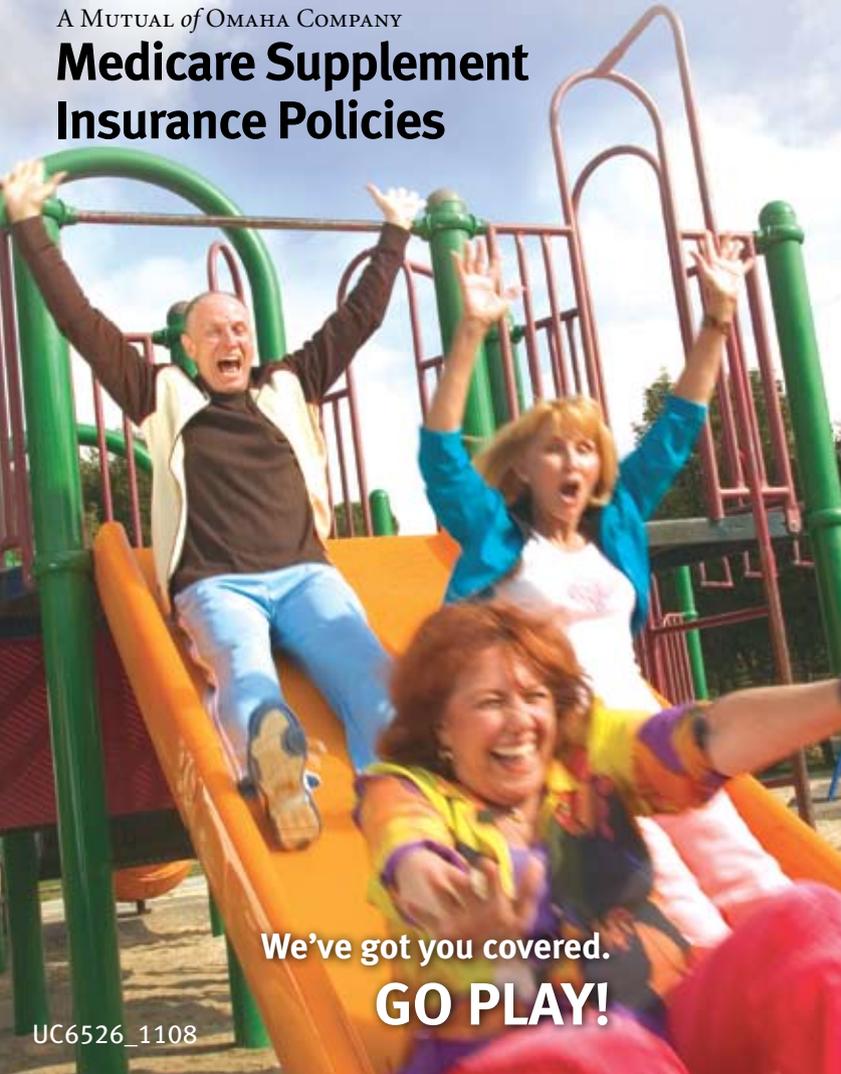
Lead Form Number: UC6526\_1108

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed	UC6526_1108	Advertising Postcard		Initial			UC6526_1108.pdf

**UNITED OF OMAHA LIFE INSURANCE COMPANY**

A MUTUAL of OMAHA COMPANY

# Medicare Supplement Insurance Policies



We've got you covered.

**GO PLAY!**

UC6526\_1108

We offer you the friendly customer service, financial value and security you seek. So, you can relax and have some fun.

## Compare and Save on Your United of Omaha Medicare Supplement Policy

[State, ZIP Codes or ZIP Codes Beginning With]	Age	Monthly Premium* Plan [Name]
	[Age]	[Rate]
	[Age]	[Rate]

\*[Appropriate state rate disclosure]

### Free Rate Quote

For your no-obligation rate quote – including any applicable discount – on a United of Omaha Medicare supplement insurance policy, contact your licensed insurance agent today!

[Name]

[Phone Number]

[E-mail Address]



Medicare supplement insurance is underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, NE 68175. United of Omaha is licensed nationwide except in NY. Neither United of Omaha Life Insurance Company nor its Medicare supplement insurance policies are connected with or endorsed by the U.S. government or the federal Medicare program. Policy forms UM1, UM2, UM3, UM4, UM5 or state equivalent (in OK, UM1-21398, UM4-21399, UM5-21400). These policies have exclusions, limitations and reductions. **This is a solicitation of insurance and an insurance agent will contact you.**



## **UNITED OF OMAHA LIFE INSURANCE COMPANY**

A MUTUAL *of* OMAHA COMPANY

Mutual of Omaha Plaza

Omaha, NE 68175

[mutualofomaha.com](http://mutualofomaha.com)

## **Medicare Supplement Insurance**

**Low rates *plus* superior service**

***equal a great value for you.***

*Turn over for details!*



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## Supporting Document Schedules

**Satisfied -Name:** Memorandum of Variability **Review Status:** Accepted for Informational Purposes 11/20/2008

**Comments:**

**Attachment:**

UC6526\_1108 (MoV).pdf

**Satisfied -Name:** Sample of AR ad **Review Status:** Filed 11/20/2008

**Comments:**

Attached is a sample of what the advertisement would look like when used in Arkansas.

**Attachment:**

UC6526\_1108 (AR INQ) (clean).pdf

# VARIABLE MATERIAL FOR ADVERTISING FORM UC6526\_1108

*The following information in the aforementioned advertisement is bracketed to denote variable material.*

## Section

### **Rate Chart**

*\* The rate chart is “overprinted” on to each piece. The “Age” column will be removed from the states that are not age rated.*

## Explanation

Header Row:

1. Input a plan approved in the state or Zip code chosen.

Bottom Rows:

1. Column 1 - Input ZIP code(s), state or area where ad approved.
2. Column 2 - Choose an age 65 or older\*
3. Columns 3 - Input corresponding rate for the age, plan and state/or Zip code(s)

### **State Rate Disclosure**

**AR** – Sample Base Rates; Rates are subject to change and vary by ZIP code. Lower rates may apply, if eligible.

**CT** – Sample Base Rates; Rates are subject to change.

**IA, IL, KY, MI, NV, OH, OK, TN, VA** - Sample Base Rates: Female rates (male rates may be higher); Nontobacco rates (tobacco rates may be higher); Rates are subject to change and vary by ZIP code. Lower rates may apply, if eligible.

**WV** - Sample Base Rates: Female rates (male rates may be higher); Nontobacco rates (tobacco rates may be higher); rates are subject to change. Lower rates may apply, if eligible.

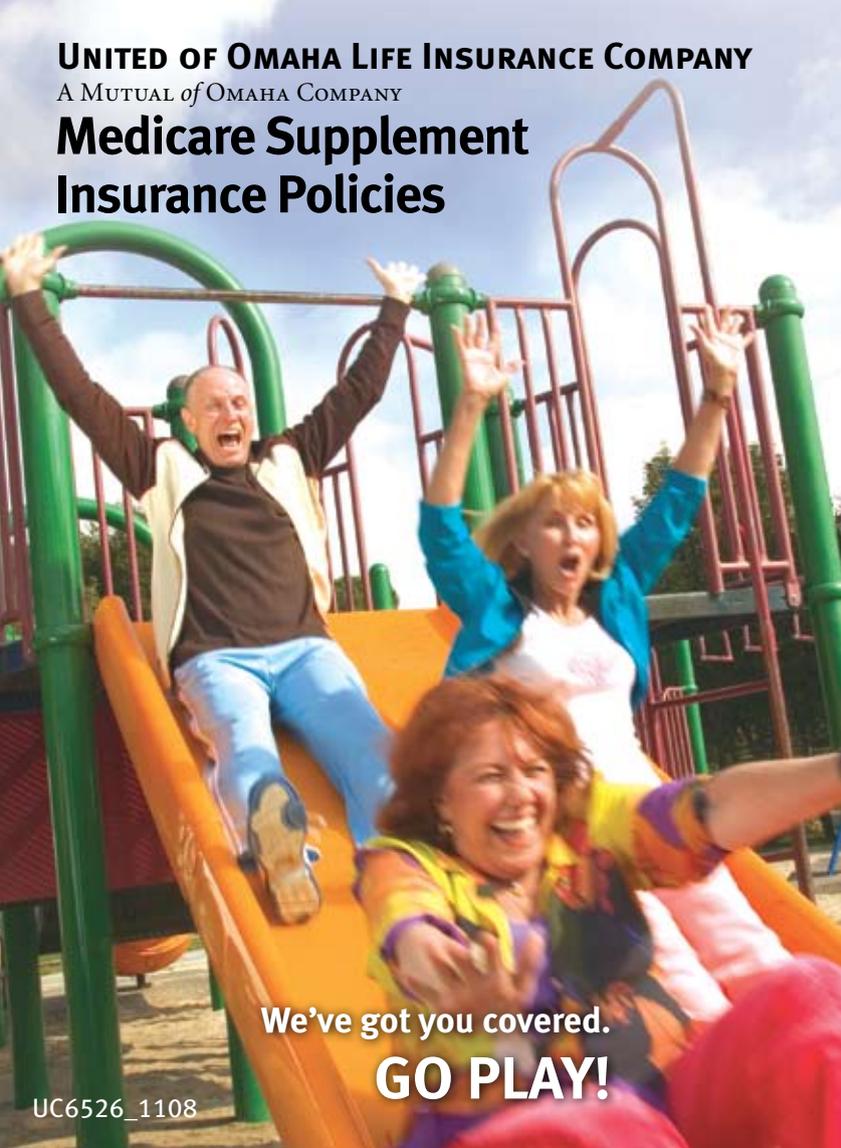
**SC** - Sample Base Rates: Female rates (male rates may be higher); Preferred rates (standard rates may be higher); Rates are subject to change and vary by ZIP code. Lower rates may apply, if eligible.

\*The overprint section of this form is set up by the home office to assure that the correct and current rates are used.

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# Medicare Supplement Insurance Policies



We've got you covered.

**GO PLAY!**

UC6526\_1108

We offer you the friendly customer service, financial value and security you seek. So, you can relax and have some fun.

## Compare and Save on Your United of Omaha Medicare Supplement Policy

Arkansas ZIP Codes Beginning With 716-719, 723-729	Monthly Premium*	
	Plan F	Plan G
	\$112.72	\$95.81

\*Sample base rates; rates are subject to change and vary by ZIP code; lower rates may apply, if you're eligible

### Free Rate Quote

For your no-obligation rate quote – including any applicable discount – on a United of Omaha Medicare supplement insurance policy, contact your licensed insurance agent today!



Medicare supplement insurance is underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, NE 68175. United of Omaha is licensed nationwide except in NY. Neither United of Omaha Life Insurance Company nor its Medicare supplement insurance policies are connected with or endorsed by the U.S. government or the federal Medicare program. Policy forms UM1, UM2, UM3, UM4, UM5 or state equivalent (in OK, UM1-21398, UM4-21399, UM5-21400). These policies have exclusions, limitations and reductions. **This is a solicitation of insurance and an insurance agent will contact you.**



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