

SERFF Tracking Number: MUTM-125644765 State: Arkansas
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 38951
Company Tracking Number: KAREN HOWLAND
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: Medicare Supplement Advertising - AFN40785
Project Name/Number: Medicare Supplement Advertising/AFN40785

Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: Medicare Supplement Advertising - AFN40785 SERFF Tr Num: MUTM-125644765 State: ArkansasLH

TOI: MS051 Individual Medicare Supplement - Standard Plans SERFF Status: Closed State Tr Num: 38951

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: 05/29/2008

Date Submitted: 05/13/2008

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: AFN40785

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: 05/29/2008

State Status Changed: 05/29/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

NAIC #261-69868

FEIN #47-0322111

United of Omaha Life Insurance Company

Medicare Supplement Advertising

AFN40785

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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	05/13/2008	20287425

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	05/29/2008	05/29/2008

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Disposition

Disposition Date: 05/29/2008

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Form	Letter	Filed	No

UNITED OF OMAHA LIFE INSURANCE COMPANY

A MUTUAL of OMAHA COMPANY



[DATE]

Dear [NAME]:

Thank you for your interest in a Medicare supplement insurance policy from United of Omaha Life Insurance Company, a Mutual of Omaha company. I've enclosed some information I think you'll find useful as you decide which plan is right for you. And, for your convenience, I've also included an application for coverage that you can simply complete, sign and return to me if you wish.

Something to consider as you look at your options: Medicare supplement insurance policies are standardized. Benefits for each Medicare supplement insurance policy are the same across all companies. The rates you pay for those policies can vary.

When you select our company, you'll benefit from:

- Affordable premium rates
- No paperwork hassles – our electronic claims processing does the work for you
- Staying Power – Committed to providing Medicare supplement insurance benefits and service amid an ever-changing political and economic environment

I will follow up with you in the next week or so to review this information and answer any questions you may have. Please feel free to call me in the meantime at [PHONE NUMBER].

Sincerely,

[NAME]

[ADDRESS]

[CITY, STATE ZIP]

[PHONE NUMBER]

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. Underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, NE 68175. United of Omaha Life Insurance Company is licensed nationwide except in NY. Policy forms UM1, UM2, UM3, UM4, UM5 or state equivalent. This insurance has exclusions, limitations and reductions. An outline of coverage is available upon request.

This letter is used for the solicitation of insurance. An agent will contact you by telephone.

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