

SERFF Tracking Number: MUTM-126152913 State: Arkansas
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 42402
Company Tracking Number: JAMIE LUCY
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: Medicare Supplement Advertising - UL4951
Project Name/Number: Medicare Supplement Advertising/UL4951

Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: Medicare Supplement Advertising - UL4951 SERFF Tr Num: MUTM-126152913 State: ArkansasLH

TOI: MS051 Individual Medicare Supplement - Standard Plans SERFF Status: Closed State Tr Num: 42402

Sub-TOI: MS051.001 Plan A

Co Tr Num: JAMIE LUCY

State Status: Filed-Closed

Filing Type: Advertisement

Co Status:

Reviewer(s): Stephanie Fowler

Author: Jamie Lucy

Disposition Date: 05/26/2009

Date Submitted: 05/14/2009

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: UL4951

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: 05/26/2009

Explanation for Other Group Market Type:

State Status Changed: 05/26/2009

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Please see the cover letter under the supporting documentation tab.

Company and Contact

Filing Contact Information

SERFF Tracking Number: MUTM-126152913 State: Arkansas
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Carly Cole, Product & Advertising Compliance carly.cole@mutualofomaha.com
Consultant

Regulatory Affairs (402) 351-2476 [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: \$75.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United of Omaha Life Insurance Company	\$75.00	05/14/2009	27892964

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	05/26/2009	05/26/2009

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Cover Letter	Accepted for Informational Purposes	Yes
Supporting Document	Memorandum of Variability	Accepted for Informational Purposes	Yes
Form	Letter, Reply Card	Filed	Yes
Form	Carrier	Filed	Yes

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Form Schedule

Lead Form Number: UL4951

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed	UL4951, UL4951-1	Advertising Letter, Reply Card		Initial		0	UL4951_brackets.pdf
Filed	UE1345	Advertising Carrier		Initial		0	UE1345_Brackets.pdf

UNITED OF OMAHA LIFE INSURANCE COMPANY

A MUTUAL of OMAHA COMPANY

Mutual of Omaha Plaza, Omaha, NE 68175



Mutual of Omaha

IMPORTANT INFORMATION FOR NEW MEDICARE BENEFICIARIES

Medicare alone will only cover about 80% of your medical expenses. YOU are responsible to pay the costs that Medicare does not cover.

As a NEW Medicare beneficiary, you have a limited time to secure the additional coverage you may need, without answering health questions or taking a physical exam. Call toll-free [1-800-865-2674] now for FREE INFORMATION. There is no obligation.

[Dear John Q. Sample,]

If you are new to Medicare, you'll want to request this FREE Information right away.

During the Open Enrollment Period for new Medicare beneficiaries, you can get additional coverage and benefits from United of Omaha Life Insurance Company (United of Omaha) without answering health questions and without taking a physical exam. That's why it's important for you to get this FREE INFORMATION right away.

Your **FREE INFORMATION KIT** not only will explain some of the limitations of Medicare that you may not be aware of ... it also will give you details about affordable coverage that may give you the peace of mind you deserve – while providing the additional coverage you need.

Because Medicare pays only a portion of your doctor and hospital bills, chances are you'll want to consider additional coverage. And when it comes to Medicare supplement plans, every company offers you a selection from the SAME group of standardized plans.

The differences are often found in their plan rates, the level of service they provide, and how responsive they are to your specific needs.

[Coverage is also available to persons under age 65 who are eligible for Medicare due to a disability. In TX, Plan A coverage is available to persons under age 65 who are eligible for Medicare due to a disability.]

So why choose United of Omaha?

When you have a United of Omaha Medicare supplement insurance policy, you get the reputation of Mutual of Omaha, which has been providing quality service for over 100 years. You can trust

over, please ...

[www.medsupquote.com]

UL4951

Get your FREE Information Kit with absolutely NO OBLIGATION.



Send my FREE United of Omaha Medicare Supplement Information Kit. I understand there is no obligation.



Please make address corrections as needed.

Please complete the following information below and return this form in the postage-paid envelope provided.

Phone No.: (_____) _____

[E-mail: _____]

Date of Birth: ____/____/____

Please note that this mailing is used as a source of leads in the solicitation of insurance. An insurance agent may contact you by telephone. UL4951-1

United of Omaha for outstanding strength, value and service.

With a United of Omaha Medicare supplement plan ...

- **You'll have the freedom** to choose any doctor, hospital, or specialist for your care. You can keep your current doctor, there are no referrals and no networks.
- **You'll get additional coverage** for many of the expenses that Medicare does not pay.
- **You'll have a choice** of plans that fits your needs ... and your budget. Our rates are among the lowest Medicare supplement rates.

Best of all, you'll always get the outstanding service you expect from the experienced and reliable folks at United of Omaha ... a name you know you can trust.

The first step is to request your United of Omaha FREE Information Kit with absolutely no obligation. Just call toll-free [1-800-865-2674].

At United of Omaha, we take your health, and your health care seriously and want to be sure you have access to the coverage you need – at a price you can afford.

Please take a moment now to complete and return the attached reply form, requesting your FREE Information Kit. Or call toll free to request this FREE information: [1-800-865-2674].

Either way, there's no obligation. I look forward to hearing from you.

Sincerely,


John R. O'Malley
Director, Marketing Services
and Licensed Agent

[Premiums are based on attained age rating, which means premiums increase as your age increases each year until you reach age 90.]

Please note that this mailing is used as a source of leads in the solicitation of insurance. An insurance agent may contact you by telephone. Coverage has exclusions, limitations and reductions, which will be detailed in materials you receive prior to purchase. An outline of coverage is available upon request. United of Omaha Life Insurance Company is solely responsible for its contractual obligations. United of Omaha Life Insurance Company is licensed nationwide except in NY.

[While United of Omaha Life Insurance Company and [3rd party client] share a financial interest in this program, United of Omaha is solely responsible for the underwriting of insurance, its administration and the payment of claims. United of Omaha's policies are available to the general public regardless of any affiliation with [3rd party client].]

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 and UM11 (or state equivalent). In ID: UM1-21504, UM4-21505, UM5-21506. In OK: UM1-21398, UM4-21399, UM5-21400. In OR: UM1R, UM4R and UM5R. In TX: UM1-21189, UM4-21192 and UM5-21193. Not all policy forms may be available in every state.



**UNITED OF OMAHA LIFE
INSURANCE COMPANY**

A MUTUAL of OMAHA COMPANY

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. [While United of Omaha Life Insurance Company and [3d party client] share a financial interest in this program, United of Omaha is solely responsible for the underwriting of insurance, its administration and the payment of claims. United of Omaha's policies are available to the general public regardless of any affiliation with [3rd party client].]

Policy forms: UM1, UM2, UM3, UM4, UM5 and UM11 (or state equivalent). In ID: UM1-21504, UM4-21505, UM5-21506. In OK: UM1-21398, UM4-21399, UM5-21400. In OR: UM1R, UM4R and UM5R. In TX: UM1-21189, UM4-21192 and UM5-21193. Not all policy forms may be available in every state. [Coverage is also available to persons under age 65 who are eligible for Medicare due to a disability. In TX, Plan A coverage is available to persons under age 65 who are eligible for Medicare due to a disability.]

UE1345

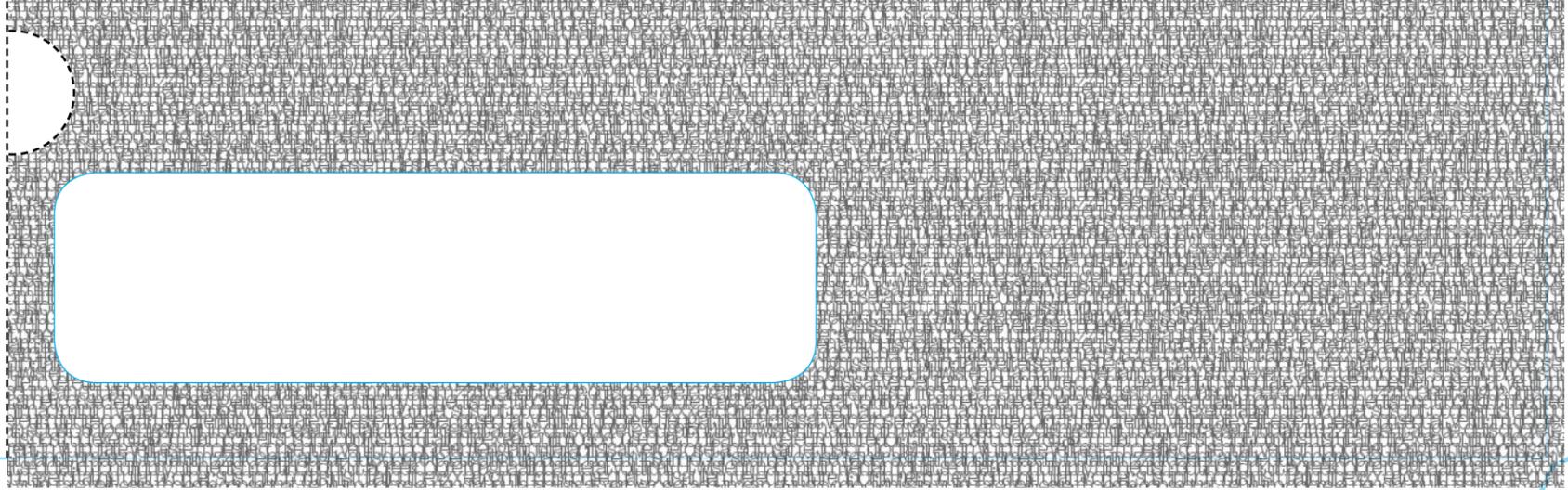
Mutual of Omaha Plaza, Omaha, NE 68175

IMPORTANT NOTICE FROM UNITED OF OMAHA FOR NEW MEDICARE BENEFICIARIES [IN NEBRASKA]

AFTER YOU ARE ENROLLED IN MEDICARE PART B, YOU HAVE A LIMITED TIME TO SECURE ADDITIONAL COVERAGE YOU MAY NEED WITHOUT ANSWERING HEALTH QUESTIONS OR TAKING A PHYSICAL EXAM. LOOK INSIDE TO FIND OUT MORE ABOUT YOUR OPTIONS AND LIMITATIONS DURING THIS OPEN ENROLLMENT PERIOD.

PRSRT STD
U.S. POSTAGE
PAID
MUTUAL OF
OMAHA

TO OPEN - TEAR ALONG PERFORATION



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Supporting Document Schedules

Satisfied -Name: Cover Letter **Review Status:** Accepted for Informational Purposes 05/26/2009

Comments:

Attachment:

AR Letter - App.pdf

Satisfied -Name: Memorandum of Variability **Review Status:** Accepted for Informational Purposes 05/26/2009

Comments:

Attachments:

UL4951 Memo of Var.pdf
UE1345 Memo of Var.pdf

UNITED of OMAHA

UNITED of OMAHA LIFE INSURANCE COMPANY
Mutual of Omaha Plaza
Omaha, NE 68175
402 342 7600



May 14, 2009

Arkansas Department of Insurance
Attn: Compliance - Life & Health
1200 West Third Street
Little Rock, AR 72201-1904

NAIC #261-69868
FEIN #47-0322111
United of Omaha Life Insurance Company
Medicare Supplement Advertising
Direct Mail Response Advertising
UL4951
UL4951-1 (Reply Card)
UE1345

Enclosed for review by your Department is a copy of the above-captioned advertising. The forms are new and are not intended to replace any previously approved forms. They will be used with appropriate approved forms in your state.

The above advertisements will be used in a package with the following forms:

<u>Form Number</u>	<u>Date Approved By Your Department</u>
UL4776 (Letter)	07-11-2008
UC6771 (Brochure)	07-11-2008
UC6772 (Brochure)	07-11-2008
UC7057 (Brochure)	03-23-2009
UA5910-03 (Application)	04-25-2008
UE1239 (Carrier)	07-11-2008
UCPNA, URPAN, UDPNS2 & UBCPNA (Outline of Coverage)	04-25-2008

We request that any information in brackets be considered variable. Memorandums of Variable Material describing the variable items are attached.

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

Sincerely,

Carly Cole
Product and Advertising Compliance Consultant
Regulatory Affairs

Phone: 402-351-2476
Fax: 402-351-5298
E-mail: advfilings@mutualofomaha.com

jl

VARIABLE MATERIAL FOR ADVERTISING FORM
Form Number: UL4951 and UL4951-1

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

UL4951

1) “Dear John Q. Sample” – opening of letter

One of the following options will be used:

- a) Good Morning,
- b) Good Afternoon,
- c) Hello,
- d) Dear Friend,
- e) Good Morning "Pat Q. Sample", - *(for personalization)*
- f) Good Afternoon "Pat Q. Sample", - *(for personalization)*
- g) Dear "Pat Q. Sample", - *(for personalization)*
- h) Dear [3rd party name and client reference],

2) “Dear [3rd party name and client reference], - if option “h” is selected from variable field #1.

This area is variable to enter the name of an approved 3rd party partner and their client reference only when marketing with an approved 3rd party partner. Client reference may be:

- 1) Cardmember
- 2) Cardmembers
- 3) Cardholder
- 4) Cardholders
- 5) Member
- 6) Members
- 7) Client
- 8) Clients
- 9) Account
- 10) Accounts
- 11) Accountholder
- 12) Accountholders

3)“Coverage is also available to persons under age 65 who are eligible...” second to last paragraph on page 1 and last disclaimer on back of tear off card.

This variable field is to notify of eligibility for Medicare Supplement insurance for persons under the age of 65 in states that this would apply, currently IL, KY, LA, MO, TX and WI.

- a) This notice will be on ads when mailing in IL, KY, LA, MO, TX, and WI.
- b) This notice will not be included when mailing in all other United of Omaha states.

4) [www.medsupquote.com]– Web address on bottom of first page.

A current and approved Medicare Supplement web address will be used.

5) Signature and name block - Lower left section of page 1.

This is variable to update the name of the licensed individual if there would be a change in the Director position.

6) “Premiums are based on attained age rating, which means....”-First sentence after signature block on page 2.

This variable field is to define, “Attained Age Rating” when advertising in states that require this language, currently NC.

- a) This statement will be included on ad when mailing in NC.
- b) This statement will not be included in states that do not require this language in a lead generating ad.

7 & 8) Third Party Client disclaimers - Disclaimers above the tear off card on page 2 and on the back of the tear off card, page 2.

This variable field will only be used when marketing with an approved 3rd Party Partner. An approved 3rd party partner's name will be inserted into the following disclaimers as new partner relationships are formed.

- a) While United of Omaha Life Insurance Company and [3rd party client] share a financial interest in this program, United of Omaha is solely responsible for the underwriting of insurance, its administration and the payment of claims. United of Omaha's policies are available to the general public regardless of any affiliation with [3rd party client].

Variable a) above will always be used when marketing with an approved 3rd party partner. One or a combination of following disclaimers may be used depending on the type of institution the 3rd party client is and their requirements.

- b) The insurance product is not a deposit or other obligation of, or guarantee by, the bank or any affiliate of the bank. The insurance product is not insured by the Federal Deposit Insurance Corporation (FDIC) or any other agency of the United States, the bank, or any affiliate of the bank.
- c) NOT A DEPOSIT – NOT FDIC INSURED – NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY – NOT GUARANTEED BY A BANK
- d) These Medicare Supplement insurance policies are underwritten by United of Omaha Life Insurance Company, Omaha, NE 68175, which assumes all responsibility and liability for the program and the insurance benefits provided thereunder. Neither [3rd party client] nor its related companies are affiliated with United of Omaha Life Insurance Company.

9) 3rd Party Client reference in disclaimers a) & d) in variable fields 7 & 8.

An approved 3rd Party Partner's name will be inserted.

UL4951-1

10) Picture of the Free Guide - Left side of tear off card.

One of the following options will be used:

- a) A snapshot of the front cover of the free information kit we are asking the customer to request will be placed here.
- b) This area may also be left blank.

11) "E-mail:"-Right side of tear off card.

This entire line will either be:

- a) left in or
- b) completely removed

VARIABLE MATERIAL FOR ADVERTISING FORM

Form Number: UE1345

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

1) IMPORTANT NOTICE FROM UNITED OF OMAHA FOR NEW MEDICARE BENEFICIARIES [IN NEBRASKA]

This variable with either:

- a) Include the state for which this advertisement is being mailed to
- b) or be completely left off

2) "AFTER YOU ARE ENROLLED IN MEDICARE PART B, YOU HAVE A LIMITED TIME..."

One of the following variables will be used in this field:

- 1) AFTER YOU ARE ENROLLED IN MEDICARE PART B, YOU HAVE A LIMITED TIME TO SECURE ADDITIONAL COVERAGE YOU MAY NEED WITHOUT ANSWERING HEALTH QUESTIONS OR TAKING A PHYSICAL EXAM. LOOK INSIDE TO FIND OUT MORE ABOUT YOUR OPTIONS AND LIMITATIONS DURING THIS OPEN ENROLLMENT PERIOD.
a) This statement will not be used in CT
- 2) LOOK INSIDE TO FIND OUT MORE ABOUT YOUR MEDICARE SUPPLEMENT OPTIONS
- 3) ARE YOU AS PREPARED AS YOU COULD BE FOR MEDICARE SUPPLEMENT INSURANCE?
- 4) HAVE YOU SELECTED YOUR MEDICARE SUPPLEMENT INSURANCE?