

SERFF Tracking Number: MUTM-126521878 State: Arkansas  
 Filing Company: United of Omaha Life Insurance Company State Tracking Number: 45047  
 Company Tracking Number: JAMIE LUCY  
 TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010  
 Standard Plans 2010  
 Product Name: Medicare Supplement Advertising - UC7478  
 Project Name/Number: Medicare Supplement Advertising/UC7478

## Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: Medicare Supplement Advertising - UC7478 SERFF Tr Num: MUTM-126521878 State: Arkansas

TOI: MS08I Individual Medicare Supplement - Standard Plans 2010 SERFF Status: Closed-Filed-Closed State Tr Num: 45047

Sub-TOI: MS08I.001 Plan A 2010 Co Tr Num: JAMIE LUCY State Status: Filed-Closed

Filing Type: Advertisement Reviewer(s): Stephanie Fowler

Author: Jamie Lucy Disposition Date: 03/18/2010

Date Submitted: 03/01/2010 Disposition Status: Filed-Closed

Implementation Date Requested: Implementation Date:

State Filing Description:

## General Information

Project Name: Medicare Supplement Advertising

Project Number: UC7478

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 03/18/2010

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 03/18/2010

Created By: Jamie Lucy

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Jamie Lucy

Filing Description:

Please see cover under the supporting documentation tab.

## Company and Contact

### Filing Contact Information

Carly Cole, Product & Advertising Compliance carly.cole@mutualofomaha.com

Consultant

Regulatory Affairs 402-351-2476 [Phone]

SERFF Tracking Number: MUTM-126521878 State: Arkansas  
 Filing Company: United of Omaha Life Insurance Company State Tracking Number: 45047  
 Company Tracking Number: JAMIE LUCY  
 TOI: MS081 Individual Medicare Supplement - Sub-TOI: MS081.001 Plan A 2010  
 Standard Plans 2010  
 Product Name: Medicare Supplement Advertising - UC7478  
 Project Name/Number: Medicare Supplement Advertising/UC7478

Mutual of Omaha Plaza 402-351-5298 [FAX]  
 Omaha, NE 68175

**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	

-----

**Filing Fees**

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United of Omaha Life Insurance Company	\$50.00	03/01/2010	34508539

SERFF Tracking Number: MUTM-126521878 State: Arkansas  
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 45047  
Company Tracking Number: JAMIE LUCY  
TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010  
Standard Plans 2010  
Product Name: Medicare Supplement Advertising - UC7478  
Project Name/Number: Medicare Supplement Advertising/UC7478

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	03/18/2010	03/18/2010

*SERFF Tracking Number:* MUTM-126521878      *State:* Arkansas  
*Filing Company:* United of Omaha Life Insurance Company      *State Tracking Number:* 45047  
*Company Tracking Number:* JAMIE LUCY  
*TOI:* MS08I Individual Medicare Supplement -      *Sub-TOI:* MS08I.001 Plan A 2010  
Standard Plans 2010  
*Product Name:* Medicare Supplement Advertising - UC7478  
*Project Name/Number:* Medicare Supplement Advertising/UC7478

## **Disposition**

Disposition Date: 03/18/2010

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.



SERFF Tracking Number: MUTM-126521878 State: Arkansas  
 Filing Company: United of Omaha Life Insurance Company State Tracking Number: 45047  
 Company Tracking Number: JAMIE LUCY  
 TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010  
 Standard Plans 2010  
 Product Name: Medicare Supplement Advertising - UC7478  
 Project Name/Number: Medicare Supplement Advertising/UC7478

## Form Schedule

**Lead Form Number: UC7478**

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Filed 03/18/2010	UC7478, UC7478-1	Advertising Lead Letter, Reply Card	Initial		0.000	UC7478_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.

Open enrollment lasts for six months and begins on the first day of the month in which you are both age 65 or older and enrolled in Medicare Part B. 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.

### **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 United of Omaha for outstanding strength, value and service.

over, please ...

[[www.medsupquote.com](http://www.medsupquote.com)]

UC7478

**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 information below and return this form in the postage-paid envelope provided.

Phone No.: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

**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.**

UC7478-1

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

In NC, 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.

**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: UM20, UM21, UM22, UM23, UM24, UM30 and UM31 (or state equivalent). In ID: UM20-21698, UM23-21699, UM24-21700, UM30-22551 and UM31-22552; in OK: UM20-21746, UM23-21747, UM24-21748, UM30-22579 and UM31-22580; in OR: UM20R, UM23R, UM24R, UM30R and UM31R; in WI: UM25 (or state equivalent). Not all policy forms may be available in every state. In MO and WI coverage is also available to persons under age 65 who are eligible for Medicare due to a disability.



**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.

Policy forms: UM20, UM21, UM22, UM23, UM24, UM30 and UM31 (or state equivalent). In ID: UM20-21698, UM23-21699, UM24-21700, UM30-22551 and UM31-22552; in OK: UM20-21746, UM23-21747, UM24-21748, UM30-22579 and UM31-22580; in OR: UM20R, UM23R, UM24R, UM30R and UM31R; in WI: UM25 (or state equivalent). Not all policy forms may be available in every state. In MO and WI coverage is also available to persons under age 65 who are eligible for Medicare due to a disability.

SERFF Tracking Number: MUTM-126521878 State: Arkansas  
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 45047  
Company Tracking Number: JAMIE LUCY  
TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010  
Standard Plans 2010  
Product Name: Medicare Supplement Advertising - UC7478  
Project Name/Number: Medicare Supplement Advertising/UC7478

## Supporting Document Schedules

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Memorandum of Variability <b>Comments:</b> <b>Attachment:</b> UC7478 MOV.pdf	Filed	03/18/2010

	Item Status:	Status Date:
<b>Satisfied - Item:</b> cover letter <b>Comments:</b> <b>Attachment:</b> AR Letter App-Not Filedk.pdf	Filed	03/18/2010

**VARIABLE MATERIAL FOR ADVERTISING FORM**  
**Form Number: UC7478 and UC7478-1**

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

**UC7478**

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

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

**3) 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.

**UC7478-1**

**4) 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.

**5) "Please complete the information below:"-Right side of tear off card.**

One of the following options will be used:

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

Your phone: (\_\_\_\_) \_\_\_\_\_

Your e-mail: \_\_\_\_\_

- b) Please complete the information below and return this form in the postage-paid envelope provided

Your phone\*: (\_\_\_\_) \_\_\_\_\_

Your e-mail\*: \_\_\_\_\_

\* All phone numbers and e-mail addresses are kept confidential.

- c) Please complete the information below and return this form in the postage paid envelope. You must also check one box below.

I prefer to read the required outline of coverage on my own. Later if I choose to apply I'll fill out my application through the mail. I understand my present eligibility may be time sensitive.

I'd prefer a FREE telephone consultation from a licensed representative.

Your phone: (\_\_\_\_) \_\_\_\_\_

Your e-mail: \_\_\_\_\_

I'd like printed information AND a licensed representative to contact me by phone.  
Your phone: (\_\_\_\_) \_\_\_\_\_  
Your e-mail: \_\_\_\_\_

d) I'd prefer to speak directly to a licensed representative of Mutual of Omaha.  
Your phone: (\_\_\_\_) \_\_\_\_\_  
Your e-mail: \_\_\_\_\_

I understand that my present eligibility may be time sensitive.

e) I'd prefer to speak directly to a licensed representative of Mutual of Omaha.  
Your phone\*: (\_\_\_\_) \_\_\_\_\_  
Your e-mail\*: \_\_\_\_\_

\* All phone numbers and e-mail address are kept confidential.

I understand that my present eligibility may be time sensitive.

# UNITED of OMAHA

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



March 1, 2010

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  
Direct Response Mail Advertising  
Medicare Supplement Advertising  
UC7478  
UC7478-1 (Reply Card)

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.

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

<u>Form Number</u>	<u>Date Approved By Your Department</u>
UC7307 (Brochure)	02-2-2010
UE1381 (Carrier)	02-2-2010
UA5910-03 (Application)	04-25-2008
CP12, RP12.9.B-AR, & DP2B (Outline of Coverage)	08-18-2009
BC12 00-10 (Outline of Coverage)	11-19-2009

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,

Carly Cole  
Product and Advertising Compliance Consultant  
Regulatory Affairs

Phone: 402-351-2476  
Fax: 402-351-5298  
E-mail: [advfilings@mutualofomaha.com](mailto:advfilings@mutualofomaha.com)

jl