

SERFF Tracking Number: MUTM-127887762 State: Arkansas
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 50459
Company Tracking Number: JAMIE LUCY
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: Long Term Care Advertising - GL609_1111
Project Name/Number: Long Term Care Advertising/GL609_1111

Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: Long Term Care Advertising - SERFF Tr Num: MUTM-127887762 State: Arkansas
GL609_1111

TOI: LTC03I Individual Long Term Care

SERFF Status: Closed-Filed

State Tr Num: 50459

Sub-TOI: LTC03I.001 Qualified

Co Tr Num: JAMIE LUCY

State Status: Filed-Closed

Filing Type: Advertisement

Reviewer(s): Donna Lambert

Author: Jamie Lucy

Disposition Date: 12/15/2011

Date Submitted: 12/13/2011

Disposition Status: Filed

Implementation Date Requested:

Implementation Date: 01/16/2012

State Filing Description:

General Information

Project Name: Long Term Care Advertising

Status of Filing in Domicile:

Project Number: GL609_1111

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 12/15/2011

State Status Changed: 12/15/2011

Deemer Date:

Created By: Jamie Lucy

Submitted By: Jamie Lucy

Corresponding Filing Tracking Number:

Filing Description:

NAIC# 261-69868

FEIN# 47-0322111

United of Omaha Life Insurance Company

Long-Term Care Advertising

GL609_1111

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.

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

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Thank you for the review of this filing.

Sincerely,

Corporate Compliance and Ethics Division
For Questions, please contact Carly Cole
Phone: 402-351-2476; Fax: 402-351-5298
E-mail: advfilings@mutualofomaha.com

jl

Company and Contact

Filing Contact Information

Carly Cole, Product & Advertising Compliance carly.cole@mutualofomaha.com
Consultant
Mutual of Omaha 402-351-2476 [Phone]
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) 351-6910 ext. [Phone] FEIN Number: 47-0322111

Filing Fees

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

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United of Omaha Life Insurance Company	\$50.00	12/13/2011	54477176

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Donna Lambert	12/15/2011	12/15/2011

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Disposition

Disposition Date: 12/15/2011

Implementation Date: 01/16/2012

Status: Filed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Memorandum of Variability	Filed	Yes
Form	Letter	Filed	Yes

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Form Schedule

Lead Form Number: GL609_1111

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed 12/15/2011 1	GL609_1111	Advertising	Letter	Initial		0.000	GL609_1111.pdf

[Your Licensed Company Name Required]

[Agent Name]

[Agent Address]

[Agent City, State, ZIP]

[Agent Phone Number]

[Agent Email]

A benefit that makes sense for your company and your employees from United of Omaha Life Insurance Company

[Dear Business Owner/Employer or Name,]

Employers just like you are complimenting their benefits package with long-term care insurance. Adding a long-term care insurance benefit from United of Omaha Life Insurance Company (United of Omaha) can help your employees protect their financial security and provide benefits for your company, too. Take a look at the benefits for your company and your employees.

For your company:

- May help boost employee morale and job satisfaction
- May help increase productivity, attract and retain top talent
- Requires minimal administration at little to no cost
- Offers favorable tax advantages
- May be able to provide key employee carve-outs¹

For your employees:

- Shows you are concerned about their well-being
- Can provide a critical component to help protect their financial plan
- Offers discounted premiums, portability and ease of payment
- All benefits received are intended to be tax-free
- Employees may be eligible for tax credits or deductions for premiums²
- Reduced Underwriting Standards offer easy-to-apply-for policies with as few as three health questions

To learn more about the advantages of including long-term care insurance in your employee benefits package, please contact me.

Sincerely,

[Agent Name]

*An Independent Licensed Agent**

¹ Only if premiums are employer paid.

² Only available when premiums are paid on a voluntary basis. Tax advantages may vary in states.

Long-term care insurance is underwritten by United of Omaha Life Insurance Company, a Mutual of Omaha company, Mutual of Omaha Plaza, Omaha, NE 68175. [1-800-775-6000] Policy forms: LTC09U-5ML, LTC09U-10ML (or state equivalent). In ID: LTC09U-5ML-ID, LTC09U-10ML-ID; In NC: LTC09U-5ML-NC, LTC09U-10ML-NC; In OK: LTC09U-5ML-OK, LTC09U-10ML-OK; In OR: LTC09U-5ML-OR, LTC09U-10ML-OR; In PA: LTC09U-5ML-PA, LTC09U-10ML-PA; In WA: LTC09U-5ML-WA, LTC09U-10ML-WA. For costs and further details of the coverage, including exclusions, any reductions or limitations and terms under which the policy may be continued in force, see your agent* or write to the company. This is a solicitation of insurance. You may be contacted by telephone by an insurance agent.*

*WA residents: All references to the term "agent" should be replaced with "producer."

GL609_1111



**UNITED OF OMAHA LIFE
INSURANCE COMPANY**
A MUTUAL OF OMAHA COMPANY

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Supporting Document Schedules

	Item Status:	Status
Satisfied - Item: Memorandum of Variability	Filed	Date: 12/15/2011
Comments:		
Attachment:		
GL609_1111 MOV.pdf		

VARIABLE MATERIAL FOR ADVERTISING FORM GL609_1111

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

Section

[Your Licensed Company Name Required]

Explanation

This will be the name of the company sending the letter.

[Agent Name] [Agent Address] [Agent City, State, ZIP] [Agent Phone Number] [Agent Email]

Agent name sending the letter. The address of the Agent. The city, state and ZIP of the Agent. The Phone Number of the Agent. The email address of the Agent.

[Agent Name]

This will be the Agent name sending the letter.

[1-800-775-6000]

The phone number is variable in case it may change in the future