

SERFF Tracking Number: MUTM-127167996 State: Arkansas
Filing Company: Mutual of Omaha Insurance Company State Tracking Number: 48770
Company Tracking Number: ASHLEY WILLIAMS
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: Long Term Care Advertising - MC34023_0311
Project Name/Number: Long Term Care Advertising /MC34023_0311

Filing at a Glance

Company: Mutual of Omaha Insurance Company

Product Name: Long Term Care Advertising - SERFF Tr Num: MUTM-127167996 State: Arkansas
MC34023_0311

TOI: LTC03I Individual Long Term Care SERFF Status: Closed-Filed- State Tr Num: 48770
Closed

Sub-TOI: LTC03I.001 Qualified

Co Tr Num: ASHLEY WILLIAMS

State Status: Filed-Closed

Filing Type: Advertisement

Reviewer(s): Harris Shearer,
Stephanie Fowler

Author: Ashley Williams

Disposition Date: 06/01/2011

Date Submitted: 05/13/2011

Disposition Status: Filed-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: Long Term Care Advertising

Status of Filing in Domicile:

Project Number: MC34023_0311

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: 06/01/2011

State Status Changed: 06/01/2011

Deemer Date:

Created By: Ashley Williams

Submitted By: Ashley Williams

Corresponding Filing Tracking Number:

Filing Description:

NAIC# 261-71412

FEIN# 47-0246511

Mutual of Omaha Insurance Company

Long Term Care Advertising

MC34023_0311

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.

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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

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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

Mutual of Omaha Insurance Company CoCode: 71412 State of Domicile: Nebraska
Mutual of Omaha Plaza Group Code: 261 Company Type: Health Insurance
Omaha, NE 68175 Group Name: State ID Number:
(402) 351-6910 ext. [Phone] FEIN Number: 47-0246511

Filing Fees

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

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Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Mutual of Omaha Insurance Company	\$50.00	05/13/2011	47559735

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	06/01/2011	06/01/2011

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Disposition

Disposition Date: 06/01/2011

Implementation Date:

Status: Filed-Closed

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-Closed	Yes
Form	Highlight Sheet	Filed-Closed	Yes

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Form Schedule

Lead Form Number: MC34023_0311

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed 06/01/2011	MC34023_0311	Advertising	Highlight Sheet	Initial		0.000	MC34023_0311.pdf



MUTUAL CARE® AT WORK

LONG-TERM CARE INSURANCE

Plan Highlights

Your Mutual Care® at Work long-term care insurance policy provides the following benefits:

Home Care Benefits

- **Personal care services** – Pays for services to assist with the activities of daily living
- **Homemaker services** – Pays for help with grocery shopping, meal preparation and housekeeping
- **Professional services** – Pays for services of a registered nurse, home health aide or therapist
- **Adult day care** – Pays for care in an adult day care facility

Care Coordinator Services

- Pays for services of a care coordinator – a licensed health care professional who can assess your needs, develop an individualized plan of care and help arrange for long-term care services
- No elimination period for care coordinator services means you have immediate access to help and professional advice
- Use of a care coordinator is not required; however, some policy benefits are available only when a care coordinator is used

Other Stay-at-Home Benefits (requiring use of a care coordinator)

- **Caregiver training** – Pays to train a family member or friend to provide care
- **Durable medical equipment** – Pays to rent or purchase special equipment, like a hospital-style bed, walker, wheelchair or respirator

- **Home modifications** – Pays to make home modifications that enhance the ability to perform the activities of daily living
- **Medical alert system** – Pays to install and rent a medical alert system

Facility Care Benefits

- **Assisted living facility** – Pays for room and board in a one-bedroom unit, ancillary services and patient supplies
- **Nursing home** – Pays for room and board, ancillary services and patient supplies
- **Hospice care** – Pays for hospice care in a nursing home, assisted living facility or in your home

Additional Facility Care Benefits

- **Bed reservation benefit** – Pays to keep a bed available for up to 30 days per calendar year should you need to be hospitalized or if you temporarily leave the facility for any reason
- **Facility assessment benefit** – Pays for a care coordinator to annually assess the safety and adequacy of your facility and provide a written report to you and/or your family members

35 Percent Cash Benefit

- Pays 35 percent of the policy's home health care maximum monthly benefit
- Cash can be used for any costs associated with your long-term care expenses
- No elimination period means cash is available beginning with day one of benefit eligibility

Alternate Care Benefit

Pays benefits for alternate services or treatments not otherwise covered by the policy, as long as they are recommended by a care coordinator.

Waiver of Premium Benefit

Waives premium when long-term care services are received.

International Travel Benefit

Pays benefits for long-term care services received outside the United States, Canada or the United Kingdom.

Respite Care Benefit

Pays benefits for the temporary services of another person or facility to provide care in order to provide a break for the primary caregiver.

Multiple Premium Payment Options

- **Lifetime** – Premiums are paid throughout the life of the policy
- **10-year** – Premiums are paid for 10 years, after which no further premiums are due
- **20-year** – Premiums are paid for 20 years, after which no further premiums are due
- **To-age-65** – Premiums are paid until age 65, after which no further premiums are due

Tax-Qualified Coverage*

Mutual of Omaha's long-term care insurance policies are intended to be tax-qualified. Under current tax laws, the eligible premium amount established annually by the Internal Revenue Service can be included as a medical expense as long as deductions are itemized and medical expenses, including eligible long-term care insurance premiums, exceed 7.5 percent of adjusted gross income. In addition, benefits paid are intended to be tax-free.

*Internal Revenue Code Section 7702B

30 Days to Examine Your Policy

You have 30 days from the time you receive your policy to look it over carefully. If you decide it's not for you, return it to us for a full refund of any premium you paid.

OPTIONAL POLICY BENEFITS

The following benefits can be added to your Mutual Care® at Work long-term care insurance policy at an additional cost:

Spouse Shared Care Benefit – Allows spouses to share benefits under identical long-term care insurance policies.

- If one spouse runs out of coverage but still needs care, benefits are available under the other spouse's policy
- If one spouse dies while both policies are in force, the surviving spouse receives the deceased spouse's remaining maximum lifetime benefit amount with no effect on premium

Spouse Security Benefit – Pays an additional 60 percent of the policy benefits the insured spouse receives each month. The money can be used to provide care and living expenses for the uninsured spouse. This benefit is not payable when the cash benefit is elected.

Spouse Waiver of Premium – Waives premium on both spouse's policies when one spouse receives long-term care benefits.

Spouse Survivorship Benefit – When one spouse dies after both policies have been in force for 10 years, no further premium is due from the surviving spouse for the remainder of his or her lifetime.

Waiver of Elimination Period for Home Health Care – Waives the elimination period before home care benefits begin. This means days you receive home care as well as days you do not receive home care both count toward satisfying the elimination period.

Additional Benefit for Injury – When an injury requiring long-term care services is sustained prior to age 65, pays an additional benefit (in addition to benefits paid for home health care, assisted living or nursing home care) for other expenses related to the injury, up to the maximum monthly benefit amount.

Restoration of Benefits – Allows the maximum lifetime benefit of the policy to be restored (once during the life of the policy) when long-term care services are not needed for 180 consecutive days.

Return of Premium Benefits:

- **Full Return of Premium at Death** – Provides for a full refund of all premium paid at the time of death
- **Return of Premium Less Claims Paid** – Returns premium, less claims paid, at the time of death
- **Return of Premium Less Claims Paid if Death Occurs Before Age 65** – Returns premium, less claims paid, if death occurs prior to age 65

Non-Forfeiture Shortened Benefit Period – Allows for coverage to continue on a reduced basis in the event payment of premium stops.

ELIGIBILITY TO RECEIVE BENEFITS

You're eligible to receive benefits if a licensed health care practitioner determines you're chronically ill and need assistance with at least two of the six activities of daily living (bathing, eating, toileting, transferring, continence and dressing) or you need continual supervision due to a severe cognitive impairment.

HOW BENEFITS ARE PAID

After you satisfy the elimination period (the waiting period before benefits begin), your policy will pay benefits for the long-term care expenses you incur each month – up to the maximum monthly benefit amount you select. Your policy will continue to pay for incurred expenses until the maximum lifetime benefit of the policy is reached.

PREMIUM ALLOWANCES

Modified Guaranteed Issue

- **Program Allowance** – 10 percent if you qualify for modified guaranteed issue underwriting
- **Married** – 15 percent if you are married but your spouse does not purchase a long-term care insurance policy
- **Two-Person Household** – 10 percent if you or another adult living in your household (other than your spouse) purchase long-term care insurance policies from Mutual of Omaha

Simplified Issue

- **Program Allowance** – 10 percent if you qualify for simplified issue underwriting
- **Spouse** – 35 percent allowance if you and your spouse both purchase long-term care insurance policies from Mutual of Omaha
- **Married** – 15 percent if you are married, but your spouse does not purchase a long-term care insurance policy
- **Two-Person Household** – 10 percent if you or another adult living in your household (other than your spouse) purchase long-term care insurance policies from Mutual of Omaha

Full Underwriting

- **Program Allowance** – 5 percent program if you qualify for full underwriting
- **Spouse** – 35 percent if you and your spouse both purchase long-term care insurance policies from Mutual of Omaha
- **Married** – 15 percent if you are married but your spouse does not purchase a long-term care insurance policy
- **Preferred** – 15 percent for being in good health
- **Two-Person Household** – 10 percent if you or another adult living in your household (other than your spouse) purchase long-term care insurance policies from Mutual of Omaha

PLEASE READ YOUR POLICY CAREFULLY

This is a brief description of some of the facts about a long-term care insurance policy. A Shopper's Guide to Long-Term Care Insurance and outline of coverage are provided to give you additional information. The policy and outline of coverage contain complete details about the benefits, exceptions and limitations of the policy and set forth in detail the rights and obligations of both you and Mutual of Omaha Insurance Company. The long-term care benefits provided will be individual coverage, not group coverage.

Long-Term Care Insurance underwritten by:

MUTUAL OF OMAHA INSURANCE COMPANY

Mutual of Omaha Plaza

Omaha, NE 68175-0001

[1-800-776-6000]

mutualofomaha.com

This is a solicitation of insurance. Policy forms LTC09M-5ML, LTC09M-10ML (or state equivalent). In NC: LTC09M-5ML-NC, LTC09M-10ML-NC. In OR: LTC09M-5ML-OR, LTC09M-10ML-OR. In WA: LTC09M-5ML-WA, LTC09M-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. An insurance agent may contact you by telephone (in WA: producer).

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Supporting Document Schedules

	Item Status:	Status
Satisfied - Item: Memorandum of Variability	Filed-Closed	Date: 06/01/2011
Comments:		
Attachment:		
VM-MC34023_0311.pdf		

**VARIABLE MATERIAL FOR ADVERTISING FORM
MC34023_0311**

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

Section

Explanation

Back page by underwriting information, [1-800-775-6000]

This phone number is variable in case it changes in the future.