

SERFF Tracking Number: MUTM-127170726 State: Arkansas
Filing Company: Mutual of Omaha Insurance Company State Tracking Number: 48817
Company Tracking Number: SHELLY KAIPUST
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: Long Term Care Advertising - MC34188_0311
Project Name/Number: Long Term Care Advertising/MC34188_0311

Filing at a Glance

Company: Mutual of Omaha Insurance Company

Product Name: Long Term Care Advertising - SERFF Tr Num: MUTM-127170726 State: Arkansas
MC34188_0311

TOI: LTC03I Individual Long Term Care SERFF Status: Closed-Filed- State Tr Num: 48817
Closed

Sub-TOI: LTC03I.001 Qualified

Co Tr Num: SHELLY KAIPUST

State Status: Filed-Closed

Filing Type: Advertisement

Reviewer(s): Harris Shearer,
Stephanie Fowler

Author: Shelly Kaipust

Disposition Date: 06/02/2011

Date Submitted: 05/18/2011

Disposition Status: Filed-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: Long Term Care Advertising

Project Number: MC34188_0311

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Filing Status Changed: 06/02/2011

State Status Changed: 06/02/2011

Created By: Shelly Kaipust

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Shelly Kaipust

Filing Description:

NAIC #: 261-71412

FEIN #: 47-0246511

Mutual of Omaha Insurance Company

Long Term Care Advertising

MC34188_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,

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

Company and Contact

Filing Contact Information

Michelle Kaipust, Senior Policy Drafting and Regulatory Assistant shelly.kaipust@mutualofomaha.com
Mutual of Omaha 402-351-8391 [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:
Per Company: No

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Mutual of Omaha Insurance Company	\$50.00	05/18/2011	47739119

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	06/02/2011	06/02/2011

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Disposition

Disposition Date: 06/02/2011

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	Memo of Variability	Filed-Closed	Yes
Form	Flyer	Filed-Closed	Yes

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Form Schedule

Lead Form Number: MC34188_0311

Schedule Item	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Filed- Closed 06/02/2011	MC34188_0311	Advertising Flyer	Initial		0.000	MC34188_0311.pdf

Mutual Care[®] at Work

Long-Term Care Insurance



What are your plans for the future?

You work hard to build a good life for yourself and your family. That includes being able to do the things that are important to you today plus the things you've always dreamed of doing when you retire.

But what if a long-term illness or injury hampered your ability to care for yourself? What would happen to the plans you've made?

A Mutual Care[®] at Work long-term care insurance policy from Mutual of Omaha Insurance Company may help. And right now, your employer is giving you the opportunity to apply for this insurance at your workplace.

Long-term care insurance may be one of the best ways you can help ensure:

- Your retirement savings are protected from the high cost of care
- You receive the care you need in the setting that's right for you
- You won't have to rely on your children
- You'll be able to maintain your independence

I'll be happy to tell you more about this valuable employee benefit. Contact me to schedule a no-cost, no-obligation consultation to assess your long-term care needs.

Call today to schedule an appointment:

[Agent Name]
[Phone Number]
[E-mail Address]

Open Enrollment Period:

[Date] to [Date]

This is a solicitation of insurance. Long-term care insurance is underwritten by Mutual of Omaha Insurance Company, Mutual of Omaha Plaza, Omaha, NE 68175 [1-800-775-6000]. Policy forms LTC09M-5ML, LTC09M-10ML (or state equivalent). In ID: LTC09M-5ML-ID, LTC09M-10ML-ID. In NC: LTC09M-5ML-NC, LTC09M-10ML-NC. In OK: LTC09M-5ML-OK, LTC09M-10ML-OK. In OR: LTC09M-5ML-OR, LTC09M-10ML-OR. In PA: LTC09M-5ML-PA, LTC09M-10ML-PA. 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. You may be contacted by telephone by an insurance agent (in WA: producer).

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Supporting Document Schedules

	Item Status:	Status
Satisfied - Item: Memo of Variability	Filed-Closed	Date: 06/02/2011
Comments:		
Attachment:		
VM-MC34188_0311.pdf		

**VARIABLE MATERIAL FOR ADVERTISING FORM
MC34188_0311**

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

Section

Under Call Today to Schedule an Appointment, [Agent Name], [Phone Number], [Email address]

Under Open Enrollment Period, [Date] to [Date]

In the disclosure copy, [1-800-775-6000]

Explanation

Agent Name will be the agent giving the presentation. Phone number will be the agent's phone number. Email address will be the agent's email address.

Date to Date will be the dates of the open enrollment period.

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