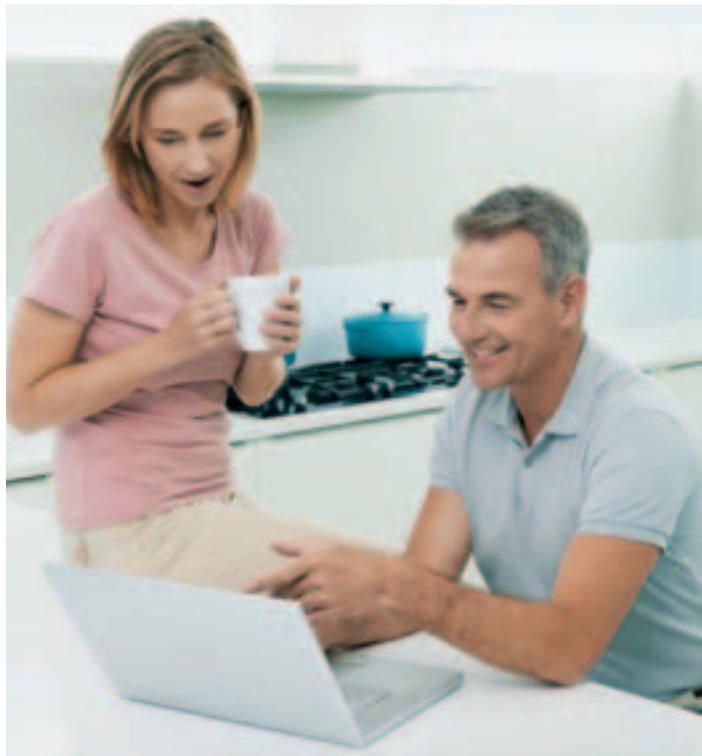


› What to Know Before Applying for Long-Term Care Insurance

Many factors go into evaluating long-term care insurance applications and whether people are eligible for coverage. The more informed you are about those factors now, the more confident you and your agent can be about your decision whether to proceed.

The following is a partial list of the kinds of conditions and situations that we consider when reviewing applications and underwriting coverage. Please:

1. Read the Pre-submission Underwriting Considerations.
2. Review the Disqualifying Conditions.
3. Discuss your health history with your agent if any of these apply to you and you're wondering whether you would qualify for coverage.
4. Talk to your agent about submitting a health pre-qualification form to Mutual of Omaha before the actual application is completed. That will help determine whether Mutual of Omaha would be able to insure you and at what rate class and benefits.
5. Discuss with your agent what to expect during the underwriting process and personal health interview should you decide to submit an application.



Pre-submission Underwriting Considerations

If you	Please wait to submit your application until
Received any joint injections within the last six-12 months	Six-12 months have passed (this depends on the reason for the injection). Discuss with your agent/producer.
Are currently undergoing physical, occupational or speech therapy	You are released from care and have returned to 100% function. Discuss with your agent/producer.
Have any invasive tests, labs, X-rays, MRI, ultrasounds, other procedures scheduled	The testing is completed and you no longer need to seek care for the condition that prompted testing. Discuss with your agent/producer.
Have been advised to have surgery not yet completed	Surgery is completed, you've been released from care and are fully recovered. Discuss with your agent/producer.
Are undergoing evaluation for an undiagnosed medical condition	All evaluations have been completed and a benign and or insurable condition has been diagnosed and proper wait time has passed. Discuss with your agent/producer.
Have sleep apnea noted in medical records and you are noncompliant with treatment	You are compliant with treatment outlined by your physician for a three-month period and documented as such in medical records.
You have applied for long-term care insurance and have been declined or postponed	The reason for decline or postponement is under control, appropriate wait time has been met, or no longer exists. Please have your decline or postpone letter available for your insurance agent/producer to review and advise.

Disqualifying Conditions

- You are age 65 or older and it's been more than two years since you have had a doctor's visit which included a head to toe physical examination with blood work (comprehensive metabolic profile)
 - If you are currently using any of the following: quad cane, walker, wheelchair, electric scooter, stair lift, hospital bed, respirator, nebulizer, oxygen (including supplemental CPAP use)
 - Within the past six months you have been confined to, used or been advised to have any of the following: residential care, assisted living or adult day care facility services, nursing home or home health care services
 - You require the assistance or supervision of another person or a device of any kind for any of the following: bathing, toileting, dressing, eating, medication management, getting in and out of a chair or bed, your inability to control your bowel or bladder
 - You have you been diagnosed or treated by a member of the medical profession as having Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC) or Human Immunodeficiency Virus (HIV) Infection (symptomatic or asymptomatic)
 - You currently qualify for payment or are receiving benefits under Medicaid (not Medicare), disability income plan, workers' compensation, Social Security disability or any federal or state disability plan
 - You ever had, have been diagnosed as having, or received medical advice or medical care from a physician or health care provider for any of the following:
 - Alzheimer's Disease
 - Dementia
 - Memory Loss
 - Mild Cognitive Impairment
 - Organic Brain Syndrome
 - Schizophrenia
- Mental Retardation
 - Connective Tissue Disease
 - Kidney Failure or Received Dialysis
 - Huntington's Chorea
 - Chronic Hepatitis
 - Cirrhosis
 - Hydrocephalus
 - Multiple Myeloma
 - Psychosis
 - Organ Transplant
 - Amyotrophic Lateral Sclerosis (ALS, Lou Gehrig's Disease)
 - Parkinson's Disease
 - Systemic Lupus
 - Multiple Sclerosis (MS)
 - Muscular Dystrophy
 - Myasthenia Gravis
 - Scleroderma
 - Paralysis
 - Ministroke or Transient Ischemic Attack (TIA) in the past year, single episode stroke in the past two years, two or more strokes or TIAs, or you have not fully recovered or continue to have weakness, decreased sensation or loss of function from a stroke or TIA
 - Diabetes for 20 or more years and currently taking more than 50 units of insulin daily, or with peripheral neuropathy, numbness, tingling or decreased sensation in your feet, retinopathy or history of a stroke, ministroke or a TIA
 - Cancer (except basal or squamous cell skin cancers, or stage I/A bladder, thyroid, breast or prostate cancers) in the past two years
 - Chronic Obstructive Pulmonary Disease (COPD), Emphysema or Chronic Bronchitis and have used tobacco in the past year

The health conditions listed above are not all inclusive. There are other health conditions not listed in our underwriting guidelines that may impact your insurability. If you're in doubt whether you would qualify for coverage, please discuss your health history with your agent. It may be best that your agent submit a health prequalification to Mutual of Omaha before the actual application is taken to determine whether Mutual of Omaha would be able to insure you and at what rate class and benefits.

Long-term care insurance is underwritten by Mutual of Omaha Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE, 68175; 1-800-775-6000. Policy form: ICC13-LTC13, LTC13 (or state equivalent). In CA, LTC09-CA; in FL, LTC13-FL; in NY, LTC13-NY. These policies have exclusions, limitations and reductions and terms under which the policy may be continued in force or discontinued. Benefits may be provided by a combination of the policy and riders and are subject to underwriting. Premiums will vary depending on the benefits selected. Premium rates may increase. A medical exam may be required for coverage. For costs and complete details of coverage, call your agent/producer or write to the company.

This is a solicitation of insurance. You may be contacted by telephone by an insurance agent/producer.