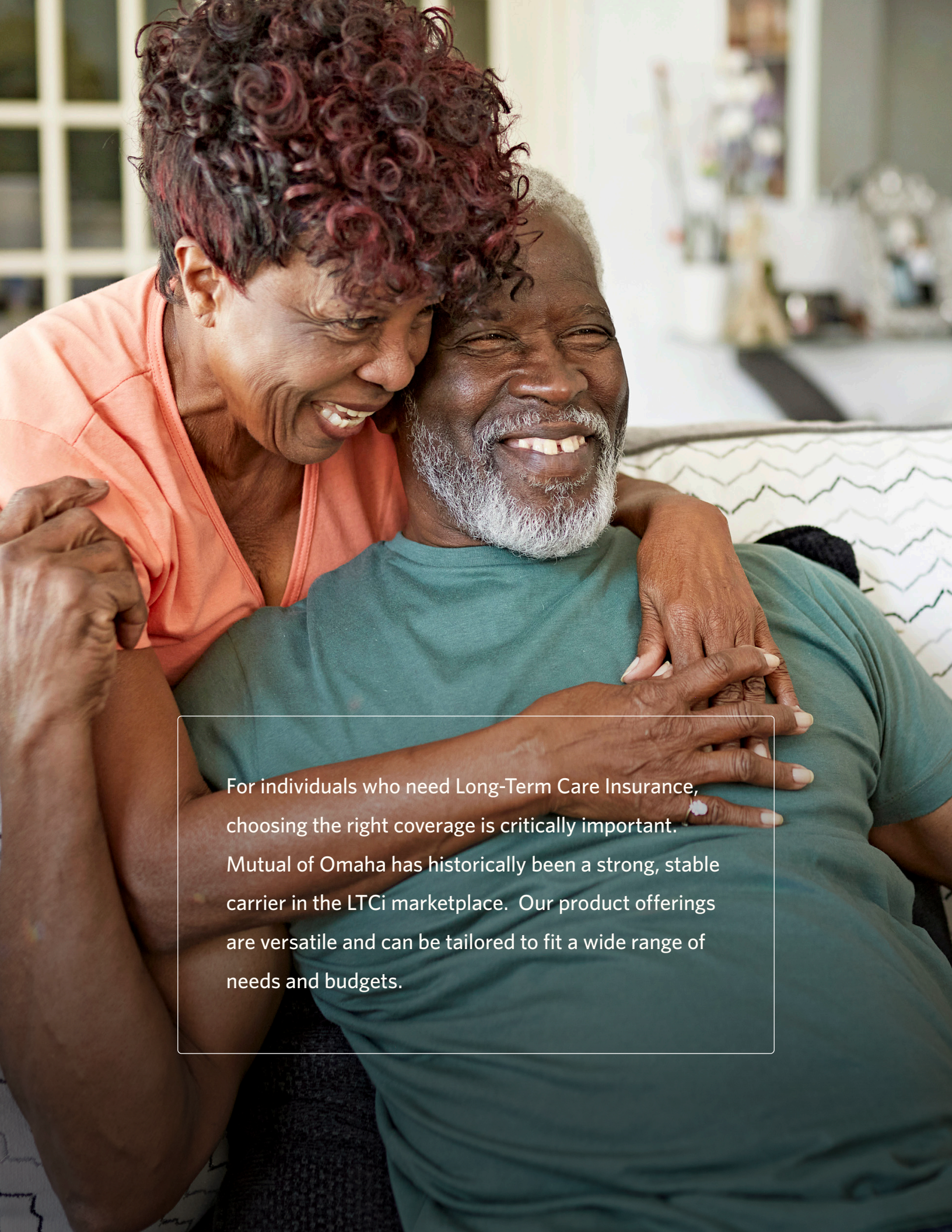


LONG-TERM
CARE

TOP TEN LONG-TERM CARE CONSIDERATIONS



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For individuals who need Long-Term Care Insurance, choosing the right coverage is critically important. Mutual of Omaha has historically been a strong, stable carrier in the LTCi marketplace. Our product offerings are versatile and can be tailored to fit a wide range of needs and budgets.

We continually strive to underwrite cases responsibly and to handle each application with care. We also feel it's very important to clearly communicate our underwriting guidelines and expectations, particularly in the pre-submission timeframe.

Please use this quick reference guide highlighting ten common health conditions that should be given some extra consideration before submitting an application. This will help ensure a smoother process for all parties involved.

If you have any questions or concerns about your client's health history or what rates to quote, please reach out to the underwriting team. We can walk through points of consideration and even provide you with a questionnaire to assist with field underwriting.

Our Underwriters are here to help guide you through the process! Underwriting Pre-screen can be reached by email at ltcunderwriting@mutualofomaha.com or by phone at 1-800-551-2059.

For clients who have any of the following conditions, make sure to ask these questions:

Diabetes

1. Do you have any tingling in your extremities?
2. Do you have any kidney (renal) issues?
3. Have you had any changes or additions to your diabetic medications within the last 6 months?
4. How long have you had diabetes? Has your diabetes been present for 20 years or longer?
5. What is your most recent A1c? What is the highest your A1c has been in the past 3 years?
6. What is your height and weight? Has your build been stable for the past 12 months?
7. Do you have any cardiac history such as heart disease, atrial fibrillation, stroke or other vascular history?
8. Do you use tobacco products (including vaping)?

Information from the Underwriting Guide:

- Diabetes for 20 years or more - Decline
- Diabetes in combination with more than 50 units of insulin a day - Decline
- Diabetes with increase in dosages or additions of diabetic medications in last 6 months - Decline
- Diabetes in combination with: macular edema, neuropathy, numbness or tingling of the extremities, regardless of cause, nephropathy, peripheral vascular disease, A1c > 8.0, serum creatinine > 1.3, Microalbumin > 20mg/dl or Microalbumin ratio > 30 - Decline



Good to Know: If your client has any comorbid features, our best offer would likely be class I at best. However, if they have multiple comorbid features, the case will likely lead to a decline in coverage.

Obesity

1. What is your current height and weight?
2. Has there been any significant weight loss in the past 12 months?
3. If yes to number 2 – was it by choice or due to underlying health concerns?
4. Any history of surgery for weight loss?
5. Any additional health history impacted by your build (arthritis of weight bearing joints, diabetes or heart disease)?

Information from the Underwriting Guide:

- Refer to the build section for minimum and maximum height and weight charts
- Any significant change in weight (20 lbs. or more) would require an explanation
- Build in combination with 2 or more joint replacements – rated or decline



Good to Know: Using the height and weight chart in the underwriting guide is the best way to determine if your client's build is within our insurable limits. Asking your client about their build over the past few years will allow you to determine if any weight change represents a concern. If there are no additional concerns and your client's build has been stable (and within our insurable limits) for 12 months, we can consider your client for coverage.

Osteoarthritis

1. Do you have a history of joint replacement surgery or recommended joint replacement surgery?
2. What medications do you currently use for osteoarthritis?
3. Do you have a history of joint injections? If yes, which joints and when?
4. Have you ever been told your osteoarthritis is severe or advanced?
5. When was your last x-ray or MRI to evaluate your osteoarthritis?
6. Specific type of arthritis diagnosis?
7. What is your height and weight?

Information from the Underwriting Guide:

- Severe by symptoms or imaging – Decline
- Bone on Bone – Decline
- Any severity within 12 months of starting injections, or advised to have surgery, therapy, or additional injections, or with significant joint deformities – Decline
- On Prednisone > 10mg/day, or Methotrexate > 25mgs week, or Gold – Decline
- Severe disease, or with ADL/IADL deficits – Decline
- Taking a medication indicated for severe arthritis on the Uninsurable Medication list, or requiring more than 3 doses of narcotic pain medication per week, or with significant joint deformities – Decline



Good to Know: In many cases, those with a history of significant osteoarthritis can be considered for coverage in the future if successfully treated. When field underwriting this history, ask about limitations, therapies and find out if there has been any recent imaging. The severity of the disease process would be determined from these reports.



Cancer

1. What is the type of cancer (stage/grade), as well as location of the cancer?
2. What date were you diagnosed?
3. Type of treatment and date treatment was completed?
4. Any recurrence or additional cancers diagnosed?
5. Do you use tobacco or inhale marijuana?

Information from the Underwriting Guide:

Please refer to Cancer guidelines in underwriting guide for specifics on each type of cancer.



Good to Know: Many cancer survivors can be insurable after full recovery and appropriate waiting periods have been met, dependent on cancer type and staging. That information, along with any risk factors can be very beneficial when prescreening your case.

Hypertension

1. What date were you diagnosed?
2. Length of time on current medications?
3. Have there been any medication changes/dose changes in the past 3 months?
4. What is your average blood pressure reading?
5. What is your height and weight?
6. Do you have any significant risk factors?

Information from the Underwriting Guide:

- If the client has high blood pressure after being compliant for treatment for 3 months and has an average BP > 170/94, or if the client has any noncompliance with treatment – Decline



Good to Know: Readings consistently below 140/90 reflect stability. If your client's blood pressure readings exceed 170/94, they are uninsurable until stabilized for at least 3 months.

Chronic Kidney Disease

1. What is your most recent serum creatinine level?
2. What is the highest serum creatinine level in the past three years?
3. What treatment are you receiving for CKD? When was the treatment initiated? Have there been any therapy changes in the last three years?
4. Is there a history of diabetes, pre-diabetes, impaired fasting glucose or metabolic syndrome?
5. Is there a history of hypertension? If so, where does your blood pressure reading trend?

Information from the Underwriting Guide:

- Creatinine > 1.5 – Decline
- Kidney Transplant – Decline
- Polycystic Kidney Disease – Decline
- Dialysis – Decline
- Kidney failure, single episode, fully recovered after 2 years – Individual Consideration



Good to Know: If the applicant has a history of diabetes or other form of impaired glucose levels, it is not likely that consideration is possible. However, those who carry the diagnosis and serum creatinine levels remain below at or below 1.5 for at least 24 months can be considered for coverage if benign in nature.





Major Depression

1. When were you diagnosed?
2. Any inpatient treatment? If yes, when, and how many times?
3. Any changes to your medication in the past 6 months?
4. Do you feel your depression could be better controlled?
5. Does your depression make it difficult to function at home or at work?

Information from the Underwriting Guide:

- < 70 years of age, diagnosed or started treatment within the last 6 months – Decline
- Psychiatric Hospitalizations in the past 3 years – Decline
- > 70 years of age, diagnosed or started treatment within the last 2 years – Decline
- Any suicide attempt or suicidal ideation, 5 years ago – Decline



Good to Know: Verify if your client's medications are listed in the Underwriting Guide as uninsurable. Ask your client about any activities they enjoy, as well as social networks they may be part of. Active applicants (both physically and socially) tend to do very well with their major depression and represent a good risk when stable.

Alcohol Abuse

1. How much alcohol do you drink in a day? Is it more than 3 daily, or 5 or more in a day?
2. Have you ever been advised to stop or cut down your alcohol use? If yes, when?
3. If you have stopped alcohol due to a history of abuse or concerns, have you maintained at least 3 years of sobriety?
4. Do you actively participate in a support group?
5. Do you have a history of drunk driving? If so, how many times and when was the most recent one?

Information from the Underwriting Guide:

- Alcohol regular consumption of 4 or more drinks per day – Decline
- Advised by a physician to limit or stop alcohol consumption due to alcohol induced health – Decline
- Social problems – Decline
- DUI/DWI within the past 3 years – Decline
- Binge drinking, 5 or more drinks in a day on 1 or more days per week – Decline
- Alcohol abuse/Alcoholism, less than 3 years of sobriety – Decline



Good to Know: Get an accurate assessment of your client's daily use of alcohol. Besides daily use, ask your client about episodes of binge (5 or more drinks in one sitting) drinking. If there is a history of alcohol abuse, current use of alcohol would not be accepted.

Anxiety

1. What is your age?
2. What date were you diagnosed?
3. Have you had any inpatient treatment? If yes, when, and how many times?
4. Have you had any changes to your therapy in the past 6 months?
5. Do you feel your anxiety could be better controlled?
6. Does your anxiety make it difficult to function at home or work?
7. Are you being treated by a Primary Care Physician (PCP) or psychiatric specialist?

Information from the Underwriting Guide:

- < 70 years of age, diagnosed or started treatment within the last 6 months - Decline
- Psychiatric hospitalizations in the past 3 years - Decline
- > 70 years of age, diagnosed or started treatment within the last 2 years - Decline
- Any suicide attempt in the past five years, multiple suicide attempts (regardless of time passed), or suicidal ideation within the past two years - Decline



Good to Know: Verify if your client's medications are listed in the Underwriting Guide as uninsurable. Ask your client if they have experienced any recent panic attacks, cardiac manifestations or other symptoms of anxiety.

Abnormal Brain Scan

1. What condition/symptoms led to the brain MRI being performed?
2. What were the specific findings/impression of the MRI?
3. Was there any mention of an infarct, tumor, cyst arteriovenous malformation, white matter changes microvascular ischemic changes atrophy or volume loss? If possible, provide a copy of the results.
4. Is there any further follow up or treatment advised?

Information from the Underwriting Guide:

Decline if imaging notes make reference to:

- Cerebrovascular Disease
- Two or more lacunar infarcts/strokes
- Small vessel disease (any age)
- Brain atrophy
- Volume loss



Good to Know: If your client has a has any imaging of the brain (CT, MRI) we would be happy to review a redacted copy of the test result to determine insurability. Some findings, such as a meningioma or cyst could represent an insurable risk, if stable.



Why Mutual of Omaha

Over 50 years of Mutual of Omaha's Wild Kingdom taught us that the animal kingdom and the human kingdom have something in common ... an instinct to protect what matters most. Through insurance and financial products, we help people protect their lives, protect their families, protect their kingdoms.

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