HOSPITAL INDEMNITY

# Hospital Protection℠ Plan Product and Underwriting Guide

Mutual of Omaha

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# Product Information

This guide is a resource for agents who are contracted and appointed to sell hospital indemnity coverage with Mutual of Omaha.

Our hospital indemnity policy, Mutual of Omaha's Hospital Protection$^{SM}$ plan, pays benefits when your clients are hospitalized for a covered illness or injury.

## Product Overview

A Hospital Protection plan policy is guaranteed renewable. Individuals can apply for coverage between the ages of 18-85, and we offer **guaranteed issue for ages 64-74**.

Premiums are unisex and are based on issue ages. Individuals may qualify for a 7% discount.

### Household Discount

The following household discount is available for most states.

7% Household Discount — Standard Two-Person Policy (Two Policy) Language

An applicant is eligible for a household premium discount if for the past year they have resided with at least one, but no more than three adults who owns or are issued a Hospital Confinement Indemnity policy underwritten by Mutual of Omaha. If they live with another adult who is their legal spouse, we will waive the one-year requirement. For the purposes of this discount, a civil union partner or domestic partner will be considered a legal spouse when such partnerships are valid and recognized in their state of residence. Mutual of Omaha may request additional documentation to determine eligibility.

The applicant's premium will be reduced by the percentage shown on the Policy Schedule.

The applicant's policy's household premium discount will be removed if the other adult policyholder chooses to terminate his or her Hospital Confinement Indemnity policy or he or she no longer resides with the applicant (other than in the case of his or her death).

An applicant may be eligible for the household discount based on answering yes to both of the following statements:

- Has a member of the applicant's household resided continuously with them for the last 12 months.
- Has a member of the applicant's household resided with them and to whom they are either married or in a civil union partnership: either have an existing Hospital Indemnity policy with or applying for coverage with Mutual of Omaha Insurance Company.

### Key Definitions

| | |
|---|---|
| **Daily Benefit** | The amount the policy pays for each day of hospital confinement |
| **Hospital Confinement** | An inpatient at a hospital for at least 24 hours because of a covered injury or sickness |
| **Lump Sum** | A single one-time payment the policy or rider pays to the policyholder, once specific criteria is met |
| **Mental or Nervous Disorder** | Neurosis, psychoneurosis, psychosis or a mental or emotional disease or disorder of any kind |
| **Observation Stay** | Starts at six hours of observation. After 24 hours it's considered hospital confinement |
| **Period of Confinement** | Begins when the insured has been hospital confined and ends when there has been no additional hospital confinement for 60 consecutive days |

**Note:** These definitions have been simplified for clarity. For the full, detailed definitions, please refer to the policy.

| | Mutual Hospital Indemnity Plan | |
|---|---|---|
| **Target Market** | Designed for Medicare age clients looking to supplement high-deductible Medicare supplement plans or Medicare Advantage plans | |
| **Waiting Period**<br>Benefits start as soon as coverage is issued | No waiting period* | |
| **Benefit Options**<br>Base benefits are paid for hospital confinement, observation stays, mental health and more | Daily benefit amounts range from $100 to $1,000 (in $10 increments)<br>Day options:<br>3-10, 15, 20, 31 | Lump-sum benefit amounts pay $100 to $3,000 (in $50 increments) |
| **Issue Ages** | Ages 18-85<br>**Guaranteed issue for ages 64 to 74** | |
| **Premium Structure**<br>Rates are based on application date, not effective date | Issue age<br>Unisex rates<br>Rates do not vary by tobacco/nontobacco | |
| **Discounts** | Up to 7% household discount | |
| **Underwriting** | Medical and pharmacy underwriting requirements apply to individuals between the ages of 18 and 63, as well as those aged 75 and older, to ensure coverage eligibility. | |
| **Base Plan Benefits (Built-In)**<br>A benefit period begins when the client is confined to a hospital for at least 24 hours<br><br>**Note:** Benefits may vary by state | **Observation Stay:**<br>100% of the daily hospital for the lesser of five days, or the base hospital day option selected<br>**Mental Health:** $175/day, up to seven days per calendar year<br>**Pet Boarding:** $75/day, up to 14 days per calendar year | |
| **Optional Benefit Riders (Additional Costs)**<br>Clients can expand their protection by purchasing additional riders<br><br>**Note:** Riders may vary by state | Skilled nursing facility<br>Home health care<br>Lump sum cancer<br>Outpatient surgery<br>Ambulance and emergency or urgent care | Guaranteed purchase option<br>Outpatient therapy<br>Major diagnostic testing<br>Prescription drug |
| **Policy Fee** | None | |

*Pre-Existing Condition Limitation - We will not pay benefits for loss resulting from a pre-existing condition, unless such loss occurs 6 months or more after the policy date.

A pre-existing condition is a condition for which medical advice, diagnosis, care, or treatment was recommended by or received from a physician within 6 months prior to the policy date.

Note: Product and/or benefits vary by state. See state differences grid.

## Built-In Benefits

### Hospital Confinement: Daily or Lump Sum

- Daily benefit amounts range from $100 to $1,000 in $10 increments.
  - Day options: 3-10, 15, 20, 31
- Lump-sum benefit amounts pay $100 to $3,000 in $50 increments.
- The policyholder can receive benefits for the full number of days they select for each period of confinement.
- One period of confinement starts when the policyholder becomes confined to a hospital, and ends when there has been no additional hospital confinement for 60 consecutive days. This is regardless of whether or not they've maxed out the full number of benefit days they selected.
- Confined means inpatient at a hospital for at least 24 hours.
- The plan will either pay benefits for hospital confinement or observation stay.

### Observation Stay

- Observation stay starts at six hours; after 24 hours it's a hospital confinement.
- This pays 100% of the daily hospital benefit, up to five days per calendar year.
- There is no period of confinement like there is for the daily hospital confinement benefit.
- This doesn't stack with the daily hospital confinement benefit.

### Mental Health

- Mental health coverage is automatically included in the policy as follows:
  - $175 a day
  - Seven days per calendar year

### Pet Boarding

- Covers up to 14 days per calendar year for boarding at $75 a day
- Must use a licensed establishment and provide a receipt to receive reimbursement

### Exclusions and Limitations for Base Benefits

We will not pay benefits for:

(a) loss that begins while this policy is not in force;

(b) loss resulting from services or treatment which is not medically necessary;

(c) loss resulting from an act of declared or undeclared war;

(d) loss sustained while serving in the armed forces (upon notice to us of entry into the armed forces, the unearned portion of the premium will be refunded);

(e) loss resulting from cosmetic surgery or nonsurgical treatment, or experimental or investigational treatment;

(f) loss caused by intentionally self-inflicted injury while sane or insane;

(g) loss resulting from drug abuse, alcoholism, or chemical dependency; or

(h) normal childbirth, normal pregnancy, or voluntarily induced abortion. Complications of pregnancy are payable on the same basis as any other sickness.

## Optional Benefits

For an additional cost, policyholders can expand their hospital protection coverage by electing to add optional riders to their coverage. **Riders must be selected at time of application and cannot be purchased after the policy is issued.** Benefits are paid in addition to Medicare or any other coverage your client has.

### Ambulance and Emergency/Urgent Care Rider

When the unexpected happens, the last thing anyone wants to worry about is finding a ride to the hospital. The ambulance and emergency room or urgent care rider can give your clients additional peace of mind that they're taken care of.

- Clients can select benefit amounts between $100-$500 in increments of $100.
- Each benefit — ambulance, ER and urgent care — is payable four times per calendar year.
- Urgent care is paid out 50% of the chosen benefit amount.
- Air ambulance is paid out 10 times the chosen benefit amount.

### Skilled Nursing Facility Rider

Our skilled nursing facility rider offers an added measure of financial protection if your clients need skilled nursing care, intermediate care or custodial care in a skilled nursing facility.

How it works:

- A covered hospital stay of at least two days is required to qualify for benefits.
- Care in a skilled nursing facility must begin within 30 days of hospital discharge.
- Benefit period ends with 60 consecutive days of not being confined in a hospital or skilled nursing facility; the daily benefit resets after this time.
- Clients can choose which days — and how many days — to cover per confinement, with three options available:
  - Coverage for confinement days 1-20
  - Coverage for confinement days 21-100
  - Coverage for confinement days 1-100

### Outpatient Surgery Rider

This rider provides an additional benefit to help cover the cost of surgery received in an ambulatory surgical center or outpatient hospital facility. Expenses resulting from a surgical procedure can be overwhelming and create a financial burden. This rider pays a lump-sum benefit to help offset expenses and protect your clients financially.

How it works:

- Clients can choose from benefit amounts of $250, $500, $750 or $1,000.
- There's no waiting period — coverage starts when the policy is issued.
- Requires documentation from hospital or surgical center to pay benefits.
- Benefits are paid for a maximum of two outpatient surgeries per calendar year, with no benefit reset period.
- One payment per day even if there is more than one surgery in a single day.

### Lump Sum Cancer Rider

Our rider pays lump-sum benefits to help offset expenses and protect your clients financially. Clients can choose from six benefit amounts: $2,500, $5,000, $10,000, $15,000, $20,000 and $25,000.

- Plus, the rider pays a second lump-sum benefit of $600 for skin cancer, regardless of the benefit amount selected.
- Rider includes a 30-day waiting period.
- Coverage only pays for first-ever cancer diagnosis.
- This rider does require additional questions on application and underwriting review prior to the rider being issued.

*Note: The lump sum cancer rider will terminate once the benefit is used.*

## Guaranteed Purchase Option Rider

With the guaranteed purchase option rider, your clients have the option to increase their daily benefit amount by 15%.

This rider can be used up to five separate times over the life of the policy or age 85, whichever comes first. The additional base benefit premium will be based on the original issue age of the policy. No additional underwriting is required.

Clients should notify Mutual of Omaha to activate the rider. Premiums for this rider will continue to be collected until it's canceled, at which point the policy reverts to the original premium and benefit payout.

Client may elect this option, without providing evidence of insurability, subject to the following terms and conditions.

- The policy must be in force on the policy renewal date the guaranteed purchase option is offered.
- The additional premium for the increase to the hospital confinement daily benefit will be based on the client's issue age as of the policy date and the premium rate schedule currently in effect for the increased daily benefit amount.
- The total increase to the original hospital confinement daily benefit can't exceed 75%.
- Premium for this rider will continue for as long as the client's policy with this rider remains in force, without regard to reaching the lifetime guarantee purchase option of five increases prior to their 85th birthday.
- If your clients cancel this rider, the hospital confinement daily benefit will return to the original hospital confinement daily benefit amount, as shown on the policy schedule. The premium will be adjusted accordingly.
- This rider terminates on the earliest of:
  (a) The date the policy terminates, or
  (b) The date we receive the client's written or verbal request to cancel this rider

## Outpatient Therapy Rider

When your clients add the outpatient therapy rider to their Mutual of Omaha Hospital Protection plan, they'll get benefits to help pay for occupational, physical or speech therapy sessions. The benefit is paid for therapies in an outpatient setting, whether or not the health issue triggered a hospital stay.

Clients can choose from the following benefit amounts $50 to $250 in $10 increments per occupational, physical or speech therapy session.

- Your clients can select coverage between 15 or 30 days per calendar year.
- A chiropractic benefit of five days per calendar year is automatically included.
- Benefit is only paid once per day; no more than one benefit will be paid per day, even if multiple therapy sessions occur.
- Benefit is only paid for therapy sessions in an outpatient setting.
- There's no reset period and no hospital stay required.

## Major Diagnostic Testing Rider

The major diagnostic test rider provides a benefit to help pay the cost for major diagnostic testing, which can be substantial.

- Clients choose from a range of benefit amounts from $100 to $500 in increments of $100.
- There's no waiting period. Coverage starts when the rider is issued.
- Benefits are paid for a maximum of two diagnostic tests per calendar year and there's no benefit reset period.
- Insured can receive both tests on the same day.
- Documentation from the hospital or medical provider is required for the benefit to pay.
- Diagnostic tests include: Computerized Tomography (CT); Magnetic Resonance Imaging (MRI); Positron Emission Tomography (PET) scan; Angiogram; Computerized Tomography Angiogram Scan; Electroencephalogram (EEG); and Electrocardiogram (EKG)

## Home Health Care Rider

The home health care rider provides a daily benefit to help cover the care and assistance your clients may need to recuperate at home. After an inpatient hospital stay — or care in a skilled nursing facility — clients who return home may need help bathing, dressing, eating and other activities of daily living (ADLs).

- Home health care means care received in your home and provided by a home care agency.
- To receive benefits, two days of a covered hospital stay or skilled nursing facility confinement is required and the client must have a cognitive impairment or inability to perform two of six ADLs (bathing, dressing, toileting, eating, transferring or continence). The client's condition must be certified by a licensed health care practitioner.
- Home health care must begin within 30 days of hospital or skilled nursing facility confinement.
- Your client will need to elect a daily benefit amount from $50 to $250 in $10 increments.
- Your clients can collect benefits for up to 30 home health care visits per calendar year.

## Prescription Drug Rider

To further protect their finances from the cost of medications, your clients can add a prescription drug rider.

- This rider reimburses $15 for generic and $30 for brand-name prescriptions. Clients can select either a $250 or $500 maximum benefit per calendar year.
- Reimbursement is available until the annual calendar-year maximum benefit amount is reached.

How it works:

- The client submits pharmacy receipts and we reimburse them directly.
- An acceptable proof of purchase includes pharmacy receipts or other documentation, such as explanation of benefits from a Medicare Part D plan.
- Benefits can supplement stand-alone Medicare Part D, but the rider isn't connected to a prescription drug plan and shouldn't be marketed as a prescription drug plan replacement.

## Value Adds (Not Available In All States)

- EyeMed — discounts on eye exams, eyeglasses and contact lenses
- Amplifon — discounts on hearing tests and other valuable services
- Garmin — exclusive access to discounted smartwatches and fitness trackers
- Aloe Care Health — discounts on advanced voice-activated, in-home medical alert and communication systems for older adults
- ScriptSave® WellRx — savings on prescriptions, medication management tools and grocery guidance

# Hospital Indemnity Plan

## STATE DIFFERENCES

| STATE | RELEASE DATE | STATE SPECIAL DIFFERENCES AFFECTING BENEFITS, UNDERWRITING AND PREMIUMS |
|---|---|---|
| **AL** | 8/15/25 | Standard policy benefits and riders |
| **AK** | 3/13/26 | Standard policy benefits and riders |
| **AR** | 8/15/25 | Standard policy benefits and riders |
| **AZ** | 8/15/25 | Standard policy benefits and riders |
| **CA** | Pending | |
| **CO** | 3/13/26 | Standard policy benefits and riders |
| **CT** | 9/26/25 | Standard policy benefits and some riders<br>Rider Change:<br>• Ambulance and Emergency/Urgent Care Rider does **NOT** include Urgent Care<br>Riders **NOT** Available:<br>• Outpatient Survey Rider<br>• Lump Sum Cancer Rider<br>• Outpatient Therapy Rider<br>• Major Diagnostic Testing Rider<br>• Home Health Care Rider<br>• Prescription Drug Rider |
| **DE** | 9/26/25 | Standard policy benefits and riders<br>• Guaranteed Issue period not available |
| **DC** | 5/8/26 | Standard policy benefits and riders |
| **FL** | 8/15/25 | Standard policy benefits and riders<br>• Daily benefit is $15 for the remainder of the 31-day maximum confinement period |
| **GA** | 8/15/25 | Standard policy benefits and riders |
| **HI** | 3/13/26 | Standard policy benefits and riders |
| **IA** | 3/13/26 | Standard policy benefits and riders |
| **ID** | Pending | |
| **IL** | 8/15/25 | Standard policy benefits and most riders<br>Riders **NOT** Available:<br>• Prescription Drug Rider |
| **IN** | 3/13/26 | Standard policy benefits and riders |
| **KS** | 5/8/26 | Standard policy benefits and some riders<br>• Daily benefit is $50 for the remainder of the 31-day maximum confinement period<br>• Pre-existing Condition Limitation Change: We will not pay benefits for loss resulting from a pre-existing condition, unless such loss occurs 6 months after the policy date.<br>Rider Change:<br>• Ambulance and Emergency/Urgent Care Rider does **NOT** include Urgent Care<br>Riders **NOT** Available:<br>• Outpatient Surgery Rider<br>• Lump Sum Cancer Rider<br>• Outpatient Therapy Rider<br>• Major Diagnostic Testing Rider<br>• Home Health Care Rider<br>• Prescription Drug Rider<br>• Skilled Nursing Facility Rider |

| | | |
|---|---|---|
| **KY** | 8/15/25 | Standard policy benefits and riders |
| **LA** | 8/15/25 | Standard policy benefits and riders<br>• Household Discount Special:<br>You are eligible for a household premium discount if for the past year you have resided with at least one, but no more than three adults who owns or are issued a Hospital Confinement Indemnity policy underwritten by us. If you live with another adult who is your legal spouse, we will waive the one-year requirement. We may request additional documentation to determine eligibility.<br>Your premium will be reduced by the percentage shown on the Policy Schedule.<br>Your policy's household premium discount will be removed if the other adult policyholder chooses to terminate his or her Hospital Confinement Indemnity policy or he or she no longer resides with you (other than in the case of his or her death). |
| **MA** | Pending | |
| **MD** | Pending | |
| **ME** | 9/26/25 | Standard policy benefits and riders |
| **MI** | 8/15/25 | Standard policy benefits and riders |
| **MN** | Pending | |
| **MO** | 8/15/25 | Standard policy benefits and riders<br>• Household Discount Special:<br>You are eligible for a household premium discount if at the time of application, you reside with your spouse or domestic partner, and they own or are issued a Hospital Confinement Indemnity policy underwritten by us.<br>Your premium will be reduced by the percentage shown on the Policy Schedule.<br>Your policy's household premium discount will be removed if the other adult policyholder chooses to terminate his or her Hospital Confinement Indemnity policy or he or she no longer resides with you (other than in the case of his or her death). |
| **MS** | 8/15/25 | Standard policy benefits and riders |
| **MT** | Pending | |
| **NC** | 8/15/25 | Standard policy benefits and riders<br>• No pre-existing for 65 and older |
| **ND** | 3/13/26 | Most standard policy benefits and riders<br>• Pet Boarding benefit not available<br>Rider Change:<br>• Prescription Drug Benefit Rider: Only prescription benefit of $15 allowed |
| **NE** | 9/26/25 | Standard policy benefits and riders |
| **NH** | 3/13/26 | Standard policy benefits and riders<br>• Daily benefit is $50 for the remainder of the 31-day maximum confinement period<br>• Household Discount Special:<br>You are eligible for a household premium discount if for the past year you have resided with at least one, but no more than three adults who owns or are issued a Hospital Confinement Indemnity policy underwritten by us. If you live with another adult who is your legal spouse, we will waive the one-year requirement. For the purposes of this discount, a domestic partner will be considered a legal spouse when such partnerships are valid and recognized in your state of residence. We may request additional documentation to determine eligibility.<br>Your premium will be reduced by the percentage shown on the Policy Schedule.<br>Your policy's household premium discount will be removed if the other adult policyholder chooses to terminate his or her Hospital Confinement Indemnity policy or he or she no longer resides with you (other than in the case of his or her death). |

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|---|---|---|
| **NJ** | 5/8/26 | Policy benefits<br>• 31 days only<br>• Daily benefit amount range of $40-$250, (in $10 increments)<br>• No Lump Sum option<br>• No Mental/Nervous benefit<br>• No Pet Boarding benefit<br>**NO** Riders are available in this state |
| **NM** | — | Product Not Available |
| **NV** | 9/26/25 | Standard policy benefits and riders |
| **NY** | Pending | |
| **OH** | 9/26/25 | Standard policy benefits and riders<br>• Household Discount Special:<br>You are eligible for a household premium discount if for the past year you have resided with at least one, but no more than three adults who owns or are issued a Hospital Confinement Indemnity policy underwritten by us. If you live with another adult who is your legal spouse, we will waive the one-year requirement. For the purposes of this discount, a civil union partner or domestic partner will be considered a legal spouse when such partnerships are valid and recognized in your state of residence. We may request additional documentation to determine eligibility.<br>Your premium will be reduced by the percentage shown on the Policy Schedule.<br>Your policy's household premium discount will be removed if the other adult policyholder chooses to terminate his or her Hospital Confinement Indemnity policy or he or she no longer resides with you. |
| **OK** | 8/15/25 | Standard policy benefits and riders |
| **OR** | 5/8/26 | Standard policy benefits and riders<br>• Household Discount Special:<br>You are eligible for a household premium discount if for the past year you have resided with at least one, but no more than three adults who owns or are issued a Hospital Confinement Indemnity policy underwritten by us. If you live with another adult who is your legal spouse, we will waive the one-year requirement. For the purposes of this discount, a civil union partner or domestic partner will be considered a legal spouse when such partnerships are valid and recognized in your state of residence.<br>Your premium will be reduced by the percentage shown on the Policy Schedule.<br>Your policy's household premium discount will be removed if the other adult policyholder chooses to terminate his or her Hospital Confinement Indemnity policy or he or she no longer resides with you (other than in the case of his or her death). |
| **PA** | 09/26/25 | Most standard policy benefits and riders available<br>• Daily benefit is $15 for the remainder of the 31-day maximum confinement period<br>• Pet Boarding benefit not available<br>• Household Discount Special:<br>You are eligible for a household premium discount if you live with your legal spouse who owns or are issued a Hospital Confinement Indemnity policy underwritten by us. For the purposes of this discount, a civil union partner or domestic partner will be considered a legal spouse when such partnerships are valid and recognized in your state of residence. We may request additional documentation to determine eligibility.<br>Your premium will be reduced by the percentage shown on the Policy Schedule.<br>Your policy's household premium discount will be removed if your spouse as a policyholder chooses to terminate his or her Hospital Confinement Indemnity policy or he or she no longer resides with you (other than in the case of his or her death).<br>Rider Change:<br>• Lump Sum Cancer Rider does not have first diagnosis limitation |
| **PR** | — | Product Not Available |
| **RI** | 3/13/25 | Standard policy benefits and riders |
| **SC** | 9/26/25 | Standard policy benefits and riders |

| | | |
|---|---|---|
| **SD** | 3/13/26 | Standard policy benefits and riders |
| **TN** | 8/15/25 | Standard policy benefits and riders |
| **TX** | 8/15/25 | Standard policy benefits and riders<br>• Daily benefit is $15 for the remainder of the 31-day maximum confinement period<br>• Household Discount Special:<br>You are eligible for a household premium discount if for the past year you have resided with at least one, but no more than three adults who owns or are issued a Hospital Confinement Indemnity policy underwritten by us. If you live with another adult who is your legal spouse, we will waive the one-year requirement. For the purposes of this discount, a domestic partner will be considered a legal spouse when such partnerships are valid and recognized in your state of residence. We may request additional documentation to determine eligibility.<br>Your premium will be reduced by the percentage shown on the Policy Schedule.<br>Your policy's household premium discount will be removed if the other adult policyholder chooses to terminate his or her Hospital Confinement Indemnity policy or he or she no longer resides with you (other than in the case of his or her death). |
| **UT** | 3/13/26 | Standard policy benefits and riders<br>• Guaranteed Issue period not available<br>Rider Change:<br>• Skilled Nursing Facility Rider does not have an option for confinement days 21-100 not available |
| **VA** | 3/13/26 | Standard policy benefits and most riders<br>• Household Discount Special:<br>You are eligible for a household premium discount if for the past year you have resided with at least one, but no more than three adults who owns or are issued a Hospital Confinement Indemnity policy underwritten by us. If you live with another adult who is your legal spouse, we will waive the one-year requirement. We may request additional documentation to determine eligibility.<br>Your premium will be reduced by the percentage shown on the Policy Schedule.<br>Your policy's household premium discount will be removed if the other adult policyholder chooses to terminate his or her Hospital Confinement Indemnity policy or he or she no longer resides with you (other than in the case of his or her death).<br>Rider **NOT** Available:<br>• Lump Sum Cancer Rider |
| **VI** | — | Product Not Available |
| **VT** | 3/13/26 | Standard policy benefits and riders |
| **WA** | Pending | |
| **WI** | 8/15/25 | Standard policy benefits and riders |
| **WV** | 8/15/25 | Standard policy benefits and riders |
| **WY** | 9/26/25 | Standard policy benefits and riders |

# Underwriting

## Guaranteed Issue (GI) Eligibility

Applicants **ages 64 through 74** are eligible for **Guaranteed Issue** coverage. During a GI period, health questions are not required, and coverage is issued regardless of health history.

Outside of the Guaranteed Issue period, or for applicants outside ages 64–74, all health questions must be answered and eligibility is subject to underwriting review.

## General Underwriting Philosophy (Non GI Applications)

Applications are generally declined when our information indicates

- A high risk for near-term hospitalization
- Hospitalization or home health care within defined lookback periods

Eligibility is based on medical, and when applicable, pharmaceutical history. This guide highlights commonly declinable conditions but is **not all-inclusive**.

## Automatically Declinable Conditions (Regardless of Timing Unless Otherwise Noted)

An application will be declined if medical or prescription history shows any treatment ever for:

- AIDS, ARC, or HIV

## Declinable Conditions – Past 2 Years

The following conditions are declinable if diagnosed, treated, or active within the past 2 years:

- Alcohol or drug abuse
- Alzheimer's disease, dementia, or Parkinson's disease
- Chronic bronchitis, COPD, emphysema, or other chronic respiratory disease
- Chronic kidney disease, cirrhosis, or hepatitis
- Heart attack, heart surgery, stroke, or TIA
- Internal cancers, malignant melanoma, leukemia, or Hodgkin's disease
- ALS, multiple sclerosis (MS), lupus, or myasthenia gravis

**Producer Tip:** A condition that occurred more than 2 years ago, with no ongoing treatment or complications, may not automatically result in a decline. Final eligibility is determined by underwriting review.

## Additional Medical Criteria with Specific Timing Rules

The following items have unique timing or evaluation criteria and are handled differently than the standard 2 year lookback:

**Diabetes**

- Decline if the most recent A1C result is 7.0% or higher
- Only the most recent A1C test is considered

**Hospitalizations & Home Health Care**

- Decline if the applicant received home health care or was hospitalized for any condition within the past 12 months

**Important clarification:** A hospitalization more than 12 months ago does not automatically result in a decline, provided no other declinable conditions are present.

## Key Takeaways for Sales Partners

- **Guaranteed Issue applies only to ages 64–74**
- Outside GI, all health questions must be answered
- Most declinable conditions are evaluated using a 2 year lookback
- Hospitalizations and home health care use a 1 year lookback
- AIDS/HIV is declinable at any time
- Diabetes is evaluated using the most recent A1C only

This list is **not all inclusive**; underwriting may request additional review.

# Completing the Application

### E-App Only

Select the **e-App** link on the home page or the **Sales & Marketing** tab.

No paper applications or wet signature is available at this time.

### Mobile Quote App

Quote a hospital protection plan rate by downloading the mobile quote app on your smartphone or tablet. Search **Quotes for Sales Professionals** in the Apple Store or Google Play.

Quickly run quotes for your clients with our easy-to-use mobile app — it allows you to customize the product view for the products you sell.

### Quote Features and Highlights

- Three ways to provide customized quotes:
    - Single quote
    - Single quote with household discount
    - Two quotes with household discount

### Requirements

- Smartphone or tablet
- Smartphones or Android (4.0 and higher) and iOS (6.0 and higher) platforms
- Continuous internet access

# Administrative Handling

### Policy Delivery

Delivery receipts are required on all policies issued in Louisiana, South Dakota and West Virginia.

Two copies of the delivery receipt will be included in the policy package. One copy is to be left with the client. The second copy must be returned to Mutual of Omaha in the postage paid envelope included in the policy package.

In Kentucky, the policy is allowed to be mailed directly to the insured. If this option is elected, the delivery receipt doesn't need to be included in the policy package. If the policy isn't mailed directly to the insured, a delivery receipt will need to be included in the policy package.

### Post-Issue Policy Corrections

Any required policy change should be corrected on the policy and initialed by the policyholder prior to submitting the change request to underwriting. Common examples of post-issue changes would be submitting a request to change the policyholder's name or date of birth. Riders and benefit amounts cannot be added or changed post-issue.

# Sales and Marketing

## Sales Professional Access

Sales Professional Access (SPA) is the Mutual of Omaha producer portal that provides tools and reports for your use. Content on the website includes product details for our entire portfolio, sales and marketing information, electronic applications; and reports — including, but not limited to, compensation, policy management tools and more.

You'll also find training and compliance information to help protect your business. Use SPA to learn about our Hospital Protection plan and other products available at Mutual of Omaha.

**Brokerage:** Log in or register at mutualofomaha.com/broker

**Advisor:** Log in or register at mutualofomaha.com/agent

For step-by-step instructions on how to get started using SPA, check out the Senior Health SPA Guide in Forms & Materials.

## General Contact Information for All Products

| Area | Phone Number | Email | |
|---|---|---|---|
| Compensation Support | 800-475-4465 | Career Advisors<br>agent.compensation@mutualofomaha.com | Brokers<br>broker.compensation@mutualofomaha.com |
| Contracts, Licensing and Producer Services | 800-867-6873 | contractsandappointments@mutualofomaha.com | |
| Sales Support | 800-693-6083 | sales.support@mutualofomaha.com | |
| Tech Support | Career Advisors<br>800-228-7669<br>Brokers<br>800-847-9785 | producertechsupport@mutualofomaha.com | |

## Hospital Indemnity

| Area | Phone Number | Email |
|---|---|---|
| Underwriting | 833-367-5097 | |
| Policyholder Claims<br>Fax 402-997-1869<br>Claim Forms<br>mutualofomaha.com/customer-service | 833-367-5092 | SHS.HIP.Claims@mutualofomaha.com |

# Claim Filing Instructions

1. Identify your policy when submitting.
2. Provide first and last name, date-of-birth, address, phone number, policy number and current email. If additional information is needed, we'll notify you.

Please obtain the following supporting documents for the corresponding benefit:

- UB04 hospital billing forms for hospital/facility services

For these forms, you'll need to contact the hospital's billing department. These forms will include revenue codes, procedure codes and diagnosis codes.

**Note:** Admission and discharge summaries, which show the dates of service and reason for the inpatient stay, can be substituted for the UB04.

To submit over the phone, call 833-367-5092. Please have dates of service and provider information available.
To submit online, email SHS.HIP.Claims@mutualofomaha.com.

**For more information on benefits, costs, limitations and exclusions, please go to mutualofomaha.com/sales-professional.**

Mutual of Omaha