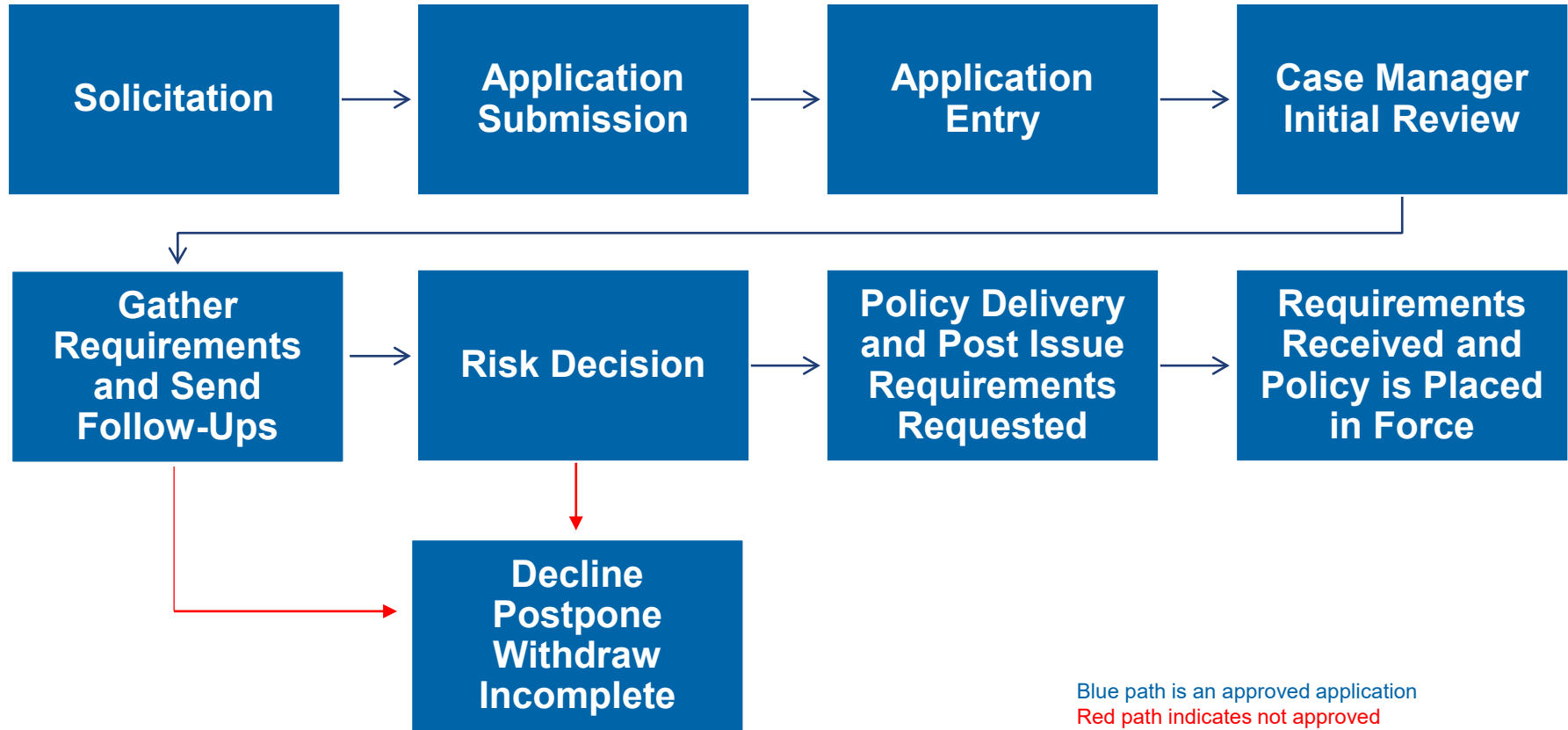


LTC New Business

The Life of a LTCi Application

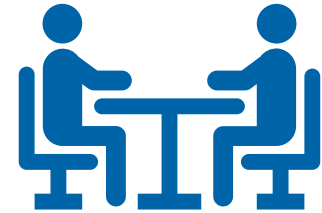
Monica Sharp, New Business Manager

LTC Process Overview



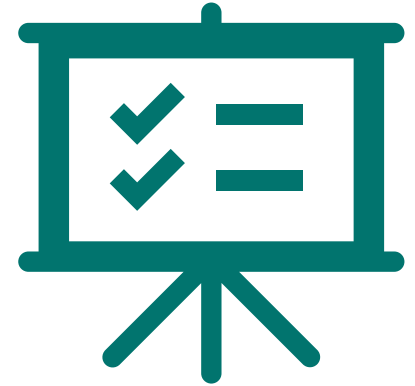
Step 1 – Application Solicitation

- Complete the application questions
- Sign the application
- List Application Designated Contact



Step 2 – Application Submission

- Check with your marketer for submission process
- Ensure that the application is submitted no later than 30 days from client signature
- E-App
 - Ensure not in “Sandbox”
 - Ensure status is “Submitted”
- Paper Application
 - Ensure the Producer Statement is complete
 - **Make sure commission code (aka BOB code) is complete and accurate**



Step 3 – Application Entry and Initial Review



- The application is received at our office, imaged, entered, and transmitted to the Case Management team within 3 business days
 - Requirements are ordered based on information from the application
- The Case Manager reviews the application for accuracy and completeness
 - Agent appointment and licensing is verified to ensure the validity of the application
 - Welcome email is sent to designated contact on application
 - The ordered requirements are reviewed for accuracy and additional requirements may be ordered based on results of the review

MIB	Pharmaceutical Check	Medical Records	Personal Health Interview	Cognitive Assessment
All applicants	All applicants	Mandatory <ul style="list-style-type: none">▪ Ages 60-79 UW Discretion <ul style="list-style-type: none">▪ Ages 59 and below	Telephone <ul style="list-style-type: none">▪ Ages 30-64 Face-to-Face <ul style="list-style-type: none">▪ Ages 65-79▪ Younger ages at underwriter discretion	Included with telephone and face-to-face interview <ul style="list-style-type: none">▪ Age 60-79▪ Younger ages if history requires cognitive assessment

Step 4 – Requirement Gathering and Risk Assessment

- The Case Manager reviews the case and provides a status update every 10 business days
 - Please see the next slide for more detail on the 10-day status updates
- When all requirements are received, the Underwriter evaluates the risk
 - If age 65 and over, face-to-face assessment is scheduled **after** medical records are reviewed
 - Additional requirements may be ordered based on risk evaluation
- All requirements are received (including additional) - Risk Decision
 - Issue (please see steps 5, 6, and 7 for issued cases)
 - Decline
 - Postpone
 - Withdraw/Incomplete



Step 4a– Requirement Gathering Follow-Ups

- Key follow-up dates for a pending policy:
 - Day 1 (w/ case management)- Initial Review is completed and the welcome email is sent
 - Day 10/20- The case is reviewed*
 - Day 30- The case is reviewed* and if the interview is not completed, we advise it must be completed within 2 weeks or the file will be withdrawn
 - Day 40/50- The case is reviewed*
 - Day 60 - The case is reviewed* and UW input may be requested based on review
 - Day 70- The case is reviewed* and emphasis is placed on withdrawal date (90 days)
 - Day 80- The case is reviewed* and continued emphasis on withdrawal date
 - Day 90- The case is withdrawn as incomplete and withdrawal email is sent
 - If requirements come in after withdrawal, the UW will review and advise next steps (new app is probably needed, but UW will advise)



*when the case is reviewed, the CM will review each outstanding requirement and any notes left on the file. Based on their review they may need to reach out to a vendor or to an internal partner to get information that will aid in gathering requirements in the most efficient way. **After all that information is gathered, the CM will send a status email to the designated contact.**

Step 4b– Requirement Gathering Follow-Ups

- Medical Records (APS) ordered

- The APS vendor, ReleasePoint (RP), follows a specified cadence in which they follow up with the medical facility/copy service to retrieve the records
- These follow-ups are independent from the Case Manager's 10 day follow up. That means RP is working behind the scenes and touching the case much more frequently than 10 days.

- Phone (PHI) or Face-to-Face (F2F) interview ordered

- The PHI/F2F vendor, illumifin, follows a specified cadence in which they follow up with the client to schedule and complete the interview
- These follow-ups are independent from the Case Manager's 10 day follow up. That means illumifin is working behind the scenes and touching the case much more frequently than 10 days.

- Final Requirement

- When the last underwriting requirement is received, a task is automatically triggered and sent to the Underwriter(UW) for review
- This task is independent from the Case Manager's 10 day follow up.
- *If policy is being offered "Other Than Applied" (OTA), the underwriter will send an email before the case is issued to explain the offer.*



Step 5– Policy Delivery and Post Issue Requirements

- Case Manager sends the issue email to the Designated Contact and the Kit is printed and mailed/e-mailed
 - The policy is mailed/e-mailed based on the Marketer’s “Opt-In” selection
 - Policy must be delivered to the client within 30 calendar days from date of issue
 - Policy may contain post issue requirements(PIR) that are due 60 days after date of issue
- Types of Post Issue Requirements:
 - Policy Acknowledgement Form* (PDAs)
 - Amendments
 - Premium



*only applies to states with PDAs requirements (IL, LA, NE, SD, and WV)

Step 6– Post Issue Requirement Follow-Ups

- Key follow-up dates for PIR:
 - Day 1 Post Issue – Date of Issue
 - Day 3/4 Post Issue – Policy Kit Mailed
 - Day 20 Post Issue* – DocuSign PDA process begins
 - Day 25 Post Issue* – Duplicate Kit Mailed to Client for PDA
 - Day 30 Post Issue – CM Review and Email
 - Day 55 Post Issue – CM Review and Email
 - Day 60 Post Issue – Free Look Period Expires
 - If all PIR have not been received at this time, the policy is cancelled (NTO'd)



Step 7 – Policy is Placed in Force

- Once all PIRs are received, the policy is placed in force
- Commissions are payable after the policy is placed in force



LTC Underwriting

Chris Klement, Underwriting Manager



LTC Underwriting Team Insights

- Our goal is to be able to issue your business!
- 11 Underwriters
- Underwriting turnaround time is less than 24hrs
- Updated Guidelines

Underwriting Guidelines

- We look at the total picture and evaluate applicants based on a number of criteria, including:
 - Health History
 - Cognitive Status
 - Daily Activities
 - Ability to perform and maintain activities of daily living (ADL's)
 - Instrumental activities of daily living (IADLs)

Activities of Daily Living	Instrumental Activities of Daily Living
<ul style="list-style-type: none">• Eating• Toileting• Transferring• Bathing• Dressing• Continence	<ul style="list-style-type: none">• Shopping• Meal preparation• Housework• Laundry• Managing money• Taking medication• Using the telephone• Walking outdoors• Climbing stairs• Reading/writing• Transportation

Underwriting Guidelines

- Quote the applicant based on their health as it is listed in the Underwriting Guidelines or how you have been advised to quote by underwriting.

Preferred	Select	Class I	Class II
15% allowance at underwriter discretion	100%	125%	150%
Applicant is considered a preferred risk and is eligible for all policy benefit options	Applicant is considered a standard risk and is eligible for all policy benefit options	Applicant is considered to be a higher risk for utilization of long-term care services	Applicant is considered to be a significantly higher risk for utilization of long-term care services Reserved for use at underwriter discretion. Do not quote Class II unless prequalified by an underwriter

Underwriting Guidelines

- Application Requirements
 - MIB
 - Pharmaceutical Check
 - Medical Records
 - Personal Health Interview
 - Cognitive Assessment
 - For Cause

Coming soon – Milliman Med Data

MIB	Pharmaceutical Check	Medical Records	Personal Health Interview	Cognitive Assessment
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Preparing Your Client for the Personal Health Interview

- Next Steps Brochure
- Preparing your client
 - List of doctors and medications
- Free of distractions
- Cognitive Interview
- Indicate on the application the best time to contact the applicant for a telephone or face-to-face interview. Reschedule, if necessary.
- Face-to-face interview must be conducted in the applicant's home where he/she resides.

Field Underwriting Trends

- Common Declines and Postponements / FAQ's
 - Diabetes
 - Osteoarthritis
 - Cognitive
 - Cardiac
 - Pending Evaluations/incomplete referrals
 - Psych
 - Brain
 - Build
 - Cancer
 - Alcohol/Drug use

Tips for Higher Placement

- Ask your client about their most recent height and weight as well as their heaviest weight in the past 12 months
- If they have a chronic illness (such as diabetes) ask probing questions such as date of diagnosis, lab values, change in therapies and complications and if there is any limitations. We have questionnaires available for many common medical conditions.
- If your client is on a medication, ask about the dosage, how long they have been on the medication, diagnosis associated with the medication, and effectiveness.
- **Prescreen your application with us at lrcunderwriting@mutualofomaha.com**

Statistics & Competitive Advantages

- Issued Business
 - 74% Select
 - 18% Preferred
 - 8% Class 1
- MOO Competitive Advantages
 - Build Chart
 - Prior Declines
 - Frequent Review of Underwriting Guidelines

Tips for Higher Placement

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Field Underwriting Tools

LONG-TERM CARE INSURANCE

Condition-Related Marketing: Breast and Prostate Cancer

Your client has a history of cancer... what does this mean?

Cancer involves uncontrolled growth of cells due to DNA damage at a cellular level. In the United States, 1 out of 3 women and 1 out of 2 men can expect to develop cancer at some point in their life. Knowing the most common types of cancer and the related factors are crucial to understand the cancer.

Fortunately, technology and advances in healthcare have significantly improved survival rates for early detection and more effective treatment therapies. Due to these improvements, our ability to absorb risk as a long-term care insurance (LTCI) provider has expanded. This allows Mutual of Omaha to make offers to more applicants with a history of cancer, particularly those with history of breast and prostate cancers.

Cancer Risk Factors: As part of the application process, we often ask questions about tobacco use, chronic alcohol/drug exposure, previous radiation therapy, genetics, diet, obesity, inflammatory conditions. This is because not only does each factor play a role in cancer, but we also try to identify those that raise the risk of developing cancer in the future.

Cancer Treatment Types: Cancer can be treated in a variety of different ways dependent on tumor type and severity. For breast and prostate cancer, these include surgery, radiation, endocrine therapy and chemotherapy. In many cases, your client may have been treated with a combination of these therapies.

Breast Cancer Underwriting Tips:

Cancer Stage and Grade: Our underwriting underwriting stability periods based on the stage and grade of the cancer. The higher the stage, the longer the wait. The "block" for the subapplicants begins when the last treatment has been completed.

Post Breast Cancer Treatments: Use document substantiation post breast cancer treatment includes Tamoxifen and Lenditin. These therapies only present symptoms of cancer.

When to Submit Application: Your client is scheduled to follow up testing (PSA, MRI, biopsy, etc.). It is recommended to wait off an application until these tests have been completed with favorable results.

Prostate Cancer Underwriting Tips:

Cancer Stage and Grade: Our underwriting underwriting stability periods based on the stage and grade of the cancer. The higher the stage, the longer the wait. The "block" for the subapplicants begins when the last treatment has been completed.

Post Prostate Cancer Treatments: Typically, post cancer treatment involves a PSA test. In some cases, when the individual is over the age of 75, hormonal therapies such as leuprolide can be used. In addition, prostate of prostate may require application with prostate and older with prostate cancer treated with "watchful waiting." In these cases, the cancer type has been identified and is approved.

When to Submit Application: Your client is scheduled to follow up testing (PSA, MRI, biopsy, etc.). It is recommended to wait off an application until these tests have been completed with favorable results.

Planning Corner: Prescreening is Key

diagnosis is common. As medical advances continue, testing and therapies are becoming more effective in battling these diseases. With that, our underwriting criteria continue to evolve, often resulting in offering more opportunity to various coverage.

Our underwriting team can help you to determine your client's eligibility for a policy or to help you to determine your client's eligibility for a policy. The more information you can gather, the better.

Remember: The more information you can provide our team about your client's health, the better we can help you to determine your client's eligibility for a policy. When it comes to cancer, the stage and grade as well as status of treatment are key.

The responsible and client's medical history of lucunderwriting@mutualofomaha.com.

LONG-TERM CARE INSURANCE

Condition-Related Marketing: COVID-19

If your client has tested positive for COVID-19, or any of its variants, there are some key best practices to follow.

As COVID-19 started spreading globally in 2020, little was understood about the virus - its origin, how it was transmitted, and how to treat it. This uncertainty about the virus and its effects also had an impact on the insurance industry. How we gathered underwriting evidence and what alternate means we were required to take changed often and quickly.

As people continue to take precautions for their safety like getting vaccinated, practicing social distancing and wearing masks, we continue to learn more about the risks and how to best field underwrite for the condition. Listed below are several tips we've gathered to help you gather important information about your LTCI applicants.

Underwriting Tips

Do not submit the application if:

- The client has had COVID-19 or any variant within the last 3 months.
- The client has had exposure to COVID-19 or any variant within the last 30 days.
- The client has been hospitalized for COVID-19 or any variant within the last 12 months.

If the client has recovered from COVID-19 or any variant three months or longer, ask the following questions:

- Were they hospitalized? If so, for how long?
- What symptoms were treated and how were they treated?
- When did treatment end?
- Did they require oxygen?
- Were they on a ventilator?
- Did they have blood clots?
- Did they experience a significant weight loss?
- Did they lose muscle strength?
- Did they experience memory loss/lapses or brain fog?
- Did they experience balance problems?
- Do their medical records reflect a full recovery from all the symptoms they had?

**Note: If any questions are answered "yes," then prescreen the applicant with our underwriting team prior to submission.*

For clients age 65 and above:

If the client's medical records are favorable, will they allow a nurse in their home to complete the in-person face-to-face assessment?

If not, do not submit the application. Contact the underwriting team so they may provide direction.

Planning Corner: Prescreening is Always a Good Idea

We do not foresee an end to COVID-19 or its variants, however, we continue to learn more every day on how to treat and underwrite the virus. To help avoid having to tell a client their LTCI application has been declined or rated up, Mutual of Omaha encourages you to prescreen all your LTCI applications. You'll get advice on what rate class to quote or even whether the application should be submitted.

Remember, the more you can tell underwriters about your client, the better the chance for a positive underwriting outcome. Questions you may have in regard to COVID and how it applies to LTC underwriting can be emailed to lucunderwriting@mutualofomaha.com.

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Diabetes

Some questions to ask

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

Osteoarthritis

Some questions to ask

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

Obesity

Some questions to ask

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

Pending Evaluations

Some questions to ask

- Do you currently have any outstanding testing or upcoming office visits with your primary medical provider?
- Have you been referred to a specialist, for additional testing, or for additional therapy?
- What symptoms or test results led to this referral?
- Have you had a complete physical exam with labs in the past 24 months?
- Have you had any recent changes in medication or therapy?

THANK YOU

