

HAVE THE TALK BEFORE YOU NEED THE CARE.



Most of us have a picture of how we'd like life to look as we grow older — where we'll live, who we'll spend time with and how much independence we'll keep.

A change in health can make those choices more urgent and more limited. Having conversations before care is needed gives you time to explore your options, share what matters to you and help the people closest to you feel more prepared.

Start With the Questions That Matter

You don't need to try to predict the future or settle every detail. Start with a few practical questions:



What would I want if I needed care?

Talk about where you would prefer to receive help, how important staying at home would be and what independence means to you.



How would care be coordinated?

Consider who might help assess your needs, organize services and keep family members and providers informed.



Who would help make decisions?

Identify the people you trust to understand your wishes and speak for you if you could not speak for yourself.



How would care be paid for?

Look at the role savings, income, family support and long-term care insurance could play in protecting your plans.

These questions can make an uncertain future feel more manageable and give your family a clearer understanding of your preferences before anyone has to make decisions during a health event.



Underwritten by
Mutual of Omaha Insurance Company

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Why Timing Matters

The “how would care be paid for?” question is often the hardest to answer on your own. Exploring long-term care insurance while you’re healthy simply gives you more room to decide. Applying earlier may provide:

- **A Better Opportunity to Qualify**
Your health history is considered when you apply, so starting while you’re healthy gives you more options.
- **More Coverage Choices**
You may have more time to compare benefits, features and ways to pay before a care need makes decisions urgent.
- **A Lower Starting Premium**
Premiums are based in part on your age when you purchase coverage, so waiting generally means paying more.



Help Coordinating Care, Not Just Paying for It

Long-term care insurance can do more than help pay for care. It can help answer the “who would coordinate it?” question too. The Care Coordination Benefit* gives you access, with no waiting period, to a licensed health care professional, typically a registered nurse. This care coordinator can work with your family and physician to assess your needs, identify resources and create a personalized plan of care as well as help connect you with services that support your care journey.



A Simple Way to Begin

Choose a comfortable moment and share what you would want if you ever needed care. You don’t need to have all the answers. One conversation can lead to more informed choices and help protect your independence and the people you love.

At Mutual of Omaha, helping people protect what matters most is what we do. Talk with your insurance professional about how long-term care insurance could support your plans.

* There’s no elimination period to satisfy to be eligible for these benefits.

Long-term care insurance is underwritten by Mutual of Omaha Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175. Policy form: ICC13-LTC13. This policy has exclusions, limitations, reductions and terms under which the policy may remain in force or be 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. We will not duplicate benefits for that portion of covered expense paid or payable: by Medicare, including amounts that are reimbursable or would be reimbursable but for the application of a deductible or coinsurance amount; by any other governmental program (except Medicaid), including the Veterans Administration; or by any state or federal workers’ compensation, employer liability, or occupational disease law, or any motor vehicle no-fault law. Your policy will end on the earliest of: the date we receive your written request to cancel the policy (in which case the grace period will not apply); the date of your death; the date your policy limit is reduced to zero; or the policy renewal date, if the renewal premium was not paid before the end of the grace period (except as provided for in the Protection Against Unintentional Lapse provision). The policy will stay in force during the grace period. In the event of termination, we will refund any unearned premium according to the Refund of Premium provision. Termination will not affect any claim for covered services that you incurred while your policy was in force.

Long-term care insurance is not a deposit, not FDIC insured, not insured by any federal government agency, not guaranteed by the bank, not a condition of any banking activity, may lose value and the bank may not condition an extension of credit on either: 1) The consumer’s purchase of an insurance product or annuity from the bank or any of its affiliates; or 2) The consumer’s agreement not to obtain, or a prohibition on the consumer from obtaining, an insurance product or annuity from an unaffiliated entity.

This is a solicitation of insurance. An insurance agent/producer may contact you by telephone to provide additional information.