Disability Income Insurance

Mutual Income Solutions℠

Plan Highlights for
Accident & Sickness



Mutual Income Solutions℠, disability income insurance policy from Mutual of Omaha Insurance Company, provides benefits to help replace a portion of your income if you're sick or injured and unable work. It's financial protection that helps you focus more on your recovery and less on how you'll cover expenses.

Mutual Income Solutions at a Glance

Issue Ages	18 to 61 years old
Maximum monthly benefit The monthly amount you receive if you become sick or injured	$300 to $20,000 per month (in $100 increments)
Benefit period The length of time you receive benefit payments after a disability occurs	6 months, 1 year, 2 years, 5 years, 10 years or to ages 65, 67, or 70
Elimination period Benefits begin after an elimination period has been satisfied when you are sick or injured and can't work	30, 60, 90, 180, 365 or 730 days
Policy type The type of policy you select is a key factor to your premium payment amount	• Non-cancelable – your premiums are locked in and your coverage is guaranteed for the duration of the benefit period you select, as long as you pay your premiums on time • Guaranteed renewable – your coverage is guaranteed as long as you pay your premiums on time or within the grace period. Your rates could be increased only if the change affects an entire class of policyholders

Note: options may vary by state and/or age

Built-in Policy Benefits

Total Disability Benefits - If you are unable to work in your regular occupation due to being sick or injured and not gainfully employed in another occupation, you'll receive a monthly benefit after your elimination period. Here are the benefits that are part of a Mutual Income Solutions policy:

- Survivor Benefit
- Recurrent Disability
- Waiver of Premium
- Presumptive Total Disability
- Transplant Donor Benefits
- Rehabilitation Benefit
- Military Suspension

Mutual of Omaha

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Mutual of Omaha Insurance Company

Optional Benefits

Many insurance products include optional benefits – or add-on coverages. Optional benefits allow you to customize your policy, providing enhanced or extended benefits. It's important to determine the right amount of coverage, but also consider the options that add value to your policy.

Mutual Income Solutions Optional Benefits

(options may vary by state and/or age)

Select one or both for no cost to increase your monthly benefits.

- **Automatic Increase Benefit (AIB)** – Automatically increases your monthly benefit by 4% each year.
- **Future Insurability Option (FIO)** – Increases your monthly benefit every three years after you buy the policy.

Disability Definition Options

Select one occupation-based benefit option for an additional cost to expand your opportunity to receive benefits when you're unable to work.

- **Extended Regular Occupation** – Extends your current occupation coverage for the length of the benefit period.
- **True Regular Occupation** – Extends your current occupation coverage for the length of the benefit period and allows you to receive a full monthly benefit, if you are unable to work in your occupation and currently working in a different occupation.

Residual Options

Select from one of the following options for an additional cost to receive a percentage of your monthly benefits when you're partially disabled.

- **Residual Disability** – Pays a percentage of your total monthly benefit if you're partially disabled.
- **Enhanced Residual Disability** – Pays a percentage of your total monthly benefit if you're partially disabled and provides a recovery benefit if you're still experiencing a loss of income after you return to work full time.

Additional Options

You can select from any of the following options for an additional cost.

- **Return of Premium** – Returns a portion (50 or 80%) of premiums paid less claims paid every 10 years, up to $12,000 total maximum monthly benefit. This benefit is not allowed if AIB and/or FIO is selected
- **Cash Value Benefit** – Provides a percentage (15% in year six to 100% in year 25) of all premiums paid for the policy and riders, minus and benefits in claims, up to $12,000 total maximum monthly benefit. This benefit is not allowed if AIB and/or FIO is selected
- **Mental or Nervous and Substance Abuse Extension** Extends your mental or nervous disorders and substance abuse coverage for the length of the benefit period.
- **Cost-of-LivingAdjustment** – Increases your benefit annually when you receive benefits.
- **Social Insurance Supplement** – Lowers the premium since the benefit you receive is the amount of monthly income you purchase, less any benefits provided by Social Security.

Extra Value with Discounts*

15% | **Common employer –** available to groups of three or more people working for the same employer

15% | **Self-employed –** minimum of two years self-employment

15% | **Association member –** be a member of an approved organization

10% | **Two-person household –** receive a discount when both you and your partner are issued a policy

10% | **Multi-policy –** Receive a 10% discount if you're issued an individual disability policy within 90 days of being issued an eligible fully underwritten life insurance or a long-term care insurance policy.

Earn up to a maximum 30% in premium discounts!

*Some discounts may have additional requirements

Underwritten by Mutual of Omaha Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175. 1-800-775-6000. Pol icy form numbers ICC19-D90, D90 or state equivalent. (in FL, D90-25797, D90-25798; in NY, D90-25773) Optional Riders: Return of Premium: ICC20-0PF9M (50%), ICC20-0PG1M (80%); 0PF9M (50%) or state equivalent, 0PG1M (80)% or state equivalent; Cash Value Rider: ICC20-0PH6M; 0PH6M or state equivalent; Non-Cancelable Extended Regular Occupation Rider: 0PF6M-FL REV; Regular Occupation Rider: 0PF6M-FL REV; Cost of Living Adjustment 3% Benefit Rider: ICC19-0PF4M; 0PF4M or state equivalent; Cost of Living Adjustment 6% Benefit Rider: ICC19-0PG5M; 0PF5M or state equivalent; Extended Regular Occupation Rider: ICC19-0PF6M; 0PF6M or state equivalent; True Regular Occupation Rider: ICC19-0PH8M; 0PF8M or state equivalent; Catastrophic Disability Benefit Rider: ICC19-0PG2M; 0PG2M or state equivalent; Residual Disability Benefit Rider: ICC19-0PG3M; 0PG3M or state equivalent; Enhanced Residual Disability Benefit Rider: ICC19-0PG4M; 0PG4M or state equivalent; Social Insurance Supplement Benefit Rider; ICC19-0PG5M; 0PG5M or state equivalent; in NY, 0PG5M-NY; Mental or Nervous Disorder and Substance Abuse Benefits Extension Rider; ICC19-0PG6M; 0PG6M or state equivalent; in NY, 0PG6M-NY; Automatic Increase Benefit Rider: ICC19-0PG8M; 0PG8M or state equivalent; Future Insurability Benefit Rider: ICC19-0PG9M; 0PG9M or state equivalent. These policies have exclusions and limitations. Products may not be available in all states. For costs and complete details of coverage, contact your licensed insurance agent/producer. Mutual of Omaha Insurance Company is licensed nationwide.

In NY, these polices provide disability income insurance only. They do NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. The expected benefit ratio for policy form number D90-25773 is 50 percent for non-cancelable (D90-25773 is 55 percent for guaranteed renewable). The ratios are the portion of future premiums, which the company expects to return as benefits when averaged over all people with these policies.

We will not pay benefits for disability or other loss that begins while your policy is not in force; results from a condition or activity specified in the UNDERWRITING LIMITATIONS OR EXCLUSIONS section of your policy schedule; results from an act of declared or undeclared war; is sustained as a result of serving on active duty in the armed forces (coverage may be suspended as described in the Military Suspension provision of your policy); is caused by attempted suicide or intentionally self-inflicted injury; results from the commission or attempted commission of a felony or loss resulting from engagement in an illegal occupation; or results from your being legally intoxicated as defined by state law in the state where the loss occurs. We will not pay benefits for any period during your disability while you are incarcerated in a penal or correctional institution for a period of 30 consecutive days or longer.

This is a solicitation of insurance. By responding, you are requesting to have a licensed agent/producer contact you to provide additional information.