MutualCare® Solutions

Tax Qualified Individual Long-Term Care Insurance Illustration

Prepared For:

Howard
Cristine

Presented By:

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310-309-0997
Agent License Number: D30604
October 04, 2025

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Plan 1

Summary:

***$10,000 monthly benefit for 4 years**
***3% inflation rider**
***90 day elimination period**
***annual premium: $18,684**

MutualCare® Secure Solution Plan 1

Individual Long-Term Care Benefit and Premium Summary

Howard Age 63 Male

Rate Class: Select

Policy Limit: $480,000/48 Months

Maximum Monthly Benefit: $10,000

Residential Care Facility: 100%

Home Care: 100%

Cash Benefit - 25% of Home Care: $2,000

Calendar Day Elimination Period: 90 Days

Partnership Qualified: No**

Cristine Age 59 Female

Rate Class: Select

Policy Limit: $480,000/48 Months

Maximum Monthly Benefit: $10,000

Residential Care Facility: 100%

Home Care: 100%

Cash Benefit - 25% of Home Care: $2,000

Calendar Day Elimination Period: 90 Days

Partnership Qualified: No**

Optional Benefits

Inflation Protection Benefit	3% Compound (Lifetime)	3% Compound (Lifetime)
Non-Forfeiture / Shortened Benefit Period	No	No
Waiver of Home Care Elimination	No	No
Spouse Shared Care	No	No
Spouse Security Benefit	No	No
Return of Premium - 3 x Max Monthly Benefit	No	No

This is a proposal, not an offer, and is subject to satisfying Mutual of Omaha's underwriting requirements. This policy may not cover all of the costs associated with long-term care incurred by you during the period of coverage. Premium rates may be subject to increase. A medical exam may be required for coverage. Please carefully review the accompanying outline of coverage for full description of policy benefits and policy limitations and exclusions. There is an additional cost for premium payments made more frequently than once a year.

MutualCare® Secure Solution Plan 1

Individual Long-Term Care Benefit and Premium Summary

Total Premium	Howard	Cristine	Combined
15% Partner - Both Insured Savings	$117.06	$179.69	$296.75
Your Monthly Premium	$663.31	$1,018.22	$1,681.53

Other Modes of Payment

ANNUAL Premium	$7,370.14	$11,313.61	$18,683.75
SEMI-ANNUAL Premium	$3,758.77	$5,769.94	$9,528.71
QUARTERLY Premium	$1,916.24	$2,941.54	$4,857.78
MONTHLY Premium	$663.31	$1,018.22	$1,681.53

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MutualCare® Secure Solution Plan 1

Individual Long-Term Care Insurance Optional Benefits Premium Summary

Howard Age 63 Male

Rate Class: Select

Policy Limit: $480,000/48 Months

Maximum Monthly Benefit: $10,000

Residential Care Facility: 100%

Home Care: 100%

Cash Benefit - 25% of Home Care: $2,000

Calendar Day Elimination Period: 90 Days

Cristine Age 59 Female

Rate Class: Select

Policy Limit: $480,000/48 Months

Maximum Monthly Benefit: $10,000

Residential Care Facility: 100%

Home Care: 100%

Cash Benefit - 25% of Home Care: $2,000

Calendar Day Elimination Period: 90 Days

Premium Summary

Base Policy Benefits	$312.59	$415.09
Inflation Protection Benefit	$350.72	$603.13
Total Monthly Premium	$663.31	$1,018.22

Costs associated with optional benefits are based on the plan design quoted. Any changes to the benefits shown above will need to be re-illustrated.

MutualCare® Secure Solution Plan 1

Individual Long-Term Care Insurance Inflation Growth

Howard Age 63 Male

Rate Class: Select

Policy Limit: $480,000/48 Months

Maximum Monthly Benefit: $10,000

Residential Care Facility: 100%

Home Care: 100%

Cash Benefit - 25% of Home Care: $2,000

Calendar Day Elimination Period: 90 Days

Inflation Protection Benefit: 3% Compound (Lifetime)

Cristine Age 59 Female

Rate Class: Select

Policy Limit: $480,000/48 Months

Maximum Monthly Benefit: $10,000

Residential Care Facility: 100%

Home Care: 100%

Cash Benefit - 25% of Home Care: $2,000

Calendar Day Elimination Period: 90 Days

Inflation Protection Benefit: 3% Compound (Lifetime)

Policy Year	Howard Maximum Monthly Benefit	Howard Policy Limit**	Cristine Maximum Monthly Benefit	Cristine Policy Limit**
1	$10,000	$480,000	$10,000	$480,000
5	$11,255	$540,244	$11,255	$540,244
10	$13,048	$626,290	$13,048	$626,290
15	$15,126	$726,042	$15,126	$726,042
20	$17,535	$841,682	$17,535	$841,682
25	$20,328	$975,740	$20,328	$975,740
30	$23,565	$1,131,150	$23,565	$1,131,150

**The increased Policy Limit amount will vary from the amounts shown here when policy benefits are paid. Refer to the Outline of Coverage for details.
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MutualCare® Secure Solution Plan 1

Individual Long-Term Care Insurance Break Even Analysis

Howard Age 63 Male

Rate Class: Select

Policy Limit: $480,000/48 Months

Maximum Monthly Benefit: $10,000

Residential Care Facility: 100%

Home Care: 100%

Cash Benefit - 25% of Home Care: $2,000

Calendar Day Elimination Period: 90 Days

Inflation Protection Benefit: 3% Compound (Lifetime)

Cristine Age 59 Female

Rate Class: Select

Policy Limit: $480,000/48 Months

Maximum Monthly Benefit: $10,000

Residential Care Facility: 100%

Home Care: 100%

Cash Benefit - 25% of Home Care: $2,000

Calendar Day Elimination Period: 90 Days

Inflation Protection Benefit: 3% Compound (Lifetime)

Howard

Years Premium Paid	Age	Annualized Premium	Future Monthly Benefit / Cost of Care	Days On Claim to Recover Premiums Paid
1	64	$7,959.72	$10,300	24
2	65	$7,959.72	$10,609	46
5	68	$7,959.72	$11,593	103
10	73	$7,959.72	$13,439	178
15	78	$7,959.72	$15,580	230
20	83	$7,959.72	$18,061	265
25	88	$7,959.72	$20,938	286
30	93	$7,959.72	$24,272	296
35	98	$7,959.72	$28,139	298

The "Future Monthly Benefit/Cost of Care" shows the value of the policy's "Maximum Monthly Benefit" over time based on the Maximum Monthly Benefit and Inflation Protection option selected, as indicated at the top of this page. This illustration assumes that actual covered expenses are equal to or greater than your Maximum Monthly Benefit and that the full Maximum Monthly Benefit is paid for each month on claim. The "Days on Claim to Recover Premium Paid" figures are calculated by taking the total premium paid divided by the "Future Monthly Benefit/Cost of Care" multiplied by 30.

This is a proposal, not an offer, and is subject to satisfying Mutual of Omaha's underwriting requirements. This policy may not cover all of the costs associated with long-term care incurred by you during the period of coverage. Premium rates may be subject to increase. A medical exam may be required for coverage. Please carefully review the accompanying outline of coverage for full description of policy benefits and policy limitations and exclusions. There is an additional cost for premium payments made more frequently than once a year.

Cristine

Years Premium Paid	Age	Annualized Premium	Future Monthly Benefit / Cost of Care	Days On Claim to Recover Premiums Paid
1	60	$12,218.64	$10,300	36
2	61	$12,218.64	$10,609	70
5	64	$12,218.64	$11,593	159
10	69	$12,218.64	$13,439	273
15	74	$12,218.64	$15,580	353
20	79	$12,218.64	$18,061	406
25	84	$12,218.64	$20,938	438
30	89	$12,218.64	$24,272	454
35	94	$12,218.64	$28,139	456
40	99	$12,218.64	$32,620	450

The "Future Monthly Benefit/Cost of Care" shows the value of the policy's "Maximum Monthly Benefit" over time based on the Maximum Monthly Benefit and Inflation Protection option selected, as indicated at the top of this page. This illustration assumes that actual covered expenses are equal to or greater than your Maximum Monthly Benefit and that the full Maximum Monthly Benefit is paid for each month on claim. The "Days on Claim to Recover Premium Paid" figures are calculated by taking the total premium paid divided by the "Future Monthly Benefit/Cost of Care" multiplied by 30.

This is a proposal, not an offer, and is subject to satisfying Mutual of Omaha's underwriting requirements. This policy may not cover all of the costs associated with long-term care incurred by you during the period of coverage. Premium rates may be subject to increase. A medical exam may be required for coverage. Please carefully review the accompanying outline of coverage for full description of policy benefits and policy limitations and exclusions. There is an additional cost for premium payments made more frequently than once a year.

Your MutualCare® Solutions plan design includes these built-in benefits that give you the flexibility to get the care you need.

Policy Limit is the initial maximum dollar amount payable over the life of the policy.

Monthly Benefit Amount is the initial maximum dollar amount your policy will pay each month.

Elimination Period is the calendar-day waiting period before policy benefits begin.

Cash Benefit gives you the flexibility to pay for any service that supports your plan of care.

- The cash benefit pays 25 percent of the policy's home care benefit, up to an initial maximum of $2,000 each month
- There's no elimination period to satisfy before receiving the cash benefit

Reimbursement Benefit reimburses you for actual long-term care expenses you incur.

- The reimbursement benefit pays up to the policy's maximum monthly benefit amount
- The policy's elimination period must be satisfied before reimbursement benefits begin

Note: Days in which you receive a cash benefit don't count towards satisfying the policy's elimination period for reimbursement benefits.

Home Care pays up to 50, 75 or 100 percent** of the policy's monthly benefit for:

- Personal care services to assist with the activities of daily living, which means you must need help with at least two of the six activities of daily living (bathing, dressing, eating, transferring, toileting and continence) for at least 90 days
- Homemaker services to help with housekeeping, grocery shopping and meal preparation
- Professional services of a nurse, home health aide or therapist
- Adult day care

Care Coordination* includes the services of a licensed health care professional who will assess your needs, develop an individualized plan of care and help you arrange for services. In addition, the use of a care coordinator makes you eligible for additional benefits designed to help you remain safely in your home.

Residential Care Facility Benefit pays up to 50, 75 or 100 percent** of the policy's monthly benefit for care received in a residential care facility or nursing facility.

Respite Care* pays to hire a temporary caregiver up to one month per calendar year to give your unpaid caregiver a needed break.

Hospice Care* pays for hospice care services in any setting.

International Benefit pays up to the policy's maximum monthly benefit for up to 12 months should you need covered services while traveling outside the United States, Canada or the United Kingdom.

Waiver of Premium waives your premium payment while you are receiving benefits for covered services at home, in a residential care facility or in a nursing facility.

*There's no elimination period to satisfy to be eligible for these benefits. **Percent options may vary by state.

These optional benefits may have been added to your MutualCare® Solutions plan design for an additional cost, allowing you to customize your coverage to meet your specific needs.

Inflation Protection allows your policy benefits to grow over time to keep up with the rising cost of long-term care services. Mutual of Omaha is required to offer you the option of a 5% annual compound inflation protection feature that automatically increases your previous year's Monthly Maximum and Lifetime Maximum Benefit amounts by 5%.

This illustration provides an overview of your MutualCare® Solutions insurance policy. Your outline of coverage provides complete details, including exclusions, limitations, reductions and terms under which the policy may remain in force or be discontinued.

Client Input Summary

Company: Mutual of Omaha - Health
October 4, 2025
Product: MutualCare Solutions - LTC

Client Info.

Partner Allowances?	Partner & both applying
Client	
Name	Howard
Date of Birth	07/12/1962
Age	63
Sex	Male
Rate Class	Select
Other Applicant	
Other Applicant's Name	Cristine
Other Applicant's Date Of Birth	05/03/1966
Other Applicant's Current Age Today	59
Other Applicant's Sex	Female
Other Applicant's Rate Class	Select
State Code	California

Plan Info.

Package Plan	MutualCare Secure Solution
Client	
Solve For	Premium
Maximum Monthly Benefit	10,000
Benefit Multiplier	48 Months (4 Year)
Calendar Day Elimination Period	90 Day
Assisted Living Facility	100%
Home Health Care	100%
Inflation Protection Option	3% Compound Lifetime Inflation Protection
Nonforfeiture Benefit - Shortened Benefit Period	N
Waiver of Elimination Period for Home Health Care	N
Shared Care	N
Return of Premium at Death Benefit	None
Common Employer or Association Group Allowance	N
Other Applicant	
Solve For	Premium
Maximum Monthly Benefit	10,000
Benefit Multiplier	48 Months (4 Year)
Calendar Day Elimination Period	90 Day
Assisted Living Facility	100%
Home Health Care	100%
Inflation Protection Option	3% Compound Lifetime Inflation Protection
Nonforfeiture Benefit - Shortened Benefit Period	N
Waiver of Elimination Period for Home Health Care	N
Return of Premium at Death Benefit	None
Common Employer or Association Group Allowance	N
Mode	Monthly/BSP
Premium Option	Lifetime

Client Input Summary

Company: Mutual of Omaha - Health
Product: MutualCare Solutions - LTC

October 4, 2025

Plan Info.

Duplicate Client's Benefits?	Duplicate
Click button to calculate premium	
Compute	Compute
Clear	Clear
*** Comment Box ***	Premium Clear
Client	
** Premium Result **	0.00
** Monthly Benefit Result **	0
Other Applicant	
** Spouse Premium Result **	0.00
** Spouse Monthly Benefit Result **	0
Total	
** Total Premium Result **	0.00

Optional Pages

Optional Pages	Y
Cover Page/Table of Contents	Y
Inflation Growth	Y
Benefits Premium Summary	Y
Break Even Analysis	Y
Base Coverage and Optional Benefits Overview	Y

Agent Info.

Agent Name	John Paoletti
Agent License Number	D30604
Agent Phone Number	310-309-0997
Coverage written on self/partner?	N

Concept

Concept	None