Limited Liability

Definitions

Steps For Starting A Limited Liability Plan

Limited Liability Procedures

Bank Account Reconciliation Spreadsheet Explanation

Sample: Bank Account Reconciliation Spreadsheet

Sample: Statement of Experience

Sample: Reserve Analysis

Definitions

This is a list of terms common to your Limited Liability Plan. In all instances, please refer to our Benefits Document for terms specific to your Plan.

Annual Liability Limit Sum of all Monthly Liability Limits for each Policy Year.

Company Mutual of Omaha, United of Omaha or Exclusive Healthcare, Inc.

Deposit Account Account set up for Employer at Employer's Bank to which Monthly Liability

Limit Deposits are made. If a segregated account is not used for Monthly Liability Limit Deposits, the Deposit Account is the account designated, by the Employer at the Employer's Bank, for periodic transfer to the Plan Benefit

Account, up to the Liability Limit.

Employer Policyholder.

Employer's Bank Bank selected by Employer and approved by the Company from which Liability

Limit Deposits will be transferred.

First National Bank of Omaha First National Bank of Omaha, Nebraska, where the Plan Benefit Account is

maintained.

Plan Benefit Account First National Bank of Omaha account on which Plan benefit payment drafts are

issued by the Company.

Self-Funded Monthly

Liability Limit

Determined each month by multiplying the number of covered employee in each class by the rates specified in the Liability Limit Agreement plus any portions of any previous month's Monthly Liability Limit that have not been transferred to the Plan Benefit Account since the most recent renewal of the policy (policies) (excludes transfers made in current year for prior year

adjustments).

Surplus Balance of Self-funded Liability Limit that has not been transferred to the Plan

Benefit Account or released to the Employer.

Transfer Amount Any periodic transfer of Employer's funds (up to the Liability Limit) from the

Deposit Account to the Plan Benefit Account.

Steps for Starting a Limited Liability Plan

You (Policyholder):

- Establish a bank account to cover self-funded claims.
- Authorize ACH fund transfers to the Plan Benefit Account.
- Make self-funded liability limit funds available for transfer to the Plan Benefit Account.
- Pay monthly premiums to cover retention expenses, pooling charges and premium taxes.
- If you hold reserves, you should establish and maintain a terminal reserve account.

We (Company):

- Set up a Plan Benefit Account in your name at First National Bank of Omaha.
- Monitor your monthly self-funded liability limit.
- We request ACH fund transfer as claim drafts are issued.
- Deposit funds in your Plan Benefit Account for claims exceeding your self-funded liability limit.
- Provide monthly account reconciliation reports.
- Provide an annual Statement of Experience and renewal report, plus your self-funded accounting reports.

Limited Liability Procedures

This section explains the monthly processing of your Limited Liability program. The initial installation steps are as follows:

- Establish a Deposit Account at your bank or designate an account for ACH (Automatic Clearing House) transfers to the Plan Benefit Account. The Company will establish a Plan Benefit Account in your name at First National Bank of Omaha.
- Authorize your bank to honor periodic ACH transfers to the Plan Benefit Account. We will initiate the first transfer when the first claim draft is issued. Amounts of transfers will vary, depending issued claim volume. The Company's only requirement is that adequate funds, up to the Self-funded Liability Limit, are in the Plan Benefit Account to cover issued drafts. The Company will fund claims in excess of the Self-funded Liability Limit and medical pooled claims.
- If the Company does not receive timely notice of the deposit amount, the Company will use the previous month's deposit in estimating the Liability Limit for transfer of funds from the Deposit Account. Any required adjustments will be made the following month.
- We will initiate periodic ACH transfers from your Deposit Account up to the Self-funded Liability Limit. The transfer amount will be determined by the issued claim volume. You and your bank may also monitor your Self-funded Liability Limit, which is the cumulative monthly deposits less amounts already transferred to the Plan Benefit Account for the current policy year.

The flowchart on the following page shows the processing steps for billing and the flow of funds.

Month-end Reporting

The Company will forward a Bank Account Reconciliation Spreadsheet to the Employer by approximately the 15th business day of the following month. This shows overall cash surplus or deficit and available funds in the Deposit Account and the First National Bank of Omaha Plan Benefit Account. A sample of the Bank Account Reconciliation Spreadsheet is included in this section.

Direct Bank Account Reconciliation questions to Group Financial Claim Data Management (402) 351-6194.

Policy Year-end

Sixty to ninety days before the policy anniversary date, the Employer will receive change requirements or adjustments for Premium, Liability Limit and/or Terminal Reserve.

Within 120 days after the policy anniversary date, the Employer will receive:

- a Statement of Experience,
- a Release of Surplus Funds Letter (if applicable),
- a Self-funded Accounting, and

At the end of the policy year we may initiate an ACH transfer of surplus funds from the Deposit Account under the following situations:

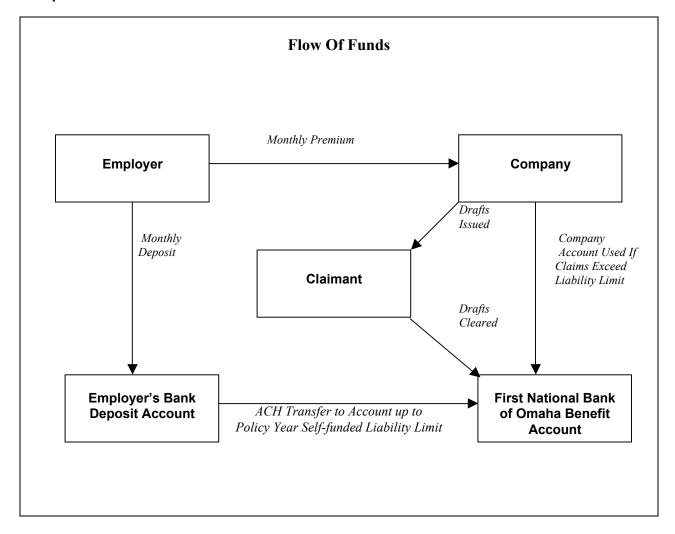
- Cancellation (all surplus funds) or
- Prior year's deficits funded by the Company (surplus to cover all deficits).

Policy Year end Reporting (cont'd)

In all other situations, transactions (releases or recoveries) will occur within 120 days after the policy anniversary date when the Statement of Experience and the Release of Surplus Funds Letter are sent to the Employer.

Note: At policy year-end, surplus funds must remain available for ACH transfer by Us until the statement of experience is complete and the Company releases the funds.

Sample Flow of Funds Chart



Bank Account Reconciliation Spread Sheet Explanation

Limited Liability Bank Account Reconciliation			
Column Title	Column Explanations		
	Policyholder Transfer Account		
Deposits (Liability Limit)	Policyholder's monthly liability limit. (Rate X exposures) The monthly liability limit is accumulative for the policy year		
Transfer out	Monthly fund transfers from Policyholder's bank account to our First National Bank of Omaha account (refer to "Transfer In From Bank Account" column). Amount will not exceed current month's liability limit plus any surplus amounts from previous months' within the current policy year.		
Prior year Transfers Out	Fund transfers resulting from prior year annual accounting statements (Statement of Experience).		
Prior Year Releases	Release of prior year's unused deposit liability resulting from annual accounting statements (statement of Experience).		
Balance	Beginning Funds carried forward from prior year – plus deposits – less fund transfers, prior year transfers and prior year releases.		
	First National Bank of Omaha Plan Benefit Account		
Transfer In From Bank Account	Monthly fund transfers from Policyholder's bank account to our First National Bank of Omaha account (refer to "Transfer Out" column).		
Total Cashed Claims	Total monthly claims cashed through First National Bank of Omaha account.		
Companies Funded or (Recovered)	Deposits funded by United for cashed claims that are in excess of the Policyholder's accumulative liability limit amount; or (withdrawals) made by us from the Policyholder's bank account to recover claims funded by us during prior months of the current policy year. Recoveries are only made on Policyholder's surplus funds.		
Pooled Claims	Deposits funded by us for issued claims exceeding the pooling limit for an individual. Deposits for pooled claims reflected in the first month of a policy year are actually for pooled claims issued during the last month of the prior policy year.		
Other Deposits or (Withdrawals)	Transactions resulting from prior year annual accounting statements (reto "Prior Year Transfers Out" column). Also may include adjustments bank and coding errors within tolerance.		
End Balance per Book	Beginning bank balance carried forward from prior year – plus fund transfers in – less cashed claims—plus deposits made by us for Company funded claims and Pooled claims—plus/minus other transactions for prior year annual accounting and bank and coding errors within tolerance.		
Issued Claims	Total monthly issued claims		
Outstanding Claims	Prior year's outstanding claims carried forward, plus current month's issued claims, less current month's cashed claims.		
Current Year Surplus or (Deficit)	Current policy year's Deposits (liability limit), less total issued claims, plus pooled claims.		

Bank Account Reconciliation Spreadsheet Sample

MUTUAL OF OMAHA LIMITED LIABILITY SPREADSHEET

November 9, 2004

Please direct inquiries to: (###)###-####

Policyholder Name: ABC Corporation

Policyholder Transfer Account

Plan Benefit Account

	(1) Deposits (Liability Limit)		Prior Year Transfers Out	Prior Year Releases	Balance	Transfer In From PH Account	Total Cashed Claims	Company Funded Claims	(2) Pooled Claims	Other Deposits or Withdrawals	Ending Bank Balance	(3) Issued Claims	Outstanding Claims	(1)+(2)-(3) Current Year Surplus /Deficit
	Prior Year	Carry Forwar	d Balance		56,624.58	Prior Year (Carry Forward Ba	alance			539.90		19,128.33	
05/04	48.574.74	45,000.00	0.00	0.00	60,199.32	45,000.00	54,879.42	(2,229.42)	11,569.42	0.00	.48	57,272.95	18.521.86	5,871.21
06/04	48.327.31	52,000.00	0.00	0.00	56,526.63	52.000.00	67.135.58	12,573.00	0.00	0.00	(2562.10)	73,586.76	24,973.04	(19,388.24)
07/04	80.637.42	48,000.00	0.00	0.00	89.164.05	48,000.00	59.183.99	10,922.52	2,824.48	0.00	0.91	47,109.52	12,898.57	16,964.14
08/04	71.752.73	92,000.00	0.00	0.00	68,916.78	92,000.00	68.605.26	(257.67)	257.67	0.00	23,395.65	64,505.47	8,798.78	24,469.07
09/04	69.807.52	77,000.00	57.165.00	(0.52)	4,559.82	134,165.00	71,490.51	(21,008.43)	21,105.10	0.00	86,166.81	76,691.85	14,000.12	38,689.84
10/04	70,093.93	12,000.00	0.00	0.00	62.653.75	12,000.00	78.222.55	20,119.00	17,102.02	(57,165.00)	0.28	77,729.78	13,507.35	48,156.01
11/04	0.00	0.00	0.00	0.00	62.653.75	0.00	0.00	0.00	0.00	0.00	0.28	0.00	13,507.35	48,156.01
00/00	0.00	0.00	0.00	0.00	62.653.75	0.00	0.00	0.00	0.00	0.00	0.28	0.00	13,507.35	48,156.01
00/00	0.00	0.00	0.00	0.00	62.653.75	0.00	0.00	0.00	0.00	0.00	0.28	0.00	13,507.35	48,156.01
00/00	0.00	0.00	0.00	0.00	62.653.75	0.00	0.00	0.00	0.00	0.00	0.28	0.00	13,507.35	48,156.01
00/00	0.00	0.00	0.00	0.00	62.653.75	0.00	0.00	0.00	0.00	0.00	0.28	0.00	13,507.35	48,156.01
00/00	0.00	0.00	0.00	0.00	62.653.75	0.00	0.00	0.00	0.00	0.00	0.28	0.00	13,507.35	48,156.01
TOTAL	389.193.65	326,000.00	57,165.00	(0.52)		383.165.00	399,517.31	20,119.00	52,858.69	(57,165.00)		393,896.33		

Statement of Experience Statement Sample – The Company Holds Reserves

STATEMENT OF EXPERIENCE

POLICYHOLDER NAME

LOCATION

01-01-06 TO 01-01-07

			POLICY NUMBER
			MEDICAL
A.	PREMIUM		960,000
	LESS POOLED AD&D LESS POOLED PREMIUM		117,000
	NET PREMIUM		117,000 843,000
	NET FREMION		643,000
В	CLAIMS PAID BY INSURANCE CO	OMPANY	50,000
	LESS POOLED AD&D		0
	LESS POOLED CLAIMS		50,000
	NET PAID CLAIMS		0
	LESS BEGINNING OUTSTANDING	Ť	0
	ENDING OUTSTANDING		28,600
	LESS BEGINNING RESERVE		0
	ENDING RESERVE		480,000
	INCURRED CLAIMS		508,600
C.	CONVERSION CHARGES		0
C.	CONVERSION CHARGES		· ·
D	RETENTION		344,000
	INTEREST ADJUSTMENT		(9,600)
	NET RETENTION		334,400
			,
E.	BALANCE (A-B-C-D)		0
	PRIOR DEFICIT		0
	CONTRACT PREMIUM DUE		0
	STABILIZATION RESERVE TRANS	SFER	0
	NET BALANCE		0
F.	TRANSFER DUE FROM SELF FUN	ns	0
Γ.	TRANSPER DOLTROW SELF TON.	D3	U
G.	CUMULATIVE BALANCE		0
CELE ELD	IDED A GCOLDITALG		
SELF-FUN	IDED ACCOUNTING:	NOD	0
	BEGINNING SELF FUNDED BALA	INCE	2 040 000
	SELF-FUNDED DEPOSIT		2,040,000
	SELF-FUNDED CLAIMS		(1,800,000)
	SELF-FUNDED BALANCE TRANSFER TO PREMIUM DEFICE	F	240,000
			0
TRANSFER TO STABILIZATION RESERVE NET SELF FUNDED BALANCE		ESERVE	0 240,000
	NET SELF FUNDED BALANCE		240,000
* B	ALANCE CARRIED FORWARD TO POLICY P	ERIOD 01-01-07 TO 01-01-08	
TOTAL N	ET FUNDS		2,883,000
		(an arm anni	, ,
GROUP OFFICE		(GROUP OFFICE NAME)	

Statement of Experience Statement Sample - The Employer Holds Reserves

STATEMENT OF EXPERIENCE

POLICYHOLDER NAME

LOCATION

01-01-06 TO 01-01-07

	01-01-06 10 01-01-07		POLICY NUMBER
A.	PREMIUM		MEDICAL 480,000
A.	LESS POOLED AD&D		480,000
	LESS POOLED PREMIUM		107,400
	NET PREMIUM		372,600
	THE TREMICINE		372,000
В	CLAIMS PAID BY INSURANCE CO	MPANY	50,000
	LESS POOLED AD&D		0
	LESS POOLED CLAIMS		50,000
	NET PAID CLAIMS		0
	LESS BEGINNING OUTSTANDING		0
	ENDING OUTSTANDING		28,600
	LESS BEGINNING RESERVE		0
	ENDING RESERVE		0
	INCURRED CLAIMS		28,600
C.	CONVERSION CHARGES		0
D	RETENTION		344,000
	INTEREST ADJUSTMENT		0
	NET RETENTION		344,000
E.	BALANCE (A-B-C-D)		0
ъ.	PRIOR DEFICIT		0
	CONTRACT PREMIUM DUE		0
	STABILIZATION RESERVE TRANS	FER	0
	NET BALANCE		0
F.	TRANSFER DUE FROM SELF FUNI	OS	0
G.	CUMULATIVE BALANCE		0
SELF-FUN	DED ACCOUNTING:		
	BEGINNING SELF FUNDED BALAN	NCE	0
	SELF-FUNDED DEPOSIT		2,040,000
	SELF-FUNDED CLAIMS		(1,800,000)
	SELF-FUNDED BALANCE		240,000
	TRANSFER TO PREMIUM DEFICIT		0
	TRANSFER TO STABILIZATION RI	ESERVE	0
	NET SELF FUNDED BALANCE		240,000
* B	ALANCE CARRIED FORWARD TO POLICY PE	ERIOD 01-01-07 TO 01-01-08	
TOTAL NE	T FUNDS		2,412,600
GROUP OF	FICE	(GROUP OFFICE NAME)	

Reserve Analysis - Sample

RESERVE	ANALYSIS
---------	----------

GROUP NAME: ABC CORPORATION LOCATION: OMAHA, NEBRASKA

GROUP I.D.: G000ABC1

POLICY PERIOD: 08-01-03 TO 08-01-04

Claims Incurred Prior to, Paid After 04-01-04:

April, 2004 \$247,584 May 92,392 June 50,279 July 35,819

17,289

Estimated Remaining Runout 49,263

Total \$492,626

Claims Incurred Prior to, Paid After 07-01-04:

\$279,652 July, 2004 August 141,177

Estimated Remaining Runout 147,856

\$568,688

\$492,626 568,688

\$1,061,314 Divided by 2 =530,657 1,100

Reserve Adjustment Factor x

\$583,723