NEW APPLICATION PROCESSING

Life insurance and annuity applications are processed in the Member Service / New Business Department. Each life insurance application is evaluated by an experienced underwriter according to generally accepted risk classification practices and in compliance with state and federal regulations. The suitability review for annuity applications is conducted by the Sales Department.

The Sales Department may be contacted by telephone, fax or email to provide personalized service to agents.

SALES DEPARTMENT CONTACT INFORMATION

Nicholas J. Radosta, FIC, LUTCF, CFS Director of Sales & Agency Development 1-800-521-9292 ext. 172 nradosta@womanslife.org

Pat Maude Regional Recruiting Director 1-847-991-4444 pmaude@womans.life.org

Joy Collins, FICF Regional Director 419-349-4070 jcollins@womanslife.org

Susie Wilson Field Service Representative 1-800-521-9292 ext. 146 swilson@womanslife.org

Joan Ingram Administrative Assistant 1-800-521-9292 ext. 178 jingram@womanslife.org

MEMBER SERVICE CONTACT INFORMATION

Vickie Fournier Director of Member Service 1-800-521-9292 ext. 169 Fax: 1-810-966-7997

vfournier@womanslife.org

AGENT RESPONSIBILITIES AND LIMITATIONS

Agents are responsible for

- Prompt submission of correct and complete applications with proper signatures, authorizations, and premium deposits, when allowed. (See *Initial Premium Collection* and *Trial Applications* for information.)
- Completion and submission of all state-required forms, including HIV Informed Consent forms (PRIOR TO TESTING), and Society forms and supplements as directed by the Society and in accordance with state and federal regulations.
- Contacting a paramedical company (ExamOne) to set up any exams, EKG's and specimen collections required for underwriting unless special arrangements have been made with a Field Service Representative (FSR) in the Sales Department to assume this responsibility.
- Prompt delivery of certificates with prompt submission of full premium and correct and fully completed delivery requirements to Home Office.

Agents do **not** have the authority to accept risks, pass on insurability, make or modify contracts, or waive any of the rights or requirements of Woman's Life Insurance Society.

APPLICATIONS AND FORMS

State-specific Application Checklists outline the correct application forms, other state-required forms, and Society supplements required to write life insurance and annuity applications. State Checklists are available on the <u>AgentWeb</u> in the application packets. If a special state version is required there will be a state suffix attached to the form number.

All forms may be downloaded from the <u>AgentWeb</u>. When downloading an application, follow the instructions to ensure that the application will print in an acceptable format with the correct font, size, margins, and form numbers. Be sure to download all the supplemental forms listed on the Checklist for the application type used.

Witnessing Applications

As the Representative, you will witness all applications and forms. If you are writing an application on yourself, you cannot be your own witness. You will need a disinterested third party to witness your signature. Likewise, if you write an application for a family member and you are the owner, payer or beneficiary, a disinterested third-party witness signature is required. The same rules apply to signing the delivery requirements.

Life Insurance Application Forms

- ICC17 A1-17 This is the application form used for all applicants. This application is not available in New York. (NY must use A1-12 NY application)
- Electronic version is available in all states except: AK, CA, DC, DE, MA, MT, NY, SD and UT.

Annuity Application Forms

- A1-03 AN This application may be used for adult and junior annuity applicants.
- A1-03 AN3P This application may be used for adult and junior annuity applications when third-party ownership is applicable.
- Electronic version available for: CA, CO, DE, GA, ID, IL, IN, KS, MI, MS, NY, OH, OK, PA, TN, TX, VA, WV

MEDICAL INFORMATION BUREAU (MIB)

Woman's Life is a member of MIB. MIB codes and insurance activity reports are requested for each proposed insured. The MIB authorization is included in the *Authorization to Obtain and Disclose Information* in the ICC17 A1-17 application. This authorization is to be signed and dated in all cases, including a spouse's signature if a Spouse Rider is included. Applications without signed authorizations will be delayed until the signatures are obtained.

IDENTITY VERIFICATION RESPONSIBILITIES

Anti-money laundering regulations include the requirement that agents verify the identity of all parties to life insurance and annuity sales. See the *Producer's Guide to Anti-Money Laundering* located in the Resource Center on the <u>AgentWeb</u>.

Form A-06 CIDV is required for each annuity application. CIDV information is included in the life application. It signifies, by agent signature, that the agent has verified ID and the personal information. This form also includes a military question which must be answered for all adult parties to the application. For Entity Ownership (Corporation, Partnership, LLC, or Trust) follow the instructions provided on A-06 CIDV.

If the picture on the ID does not match the person an application may not be taken. If the picture matches but there are other discrepancies between personal information provided by anyone involved in the transaction and their respective ID, an application may be taken on a COD basis only, accompanied by a statement to explain the discrepancy. No requirements are to be ordered until Woman's Life has advised that the discrepancies have been resolved satisfactorily.

CITIZENSHIP AND RESIDENCY

Only citizens or permanent United States residents may apply for life insurance and annuities with Woman's Life. The Society defines permanent residency as having an unconditional green card. Work or other temporary visas do not qualify.

Verification of citizenship/residency applies to each party to the application - owner, applicant, junior representative and proposed insured or annuitant, adult or junior. An application may not be taken if citizenship or permanent legal residence cannot be established.

Form A-06 CIDV signifies by agent signature that the agent has confirmed U.S. citizenship, or verified permanent residency, by examination of an immigration document issued by the U.S. Immigration and Naturalization Service.

If client is not a US Citizen, and has a green card, we require a copy of the green card with the application.

INITIAL PREMIUM COLLECTION

Cash Limits

When collecting the initial premium, an agent, other than a state or federally chartered bank or wholly owned subsidiary of such bank, may not accept cash over \$2,000. A payment of initial premium in excess of \$2,000 must be by the applicant's check or money order made payable to Woman's Life Insurance Society.

COD Applications and Conditional Receipt Limits for Life Insurance

The Society's Conditional Receipts in application ICC17 A1-17 is condition-precedent receipt. Coverage is conditional on the requirements stated in the receipt.

Initial premium may not be accepted with Application Form ICC17 A1-17 if:

- The total coverage amount exceeds \$250,000. (The total coverage amount = the face amount + the amount of any term rider on the base insured + the amount of any Accidental Death Benefit rider + the net amount at risk of any Single Premium Paid-Up Additions rider.)
- The Single Premium Paid-Up Additions Rider is included.
- Any person proposed for insurance has been rejected for life insurance by Woman's Life Insurance Society or another insurance company.
- Trial application guidelines apply. (Refer to the *Trial Applications* section)
- The application is written in Kansas.

Initial premium **may not** be accepted with an application for Single Premium Whole Life when:

- The face amount exceeds \$100,000.
- A 1035 exchange is being used to fund the single premium.
- The current age of the proposed insured is greater than 70.
- The applicant has been previously declined for insurance by the Society or another insurance company.

COD Applications for Annuities

Applications for annuities may be submitted with money, or on a COD basis in the case of transfers or rollovers. An annuity will not be issued, however, until the intended premium contribution is received.

UNDERWRITING CLASSES

The following underwriting classes are available for

- Intuitions® Whole Life Insurance
- Intuitions® 20 Year Payment Whole Life Insurance
- 10 Year Automatically Renewable & Convertible Term Life Insurance
- 20 Year Nonrenewable Convertible Term Life Insurance
- 10 Year and 20 Year Level Benefit Term Riders
- Spouse Term Life Insurance Benefit Rider
 - Standard and rated Tobacco and Nontobacco
 - > Preferred Tobacco and Nontobacco (subject to minimum coverage amount)
 - Preferred Plus (Nontobacco only and subject to minimum coverage amount)
- Intuitions[®] Single Premium Whole Life Standard Tobacco and Standard Nontobacco (Standard class includes risks classified through Table 4)

Rated Classes

- Table ratings from Table 1 through Table 16 apply to the base plan, term rider coverage or to a Spouse Rider
- Flat extra ratings may be permanent or temporary for a specified number of years and are charged as an annual fixed dollar amount per thousand of face amount (base plan, term rider or a Spouse Rider). The most common flat extra ratings are in a range from \$2.00 to \$15.00 per thousand.
- Commissions are paid on ratings

Benefit Riders

- Accelerated Benefit Rider available with certificates of any underwriting class at no additional cost
- Single Premium Paid-Up Additions Rider available with certificates in standard and preferred underwriting classes
- Guaranteed Insurability Option available with certificates in standard and preferred underwriting classes
- Total Disability Benefit Rider, Waiver of Monthly Deduction (UL), and Accidental Death Benefit
 - available with certificates in the standard and preferred underwriting classes

- may be available with some rated certificates of Table 4 or less
- o may be declined or rated individually when so required by the risk presented

TOBACCO/NONTOBACCO RATES

All current life insurance plans and term riders issued to adult applicants are differentiated by tobacco or nontobacco rates. The use of any type of nicotine or nicotine replacement within one year of the application is classified as tobacco use. This includes

- Cigarettes
- Cigars
- Pipe
- Chewing tobacco
- Snuff
- Nicotine-containing gum, "patch", and any other nicotine-containing agent, prescribed or non-prescribed
- Devices utilizing steam or water to deliver nicotine

A positive urine screen will result in tobacco rates. An explanation of exposure to passive smoke will not allow nontobacco rates.

Reconsideration of a tobacco rate may be available for life insurance certificates depending on CSO mortality table the certificate has been issued. New Jersey certificates may be reclassified. Reconsideration for nontobacco rates is possible one full year after the date of last use of tobacco as defined above. The change requires completion of a service form, and a urine screening test will be requested.

Please note - junior applicants ages 0-17 will be issued with non-tobacco rates, regardless of tobacco status. Woman's Life does not have tobacco rates for ages 0-17.

MARIJUANA GUIDELINES

Experimental: those who have tried or used at least once but no longer use	STD and Non-tobacco rates if all else is favorable
Occasional: those using twice a month or less	STD and Nontobacco rates if all else is favorable
Intermittent: those who use 3 to 8 times monthly	STD and Tobacco rates apply
Moderate: those who use 9 to 16 times monthly	+50% and Tobacco rates apply
Heavy: those who use more than 16 times monthly (4	+100% up and Tobacco rates
times weekly)	apply

VAPING GUIDELINES

Clients who vape (including CBD oil and MONQ essential oils) will be written as tobacco underwriting class.

CRITERIA FOR PREFERRED UNDERWRITING CLASSES (not for SPWL)

Preferred

Nontobacco for one year *

disease prior to age 60

No private aviation; no hazardous No private aviation; no hazardous sports or occupation

years

No more than two moving violations No more than two moving violations over past three years

No personal history of vascular disease, other significant medical conditions -Must be a standard risk without the use of credits

No treatment or counseling for alcohol or drug use over the past seven years

Blood pressure (treated or untreated) must not exceed 140/90 for issue ages 0-60, and 150/90 for issue ages 61+ over the last 12 months

Total cholesterol must not exceed 240 mg/dl - Treatment does not disqualify

limits

Preferred Plus

Nontobacco for three years

Family History: No death of parent or Family History: No death of parent or sibling from cancer or cardiovascular sibling from cancer, cardiovascular disease, or diabetes prior to age 60

sports or occupation

No convictions for DUI over past three No convictions for DUI over past five years

over past three years

No personal history of vascular disease, life-threatening cancer, diabetes or life-threatening cancer, diabetes or other significant medical conditions -Must be a standard risk without the use of credits

> Never been treated or received counseling for alcohol or drug use

> Blood pressure, untreated, must not exceed 140/90 for issue ages 0-60 and 150/90 for issue ages 61+ - Treatment disqualifies

> Total cholesterol, untreated, must not exceed 220 mg/dl. Chol/HDL ratio of 5.0 or less

Body build not to exceed height/weight Body build not to exceed height/weight limits

IMPORTANT NOTES: To be considered for Preferred Plus or Preferred underwriting classifications, a proposed insured age 45-70 must have seen a doctor within 3 years and have a verifiable medical record. The Society's underwriting policy includes strict adherence to the Preferred and Preferred Plus criteria. Preferred classes are available from ages 18-70 and require a minimum face amount of \$100,000.

*A Preferred Tobacco Class is available using the same criteria for Preferred Nontobacco Class other than tobacco use.

ATTENDING PHYSICIAN STATEMENTS (APS)

APS guidelines are included on the *Underwriting Requirements* charts. All requests for medical records are made from the Home Office. We call medical offices to verify the availability of records, the amount of the fee, and if prepayment is required. Therefore, it is very important that each application include complete names, addresses and phone numbers for doctors, clinics, and hospitals.

We also ask if the medical office will accept a faxed or emailed request and if the office will fax or email records back. We follow up by phone about every 10 business days until the report is received. We prefer that agents or applicants do not pick up medical records except in unusual situations and only with the **prior approval of the Woman's Life underwriter.**

You may contact the Sales Department for updates on status of APS or refer to your pending business report on the <u>AgentWeb</u> / eStatement Center / Pending Business Reports.

UNDERWRITING REQUIREMENTS & ADULT BUILD CHART All Life Insurance Plans except SPWL

All original exam forms, EKG's and lab slips are to be sent by paramedical staff directly to the Home Office, never to an agent or agency. Woman's Life's exam forms are required; generic forms and those of other insurance companies are not acceptable.

Woman's Life exclusively uses ExamOne, a Quest Diagnostic Company, for paramedical exams and labs. Our preferred laboratory is Clinical Reference Laboratory (CRL).

The Sales Department orders all underwriting requirements.

Important Note: The Society reserves the right to require reports and tests beyond the scope of those described in the *Underwriting Requirements* charts at the discretion of the Woman's Life underwriter.

Underwriting Requirements Chart W-400

Adult Build Chart

The table provides weight maximums for Preferred and Preferred Plus underwriting classes. It also provides weight maximums for Standard class and table ratings for some representative height and weight combinations. Although not specifically addressed, significant underweight may also be considered alone or in combination with certain medical impairments for an adverse underwriting decision.

Heights are given in feet and inches. Weights are given in pounds. The weights given for Preferred and Preferred Plus classes are gender-specific and applicants applying for those classes must meet the weight requirements. The weights given for the Standard class and the rated classes apply to both genders and are guidelines only. Other risk factors may affect the underwriting decision.

Adult Build Chart W-400BC

UNDERWRITING REQUIREMENTS & ADULT BUILD CHART - SPWL Single Premium Whole Life (SPWL) only

The Sales Department orders the requirements for Single Premium Whole Life beginning with the ExamOne telephone interview (TI). If a physical assessment (PA) with blood (BPF) and urine (HOS) collection is required, ExamOne will set up the appointment during the telephone interview. Any Attending Physician's Statement (APS) will be ordered directly by the Member Service Staff. Refer to the following table for the usual requirements based on net amount at risk.

Underwriting Requirements Chart for SPWL W-401

Adult Build Chart for SPWL

Applicants with weights in excess of those listed below will not be approved for Single Premium Whole Life. Weights and medical history will be considered together to determine eligibility within the Table 4 limits required for underwriting approval. Although no minimum weights are provided, underweight is taken into consideration as a medical factor and may disqualify an applicant. Height is in feet and inches; weight is in pounds.

Adult Build Chart W-401BC (SPWL only)

SPOUSE AND CHILDREN RIDERS

Generally, only a legally married spouse is eligible for spouse rider coverage. However, in some states a civil union may qualify a person to be considered for the spouse rider. In the event of a civil union, check with the Sales Department or an underwriter so that current state regulations can be reviewed.

Children eligible for a child rider are the natural children, stepchildren, or legally adopted children of the proposed insured or spouse named in the application. Copies of adoption papers are required with an application when adopted children are to be covered.

JUVENILE INSURANCE LIMITS

Individual insurance for juveniles is subject to financial underwriting guidelines and may include the completion of special supplements.

Washington – Form W-191 Juvenile Insurance Supplement is required for all individual applications for ages 0 through 17 and any face amount; Washington allows only a natural parent, an adoptive parent or legal guardian to apply. In the case of a separation or divorce, only the custodial parent may apply. Custodial, adoption and guardianship documents are required to be submitted with the application.

All other states - Form W-190 Junior Financial Supplement for amounts of insurance equal to or greater than \$100,000.

The Society requires an Inspection Report and an Attending Physician's Statement when the amount of insurance equals or exceeds \$100,000. In determining the maximum amount of death benefit to be issued on a child the following criteria apply.

- Amounts of insurance in force on parents should generally be at least twice the amount of the coverage proposed for a child.
- Any siblings should be insured or applying for the same amount.
- The child's immediate family should have favorable financial circumstances
- All children of a given class are insured similarly for example, if a grandparent is purchasing the insurance for a grandchild, all healthy grandchildren must have similar coverage or current applications.
- Special consideration may be given when a child has significant assets of his or her own and financial documentation is available to Woman's Life for review.

The financial circumstances of grandparents, and the ability of the grandparents to pay premiums, will not allow an amount of insurance to be issued that is not justified under Society guidelines.

GUARDIANSHIP AND CUSTODY ARRANGEMENTS

If the applicant signing the application for a junior is not a parent, a parent must also sign the application. However, if the applicant has been granted legal guardianship of the person and estate of the minor, a parent's signature may not be required.

In any situation of a child, or adult, in which guardianship, conservatorship or other custody has been granted, copies of the legal documents must be forwarded to Home Office for legal review prior to writing an application. Upon completion of this review, the agent will be notified if/how the application may be written. Foster children are wards of the state and may not be written until appropriate custody is granted.

BENEFICIARIES

Valid beneficiary designations

- Meet the conditions of insurable interest and acceptability to Woman's Life
- Provide that proceeds of a certificate benefit the insured or the insured's family or dependents
- Include persons with marriage, kinship, or a documented acceptable financial relationship to the proposed insured
- May be charitable organizations with the name of the governing body of the organization, such as a board of trustees or board of directors, clearly stated
- May include some limited business entities
- May be a legitimate trust
- Include full correct names, addresses, and specify the relationships involved

OWNERSHIP OF THE LIFE INSURANCE CERTIFICATE

Ownership rights of adult certificates are held by the insured unless the certificate is assigned after issue. Application ICC17 A1-17 accommodates a third-party owner.

Unless application is made by third-party owner, the junior member owns the junior certificate; however, the certificate is controlled by the signing parent unless control is transferred by the signing parent. Full control of a junior certificate vests in the insured at age 21, or at age 15 in New York. Prior to the insured's age 16, a junior policy may not be assigned.

Assignment and Transfer of Control forms are available from the Member Service Department. *Third-party owners and* assignees are held to the same standards of insurable interest as beneficiaries.

STRANGER ORIGINATED LIFE INSURANCE AND ANNUITIES

Woman's Life will not participate in STOLI and STOA transactions and follows all regulations regarding the identification of such sales and required reporting to state insurance departments. A special questionnaire may be required either by a particular state or at underwriter discretion. Any state-required form will be noted on the application checklist.

BUSINESS INSURANCE

All applications for business insurance should be made on the ICC17 A1-17. Agent cover letters are recommended for all business coverage, and a Business Financial Supplement is required. Additional financial underwriting information beyond the supplement may also be required.

- Buy-sell coverage may be written; a copy of the buy-sell agreement is required.
- Deferred compensation coverage may be written the cover letter must document that the insurance will informally fund an equivalent amount of deferred compensation that will flow to the insured or the insured's beneficiaries. As an alternative, the deferred compensation agreement may be sent for our review.
- Key-person coverage is limited to family members of family-owned companies.
 Provide valid documentation from an officer of the company naming all the owners, their relationships to the proposed insured, and their respective ownership shares in the business.

FINANCIAL UNDERWRITING

Most life insurance applications do not raise questions in terms of amounts of life insurance applied for and in force that are reasonable and suitable to an applicant's personal or business needs. Reasonableness is in respect to occupation, income or total compensation, source of income, net worth, total line of insurance in force, the stated purpose of the insurance, recent insurance activity, age and health of the individual, and other factors specific to the case at hand.

Personal insurance applications equal to and exceeding \$750,000 need to be accompanied by an agent cover letter and <u>Form W-185 Personal Financial Supplement</u>. Additional financial information beyond the Supplement may be required in some cases.

AVIATION, SPORTS AND OCCUPATIONS GUIDELINES

Aviation

An aviation questionnaire (Form W-170) is required for any proposed insured who has an active private pilot's license of any type; or who has flown as a student pilot, pilot, crew member, or as a passenger in non-scheduled flights, within the last three years; or who has any intention of becoming a pilot.

All aviation ratings are flat extra ratings. An aviation exclusion endorsement is not available, so pilots and crew who do not qualify for standard or rated coverage will be declined.

Benefits Available

- Waiver of Premium, Waiver of Monthly Deduction (UL) and Single Premium Paid-Up Additions Rider - only for those who qualify at standard rates
- Accidental Death Benefit available to some pilots and crew; benefit exclusions in the certificate rider apply

Classes and Benefits Not Available

- Preferred underwriting classes
- Guaranteed Insurability Option

Generally Standard

- Pilots and crew of major U.S. passenger and freight airlines, scheduled or nonscheduled
- Pilots with advanced flight credentials, and crew, of company-owned aircraft maintained at standards comparable to scheduled airlines and flying within the United States or Canada

Other personal aviation will be considered in establishing the final underwriting class, even for the above classes of commercial pilots.

Other commercial pilots and crew members are rated depending upon the type of license and specific business. Military pilots and crew are classified under separate military and aviation guidelines.

Aviation ratings vary based on a combination of age, total solo hours of experience, and annual flying hours. Other factors that may be considered in the overall decision include previous flying accidents, driving record, other sports or risk-taking behavior, personal habits and health. Private pilots under 26 years old generally do not qualify at standard rates. A Woman's Life underwriter will be happy to provide a preliminary rating estimate for any prospect posing an aviation risk.

Aviation-related Sports

This category is comprised of many sports including:

- · Competitive flying and record attempts
- Ballooning
- Gliding
- Homebuilt aircraft
- Ultra-light aircraft
- Skydiving

Most of these sports are rated and require the use of special questionnaires. Preferred classifications, Accidental Death, Waiver of Premium, Waiver of Monthly Deduction, Single Premium Paid-Up Additions Rider and Guaranteed Insurability Option are not available. Check with a Woman's Life underwriter for further information regarding underwriting classifications for specific applicants.

Other Hazardous Sports and Avocations

Sports and avocations that may require ratings or other adverse underwriting action include, but are not limited to, vehicle or boat racing, mountaineering and climbing, caving, scuba diving, cliff diving, white-water activities and extreme sports. Completion of special questionnaires will be necessary, and these will be provided by an underwriter on an as-needed basis.

Hazardous Occupations

Occupations and industries that may require ratings or other adverse underwriting actions include, but are not limited to, construction, ordnance and explosives handling, maritime, logging, mining, manufacturing, police/security, and professional sports.

APPLICATIONS ON MILITARY PERSONNEL AND FAMILY MEMBERS

Refer to the *Important Regulation* section located in this Guide or on the Agent Web for information regarding solicitation of military applicants. Read this information or contact the Woman's Life Sales Department for compliance information **prior to solicitation** of an application from any person in the active service of the United States military or any spouse or child of such a person. Provided that compliance requirements are met, the following underwriting information pertains to applications on military personnel.

Applicants on Active Duty

Forms <u>W-169 Military Supplement</u> and <u>W-169 DISC Disclosure</u> should be completed for any applicant with a military connection.

No amount limits for pay grades/ranks are specified because each applicant presents a different set of circumstances. Financial underwriting requires that the amount of insurance requested should be reasonable in view of age, rank, family status, existing insurance amounts and military duty assignments. Reservists on active duty are classified in the same manner as other military personnel.

Classes and Benefits Not Available

- Preferred classifications
- Guaranteed Insurability Option
- Waiver of Premium benefits
- Waiver of Monthly Deduction benefits (UL)

Benefits Available

- Single Premium Paid-Up Additions Rider is available with certificates issued on a standard basis. The net amount at risk of the rider will be added to the stated face amount of coverage to calculate the total amount of coverage.
- Accidental Death Benefit may be considered at standard rates unless special duty hazards require a rating or removal of benefits. ADB rider coverage is subject to the exclusions stated in the terms of the certificate rider.

Special Forces personnel in the following categories will **not** be considered

- Army Rangers
- Delta Force
- U.S. Army Special Forces
- Navy SEALS or Navy Special Warfare Development Group
- Air Force Special Forces

Special note: Make inquiry of the Sales Department before proposing any life insurance for paratroopers, other special forces not specified above, or those whose duties include aquanautics; astronautics; chemical and biological weaponry; explosives, munitions and ordnance handling; fire departments; nuclear energy; and aviation. These duties have guidelines related to specific occupational and aviation exposure.

Reservists and Military Age Applicants; U.S. Merchant Marine

Reservists on active duty will be classified as mentioned above. There are no special limitations for inactive reservists and military-age applicants unless active duty service applies or is imminent. Maritime personnel may require an occupational rating.

Special Note: The Society reserves the right to alter the military limits at any time, without advanced notice, when changing world conditions may result in increased military exposure.

PRELIMINARY UNDERWRITING QUOTES

Please contact your FSR in the Sales Department for telephone inquiries on prospective applicants when there are questions about underwriting outcomes for medical risks, for hazardous sports participants, prospects in hazardous occupations, or for those with other background such as substance abuse, poor driving record or criminal record.

For prospects presenting medical risks, the following details are helpful at the time of the call

- Age
- Gender
- Employment status

- Height and weight
- Tobacco status
- Amount and plan of insurance wanted
- Specific impairment or risk presented
- Medications
- Surgical and treatment history
- Details of complications and the final outcome of treatment

For all other special risks, be prepared with as many details as possible.

The information provided will be reviewed by an underwriter and a determination will be made as to whether an application can be taken and if so, a tentative quote.

In some cases, an underwriter will recommend a trial or COD application depending on the circumstances.

TRIAL APPLICATIONS

Trial applications (informal applications) are recommended when a representative has knowledge of the proposed insured that affects the risk based on health, personal habits, background, or when specifically requested by a Woman's Life underwriter. Trial applications are required when an applicant has been previously declined by Woman's Life or another company.

Because of the likelihood of ratings or other adverse underwriting action, trial applications are required for applicants who have medical history of

- Stroke
- Angina or chest pain
- Myocardial infarction (heart attack)
- Coronary bypass, angioplasty (balloon, stent procedure) or other surgical procedure for a heart condition
- Chronic bronchitis
- Emphysema
- Internal cancer or melanoma
- Chemical dependency within 5 years
- Juvenile diabetes
- Kidney disease other than stones
- Liver disease of any kind

To submit a Trial Application

- Use application ICC17 A1-17 marked clearly at the top as a Trial Application.
- Complete **all** the application questions with special attention to full and detailed information pertinent to the special risk situation.
- Include full names, locations, and phone numbers of doctors, clinics, and hospitals.
- Include signed authorizations; both the *Authorization to Obtain and Disclose Information* and the HIPAA authorization are required.
- Give the Fair Credit Reporting Act and MIB notices to the Proposed Insured.
- Do not submit money. Any premium sent in error will be returned to the Proposed Insured.

Do not order any of the usual underwriting requirements.

The Woman's Life underwriter will order only the requirements necessary to make an estimation of the underwriting action. Usually the requirements will consist of medical records. The underwriter will contact the representative as soon as possible to provide a potential action. If an offer is thought to be possible, the representative will be asked to submit a formal application and any requirements outlined by the underwriter to make a final offer. All formal application rules and procedures apply when the formal application is submitted.

If you have any questions about when or how to submit a Trial Application, contact your FSR in the Sales Department. In lieu of a trial application, a formal COD application may be submitted. Include a cover letter with the application to notify the underwriter that no requirements are being ordered by you.

PENDING PERIOD, WITHDRAWN, AND INCOMPLETE APPLICATIONS

The pending period for an application submitted with money is 60 days according to the terms of the Conditional Receipt. COD applications may be held pending for 75 days. If there are unmet underwriting requirements at the expiry of the pending period, the file will be closed as "incomplete" and any money will be returned directly to the proposed insured with a letter of explanation. A copy of the letter will be sent to you.

It is the agent's responsibility to complete requirements and follow-up on pending business. Pending requirements and pending or issued status may be viewed on the Agent Web / eStatement Center / Pending Business Report. This information is updated at the close of business each Friday, so a new status is available the first business day of each week.

If an applicant makes a direct request to us to withdraw the application, we will notify you and wait for a reasonable period to allow for conservation efforts. You may notify us if a case should be withdrawn. Refunds on withdrawn cases are sent directly to the proposed insured with a copy of the letter to the agent.

REJECTIONS

If it is determined that an application cannot be approved, you will be notified by Home Office. If you are not available, we will leave a voice mail and/or send email. Rejections must be processed as soon as possible after the decision, therefore, a letter of explanation, any state-required adverse underwriting notices and a refund, if applicable, is sent directly to the proposed insured with a copy of the rejection letter to the agent.

RATED CASES, CLASS CHANGES, AND REMOVAL OF BENEFITS

You will be advised of a rating by telephone or email unless it is noted that a rating was anticipated at about the same level or was previously discussed. A class change from preferred to another class will also be communicated. We may not advise if the only change affects benefit riders such as Accidental Death Benefit or Waiver of Premium Benefit. Any change to coverage or benefits is outlined in the delivery instructions that accompany the policy.

RECONSIDERATION OF RATINGS

Reconsideration of a rating is possible only for certificates issued under current CSO mortality tables. Please verify with the Sales Department if your client qualifies. When a rated certificate is issued, the underwriter will provide information in the certificate delivery instructions regarding reconsideration if it is possible to make such a prediction.

Reconsideration of a rating will not be performed prior to the first certificate anniversary. Before requesting reconsideration, the agent should determine, to the best of his or her ability, that the insured has had a genuine improvement in condition and/or has met the stated requirements for reconsideration.

Prior consultation with the Woman's Life underwriter is necessary to request preferred consideration for any member who was previously issued a certificate in a rated premium class.

RECLASSIFICATION OF RISKS FROM STANDARD TO PREFERRED CLASSES

Conversions

A member who is converting from a term plan may request preferred consideration when applying for conversion, but this request is then subject to insurability and face amount minimums. A member must undergo the stated underwriting requirements for preferred and meet all the criteria. If the underwriting requirements are not completed or the member does not meet the preferred criteria, the conversion will proceed at the same rate class at which the original plan was issued.

A member who previously converted at a standard rate class may request one consideration for preferred, providing that the certificate was issued under the current CSO mortality tables and meets the qualifying amount minimum. Full evidence of insurability for preferred and fulfillment of all the preferred criteria will be required. If the preferred criteria are not met, the certificate will remain in the standard rate class.

Reconsideration

Any member who was previously considered for preferred rate classes and did not qualify may have one reconsideration opportunity to a preferred rate class, providing that their certificate was issued under the current CSO mortality tables. Whenever possible it should be determined by the agent, with the assistance of a Woman's Life underwriter, that the reason for the previous disqualification is rectifiable and that there has been improvement in the disqualifying criteria. Any member being reconsidered must complete all the underwriting requirements and meet all the preferred criteria, not just the criteria that previously disqualified the member.

REINSURANCE

Woman's Life has automatic reinsurance available for amounts more than Woman's Life retention, and facultative reinsurance is available for decisions on large amounts and impaired risks. Retention limits and automatic binding limits vary by insurance plan. Submissions for facultative reinsurance underwriting are generally limited to cases of at least \$250,000 face amount.

RELEASE OF MEDICAL INFORMATION

In the event of an adverse underwriting decision based on medical information, the underwriter will endeavor to assist an agent to understand the general reasons for the decision; however, confidential medical or personal information will not be released to an agent or agency.

The Society's usual information practice specifies release of the medical reasons to the applicant's doctor upon receipt of a signed and dated request from the applicant. The request must authorize the Society to send the information to a specific doctor and provide the full name and address of the doctor. If state regulations stipulate that disclosure must be made directly to the applicant, we still require a signed and dated request. The correspondence may be mailed or faxed to the Director of Member Services. No information will be released over the phone in any case.

ELECTRONIC APPLICATIONS

Electronic applications will be accepted on all plans. We encourage you to upload the application and requirements to the <u>AgentWeb</u> through the Secure File Exchange. The alternative is emailing a scanned copy (preferably secured) to your Field Service Representative. You may also fax them to the Sales Department at 810-985-6881. We will still accept original applications if you prefer to mail them, however; you are not required to submit the original.

You are required to maintain the original application until the certificate is issued and delivered as there may be situations that require the original to be submitted such as an electronic version that is not legible or has formatting problems. The application is part of the certificate so it's important to provide a professional looking document. After delivery requirements are submitted to Woman's Life you can choose to maintain the original in your own file or shred if that is your preference.

ISSUE DATES – LIFE INSURANCE

For ICC17 A1-17 applications with money that are approved as applied for, the issue date will be the later of the date of the application or medical exam/lab test.

For COD applications and certificates approved with a change in underwriting class, the certificate will be dated five business days from the date of underwriting approval.

Exceptions include

- Saving age
- Honoring a specific date request
- Matching the date of bank drafts (because bank draft payments cannot be made in arrears)
- Matching other family members on a common bank draft plan
- Group bills

Requests for special issue dates and/or bank draft dates should be indicated as a special request on the application or in a memo.

ISSUE DATES – ANNUITIES

The issue date for an annuity issued with funds submitted with application will be the application date providing that the application and premium deposit is received at Home Office within five business days of the application date. If the received date exceeds five business days, the issue date will be the date received.

The issue date for an annuity certificate issued with transfer or rollover funds will be the date the money is received at Home Office.

REISSUES

If a certificate cannot be delivered as issued, or if any error is found, the certificate should be returned to the Home Office along with specific instructions for changes or corrections. Changes may be subject to underwriting consideration, new evidence of insurability or premium modifications. Do not submit premium on certificates returned to Home Office for reissue. We do not routinely reissue certificates for issue date changes.

DELIVERY GUIDELINES AND COMMISSIONS

Commission Crediting

- Woman's Life credits commissions at the time of issue when life insurance certificates have sufficient modal premiums and are issued without underwriting class or benefit changes.
- Life certificates issued on a COD basis, with only partial premium, or with underwriting changes are credited commission when all delivery requirements are received in Home Office and premium is applied.
- Commissions for Single Premium Whole Life certificates are credited when all delivery requirements, including premium, are received in Home Office and premium is applied.
- Commissions for annuity contracts are credited when the certificate is issued.

Delivery Instructions

Each life insurance and annuity certificate will include delivery instructions written specifically for that certificate. It is very important to read the delivery instructions carefully. The delivery instructions guide the agent through the forms, signatures, and premium collection. There may be additional information from the underwriter pertaining to the reasons for a rating, exclusion, or benefit change; when a case might be reconsidered; and additional letters that need to be delivered with the contract. Other helpful or explanatory information will also be included.

Definitions of Delivery Requirements

Some delivery requirements are forms that must be signed and returned to the Home Office. In no case should a certificate be released to an applicant who has not signed all the delivery requirements or has not submitted full premium.

Delivery Receipt – Woman's Life requires delivery receipts for all certificates. The form of the receipt may vary by state. All receipts establish the date of delivery and acceptance that begins the applicable free-look period.

Amendment – this form is very important because it becomes part of the legal contract between the insured and Woman's Life. Amendments are required for underwriting class changes, additions or deletions of benefits and riders, exclusions, corrections and clarifications of the application. Amendments must be signed as written and not altered in any way. If information in the amendment is not correct the certificate should be returned to the Home Office with an explanation.

Illustration – an illustration must be signed on delivery when an illustration was not used during the sale or when changes were made to coverage, benefits, or premium.

W-9 – Woman's Life is required by the IRS to have a valid Social Security number for every applicant and to comply with IRS rules that require specific wording above the applicant's signature. Therefore, a W-9 will be required on delivery if one was not sent with the application.

A-10 – this form may be required at the discretion of the underwriter on COD applications, rated certificates, reissues, or for applications that are dated 90 or more days prior to a final underwriting decision. Completing and signing the form validates that the proposed insured is still in good health at the time of delivery. If any questions on the form are answered "yes" the details should be explained on the form and the certificate returned to the Home Office for consideration.

Cost Disclosure Receipt- this form is used for traditional IRA and ROTH annuities. The form number and wording vary by state.

Premium - The amount of premium to be collected will be clearly stated in the delivery instructions. Full premium collection is a prerequisite for delivery of the certificate. In no case should the certificate be released to the applicant unless full modal premium is collected and remitted to the Home Office.

Delivery Period - Woman's Life expects that certificates will be delivered, and all required forms and premium received at Home Office within a reasonable time. The maximum delivery period is 45 days from the mailing date. Woman's Life will send written reminders and/or call to follow-up on delivery requirements. Cases that are COD or have premium shortages may be cancelled after 45 days. Cases that are considered premium paying will be referred to the Sales and Marketing Department after 45 days if it becomes necessary to contact the member directly. If a premium paying case is cancelled, commissions will be reversed. An agent who establishes a poor delivery record may lose the privilege of being paid at issue.

Signatures – Each adult proposed insured must sign his/her delivery requirements. We do not accept one spouse signing for the other, or a parent signing for an adult child. (Note that a child is considered an adult at age 15 for purposes of contracting for insurance.)

If the proposed insured is too young to contract as an adult, the parent who signed the application must sign the delivery requirements. This is the case even if a grandparent is the applicant. The form will indicate who is to sign.

If it is known at the time of sale that the proposed insured will not be available at the time of delivery, the proposed insured may submit a signed and dated document giving the right of acceptance to another person. A full explanation should be attached to the application.

Other Delivery Considerations

A certificate must be delivered in the same state as it was written.

If a certificate cannot be delivered as issued, it should be returned to the Home Office along with specific instructions, either for cancellation or for changes. When a certificate is cancelled, a letter and refund of premium deposit will be mailed to the proposed insured or the parent of a child who was proposed for coverage. If changes are requested, such changes may be subject to underwriting consideration. (See *Reissues*) Do not submit premium on reissues.

Premium will not be applied on rated cases until all delivery requirements have been received and/or on certificates that require the completion of Form A-10.

At the time of delivery, it is very important to note that health and non-medical risk factors must not have changed from those stated at the time of the application. If there have been changes, return the certificate to the Home Office with a full explanation.

INTERNAL AND EXTERNAL 1035 EXCHANGES

A valid 1035 exchange allows a complete transfer of cash values and dividends from an existing policy to a new policy without causing a taxable event at the time of the exchange. The applicant is responsible for tax treatment of the transaction and should consult a personal tax advisor for tax questions and information.

An **internal** 1035 exchange is made from one or more Woman's Life certificates to a new Woman's Life certificate. An **external** 1035 exchange is made from one or more policies from another company to a new Woman's Life certificate. A 1035 exchange from life insurance to life insurance can take place only at the time a new certificate is issued; it cannot be processed to increase an existing certificate. Therefore, 1035 exchange forms are only accepted with new applications. A 1035 exchange from annuity can be processed into an existing annuity certificate, either partial or full exchange.

Woman's Life will process 1035 exchanges from

- Life insurance to an Intuitions Whole Life Insurance plan that includes a Single Premium Paid-Up Additions Rider
- Life insurance to a Single Premium Whole Life certificate
- Life insurance to a non-qualified annuity
- An endowment to a non-qualified annuity
- Non-qualified annuity to non-qualified annuity

A non-qualified annuity is an annuity that is **not** endorsed or amended to be either a qualified plan such as a Traditional or Roth IRA. The rules for the transfer of assets to and from qualified plans and IRA's are not controlled by Internal Revenue Code Section 1035.

Internal Exchange Forms

Use Form I-1035i for

- An internal exchange of a life insurance certificate to a Single Premium Whole Life plan; to an Intuitions Whole Life or 20 Payment Life plan with a Single Premium Paid-Up Additions Rider; or to a non-qualified annuity
- An internal exchange of an endowment to a non-qualified annuity
- An internal exchange of a non-qualified annuity to a different non-qualified annuity

External Exchange Forms

Use form A-1035 E WL-PUA for an external exchange of life insurance to an Intuitions Whole Life plan with a Single Premium Paid-Up Additions Rider or Intuitions 20 Year Payment Whole Life plan with Single Premium Paid-Up Additions Rider. Refer to the Instruction Form A-1035 E WL-PUA INST for helpful information.

Use form A-1035 E for:

An external exchange of life insurance to a Single Premium Whole Life plan

 An external exchange of life insurance, an endowment, or a non-qualified annuity to a Woman's Life non-qualified annuity

Use form A-1035 E (ExistCert) for:

An external exchange of annuity to an existing Woman's Life annuity

Guidelines for 1035 Exchanges

- Before beginning an internal or external 1035 exchange transaction for a client be sure to read and fully understand the information in the 1035 exchange forms and instruction forms.
- The insured/annuitant and owner under the new certificate must be the same as under the original policy, including any third-party owner.
- The 1035 exchange form for life insurance should be signed at the time of application.
- Replacement Forms must be included with the application if required by the state in which the application is signed.
- Send the policies to be exchanged plus any rider pages, endorsements, or releases with the application.
- In the event one or more policies for an exchange have been lost, check the "Lost Policy" statement if provided on the form, or write "LOST" on the form next to the certificate number for each policy to be exchanged.
- The timing of the Woman's Life request for external 1035 monies varies by life insurance plan and whether the Society issues a life insurance certificate as applied for. Refer to the applicable exchange forms for these terms.
- Prompt delivery of 1035 exchange certificates is very important. This ensures that
 the cash surrender value will be requested from the surrendering company as
 quickly as possible according to Woman's Life's exchange practices.
- When Woman's Life issues a new life insurance certificate as the result of an external exchange, a special receipt (Form A-1035 R or Form A-1035 RCD) will be included with the policy for signature.
- When 1035 monies will be the initial deposit for a new non-qualified annuity, Woman's Life will request the surrender value of the other company's policy upon receipt of the application and appropriate 1035 exchange form. The new annuity certificate will be issued when the 1035 exchange monies are received.

SETTLEMENT OPTIONS

Certificate proceeds as the result of surrender, maturity or death are payable in a lump sum unless a settlement option is requested. The maturity date for an annuity is selected

by the annuitant when the application is completed. Annuitants are informed at maturity of available options.

Settlement options

- Are available on both life insurance and annuity certificates
- Require at least \$2,000 of proceeds
- Any of the Options below may be elected or any alternate option may be requested
- Requests for an alternate option must be approved by the Society

Options include

- Option 1 Interest Income Proceeds are left on deposit at interest
 - > The interest rate must be at least as large as that stated in the certificate
 - The Society may approve interest rates in excess of the guaranteed contractual rate
 - Amounts left on deposit are payable upon request
- **Option 2** *Income for a Fixed Period* The Society will pay an income for a fixed number of years
 - ➤ The period may not exceed 30 years without Society approval
 - No payments will be made after the period selected
 - Payments in excess of those that would be purchased by monthly income factors in the certificate may be made
- Option 3 Life Income with Guaranteed Period We will pay an income for the lifetime of the payee. A period certain of 10, 15 or 20 years may be elected.
 - Payments will be made while the payee is alive
 - Payments in excess of those that would be purchased by monthly income factors in the certificate may be made
 - ➤ If the payee dies within the guaranteed period, the present value of payments for the remainder of the guaranteed period will be paid in a lump sum to the beneficiary
 - Surrender charges on an annuity certificate selecting this option will be waived provided that selection of the option is made after the first certificate year
 - Once this option is selected and payments have begun the remaining proceeds are not available through surrender of the certificate
- **Option 4** *Income of Fixed Amount* We will pay an income of a fixed amount. The income is subject to these conditions:
 - > The payments will be continued until proceeds with appropriate interest are exhausted
 - Yearly income must be at least 4% of the proceeds
 - ➤ The Society may approve interest rates in excess of the guaranteed contractual rate to be used in the accumulation of the unpaid proceeds.

PREMIUM OFFSET

Premium offset refers to the use of non-guaranteed values (dividends and interest) to pay contract premiums and reduce out-of-pocket premium outlay. It is only available on Intuitions® Whole Life Insurance certificates.

Generally, premiums will be paid in cash for many years, with that number being an estimate based on various factors, including the current dividend rate. During this period, dividends are accumulated at interest. After this period, both current and accumulated dividends are used to pay the annual premium. If the annual premium exceeds the current dividend, a portion of the accumulated dividends is withdrawn to pay the balance of the premium. If the current dividend exceeds the annual premium, the excess will accumulate at interest.

Since dividends and the current interest rate on accumulated dividends are not guaranteed, there can be no guarantee that the premium offset method will pay premiums on a policy for any definite time or until maturity of the policy or death of the insured. Any illustration that projects the premium offset results is only an illustration of possible results. An illustration is not a guarantee or estimate of future dividends, interest on accumulated dividends, or future results of using dividends. Illustrated results will not be achieved if there are no dividends, if dividends or the current interest rate on accumulated dividends are lowered, or if dividends are withdrawn or paid in cash.

Dividends accumulated at interest or used to purchase paid-up additional insurance are paid to the beneficiary as part of the death proceeds and can add significant value to the policy. Since using dividends to pay premiums reduces this value, careful consideration should be given before making use of the premium offset method.

How to calculate Discounted Advance Premium

To determine the discounted advance premium (premium payments made in advance through the offset year):

- Run an illustration using annual mode, dividends to accumulate at interest, and premium offset to determine offset year.
- Refer to Premium Offset section to identify the number of years premiums must be paid based on current assumptions.
- Refer to the *Discounted Premiums Deposit Fund Factors* chart on the following page. Multiply the discounted value factor by the annual premium. This is the total premium that you may collect with the application.

Discounted Table For Advance Payments*						
Number of	Discounted	Number of	Discounted	Number of	Discounted	
Annual	Value	Annual	Value	Annual	Value	
Payments		Payments		Payments		
1	1.00000	36	26.60582	71	41.54251	
2	1.98039	37	27.14933	72	41.86529	
3	2.94156	38	27.68481	73	42.18329	
4	3.88388	39	28.21238	74	42.49660	
5	4.80773	40	28.73215	75	42.80527	
6	5.71346	41	29.24424	76	43.10938	
7	6.60143	42	29.74876	77	43.40900	
8	7.47199	43	30.24583	78	43.70419	
9	8.32548	44	30.73555	79	43.99502	
10	9.16224	45	31.21803	80	44.28155	
11	9.98259	46	31.69338	81	44.56385	
12	10.78685	47	32.16171	82	44.84197	
13	11.57534	48	32.62312	83	45.11599	
14	12.34837	49	33.07771	84	45.38595	
15	13.10625	50	33.52558	85	45.65192	
16	13.84926	51	33.96683	86	45.91397	
17	14.58130	52	34.40156	87	46.17214	
18	15.30251	53	34.82987	88	46.42650	
19	16.01307	54	35.25184	89	46.67709	
20	16.71313	55	35.66758	90	46.92399	
21	17.40284	56	36.07718	91	47.16723	
22	18.08236	57	36.48072	92	47.40688	
23	18.75183	58	36.87830	93	47.64299	
24	19.41142	59	37.27000	94	47.87561	
25	20.06125	60	37.65592	95	48.10479	
26	20.70148	61	38.03613	96	48.33059	
27	21.33225	62	38.41072	97	48.55305	
28	21.95370	63	38.77978	98	48.77222	
29	22.56596	64	39.14338	99	48.98815	
30	23.16918	65	39.50161	100	49.20089	
31	23.76348	66	39.85455	101	49.41049	
32	24.34900	67	40.20227	102	49.61698	
33	24.92587	68	40.54485	103	49.82043	
34	25.49421	69	40.88237	104	50.02087	
35	26.05415	70	41.21490	105	50.21835	
				106	50.41291	
				107	50.60460	
				108	50.79345	
				109	50.97951	
				110	51.16282	
				111	51.34342	
				112 113	51.52136	
				114	51.69666	
				115	51.86937 52.03053	
				116	52.03953 52.20718	
				117		
				118	52.37235 52.53507	
				119	52.53507 52.69540	
				120	52.85335	
* Calculations are h	ased upon current in	nterest rates and are	not guaranteed.	120	JZ.03333	

* Calculations are based upon current interest rates and are not guaranteed. 7/2021 Rates