

SECURE-Mark

Product Portfolio

Producer's Guide

**GPM
LIFE**

Government Personnel Mutual
Life Insurance Company

For Agent Use Only

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New Business Flow

Important Items to Remember

- Age last birthday.
- Be certain to have Proposed Insured(s) sign the application.
- If the proposed owner is different than the Proposed Insured, the proposed owner must also sign the application.
- The agent must witness all signatures and photo IDs **in person**.
- Please print the Agent name, as well as sign the application. Print the Agent number clearly.
- Any changes, cross outs, etc. on the application must be initialed by the Insured/Applicant. No correction whiteout will be accepted.
- All applications must include a phone number and physical address for the Proposed Insured. Post office boxes will not be accepted.
- Life products are not to be written on individuals in rest homes, nursing homes or hospitals.
- No issue dates beyond 30 days of the date of the application will be accepted.
- Indicate the mode of payment by checking the appropriate box. We will draft for the initial monthly premium, which eliminates the need to submit money with the application.
- For Semi-Annual or Annual, include a check payable to GPM Life for the initial premium. **No agent or agency checks will be accepted.** No cash will be accepted. Money orders must have the "applicant's" name on it. **No money orders covering multiple unrelated applicants will be accepted.** We will accept one money order covering all members of a single family. Any/all money orders must be accompanied by a cash receipt (form # M09.30) signed by the applicant stating why a check was not sent.
- Agent Access is available 24/7/365 for pending status.
- Applications including CIR must be accompanied by a completed Part 2 - Child Insurance Rider Supplemental Application form ICC13 SM5CIRA or state specific version.

Completing the Application

A. Insured

- Be sure to complete all questions. Please print legibly to assure prompt turn-around time.

B. The Owner

- If the proposed owner is an individual other than the proposed insured, complete #17.

C. Beneficiary

- Be sure to complete #16.

D. Plan of Insurance

- It is critical to indicate accurately the plan being requested (#11), face amount (#12), and modal premium (#13 and #14) to avoid time delays and possible amendments.
- If selecting monthly electronic funds transfer (EFT), be sure to include a voided check and a signed authorization to honor withdrawals (form # 02.21 CP). We can draft premiums from a savings account (use form 02.15 EFT Supplement). The draft dates available are the 1st, 2nd, 3rd, 4th, 5th, 10th, 15th, 20th and 25th. The draft date must coincide with the policy date.

E. Riders

- **Accidental Death Benefit (ADB)** Form # Series ICC10 590 ADB10 Available only with SECURE-Mark SIWL (Level Benefit). For an additional premium a benefit equal to no more than the base policy may be paid in the event of the insured's accidental death. There are additional death benefits if accidental death occurs while the insured was riding as a fare-paying passenger on a public conveyance, while wearing a seat belt or riding in a seat protected by an air bag.
- **Child Insurance Rider (CIR)** Form # Series ICC10 59P CIR10 Available only with SECURE-Mark SIWL (Level Benefit)
Specifications
 - Issue Age Range: 15 days through age 17.
 - All Proposed Insured Children must reside in the Primary Proposed Insured's home.
 - \$5,000 face amount per child is the only insurance amount available.

Requirements

- Insurable interest rules available as a rider only on SIWL, not GDB or MBWL
- Parent or grandparent's base policy of at least \$5,000 face amount or more.
- Minimum policy face amount for insureds aged 50 to 85 is \$5,000
- Foster parents may not purchase insurance on foster children.
- Submit the completed Part 2 - Child Insurance Rider Supplemental Application with Part 1.

Conversion of the Child Insurance Rider:

Provided the Primary Proposed Insured is alive, the CIR rider is convertible at the rider anniversary nearest each child's age 25 without evidence to a \$25,000 simplified issue whole life plan with level death benefits offered by GPM Life on the date of the new policy. No other conversion privileges are available. (Note: There is no paid up death benefit upon the death of the Primary Proposed Insured. When the Primary Proposed Insured dies, all riders are terminated without conversion privileges.)

Answer the health questions

IT IS MANDATORY THAT THE PRIMARY PROPOSED INSURED ANSWER ALL THE HEALTH QUESTIONS.

- Answer #21-27. If any question is answered "Yes", do not submit the application. The Primary Proposed Insured is not eligible for coverage.
 - A terminal illness is defined by GPM Life as any illness that a medical practitioner has determined is terminal or would likely cause death in the next 12 months.
 - Home health care is defined as any care given to an individual which is medically prescribed, such as to help with medications or activities of daily living (ADLs) by any individual, skilled or unskilled, family or professional.
- If any answer to #28-30 is "Yes", the Primary Proposed Insured may be eligible for Modified Benefit Whole Life, if available.
- If any answer to #31-35 is "Yes", the Primary Proposed Insured may be eligible for Plan GDB.
 - No more than 20% of your total new business can be issued as Graded Death Benefit or Modified Benefit Whole Life, if available.
- Answers #21-35. If all questions are answered "No", the proposed insured may be eligible for SIWL (see rate card). If any question is answered "Yes", the Proposed Insured will be ineligible for SIWL.

Requirements

- Completed application ICC13 SM513 or state specific version.
- A completed HIPAA authorization form.
- Agent must give the Receipt for Payment to the applicant at the time the application is taken if the initial premium is paid. The receipt for payment does not provide insurance.
- Payment with the application - For monthly modes, we can draft for the initial premium. A completed 02.21 CP form, voided check, or a completed 02.15 EFT Supplement form must be submitted. For Semi-Annual or Annual, submit a full modal premium with the application. Submit only your client's currently dated check made payable to GPM Life. No COD's accepted.
- The appropriate state replacement form, if required.
- **All applications should be mailed to: GPM Life** **OR** **Faxed to:**
PO Box 659567 **(888) 701-3869**
San Antonio, TX, 78265-9567

Tobacco Use

It is important to represent the insured's use of tobacco accurately. Misrepresentation of tobacco use could result in a denial of the death benefit.

Insurable Interest

In order for a life insurance contract to be valid, the applicant/owner must have an insurable interest in the life of the Proposed Insured when the policy is issued. The beneficiary must also have an insurable interest in the life of the Proposed Insured. A person has an insurable interest in the life of the insured if very closely related by blood or law (creating love and affection) or has a lawful and substantial economic interest in having the life of the insured continue.

When no insurable interest exists, the estate of the insured should be named the beneficiary.

Insured Consent

All applications for insurance require the signature(s) of all Proposed Insured(s) ages 15 and over. The signature(s) of all Proposed Insured(s) must be witnessed in person by the agent. If a Proposed Insured has a mental or other condition that prevents him/her from understanding the application questions, or that prevents him/her from understanding that the application is for life insurance coverage, the application cannot be taken.

Replacements

Please note: Complete the replacement questions #19a&b on the front of the application, and in the Agent's Statement area on the back. Completed replacement forms must be submitted with the application. We will permit a replacement as long as the replacement is in the customer's best interest. We will not allow a replacement if the new policy would not provide the customer with either increased benefits or lower premiums for the same benefit. Details of the reasons for replacement must be shown on the state replacement form. If the applicant does not live in an NAIC Model Regulation State, the GPM Life form, Understanding Policy Replacement, number 01.56, must also be completed. State specific replacement regulations control all replacements.

Delivery Requirements

Policies will be mailed to the agent for delivery (including a policyowner delivery receipt to be signed by the policyowner) unless the agent indicates the policy is to be mailed to the policyholder. You have 30 days from the mailing date of the policy to deliver the policy and obtain any applicable delivery requirements. Do not deliver the policy if there is any change in insurability of the insured. Contact the Home Office for instructions.

- Any policy issued will not take effect until the first full premium is paid and the policy is delivered to the Owner during the lifetime of all Proposed Insureds and the statements and answers on the application continue to be true.

Amendments

The following are EXAMPLES of changes which will require amendments to be executed:

- Date of Birth different than on the application.
- Age
- Social Security Number different or left off the application, which will also require a signed IRS W-9 form. (This is an IRS requirement and cannot be waived.)
- Plan of Insurance offered is different than applied for, left off the application, or if question #36 is not completed and initialed by Proposed Insured.
- Face Amount different than applied for.
- Beneficiary different than applied for.
- Owner different than applied for.
- Any child(ren) declined for coverage.
- Any questions are left blank on the application.

Save Age

The procedure for an applicant to save age will be allowed for up to six months, if allowed by the state. Please indicate if you would like to take advantage of this option and include all additional back premiums required.

Underwriting

Underwriting Procedures

Underwriting is primarily based upon the answers to the application health questions. We will access the Medical Information Bureau (MIB) on every application and will conduct a telephone interview. Occasionally, we may also ask the agent for additional information or we may request an APS (Attending Physicians' Statement). These underwriting tools are used to help ensure a prompt and accurate underwriting decision. The underwriting department is available to help answer any questions regarding eligibility and encourages all agents to utilize them whenever there may be an area of uncertainty. The SECURE-Mark Hotline (800) 929-4766, is available for this purpose.

Medical Information Bureau, Inc.

The Medical Information Bureau (MIB) is a membership association of life insurance companies. The primary mission of the MIB is to provide an alert to its member insurance companies against omissions and fraud. This helps MIB member companies to protect their interests and leads to cost savings which can be passed on to the insurance consumer.

The authorization section on the application authorizes GPM Life to access the MIB and obtain any necessary medical records on the Proposed insureds during the underwriting process. All necessary signatures must be on the application at the time of submission. In addition, the MIB Pre-Notice attachment to the application must be given to the applicant at the time the application is written. Please note that the MIB is used as an alert. Actual underwriting decisions are not based on MIB inquiry results alone.

Personal History Interview (PHI)

The PHI is used to confirm and review the answers to questions on the application as well as to obtain additional information as needed. The information allows the underwriter to make a prompt decision.

We ask that you make each Proposed Insured aware of the fact that they will receive a call to complete a phone interview. Indicate on the app the best time to attempt calls.

PHI interviews are recorded and saved for future reference. This is critical in the event that there is ever any dispute over the manner in which the medical questions were answered on the application.

Generally, we will call the client the first business day from the date we receive the application. If your client has not received a call within 24 hours, they can call (888) 476-5433, to complete the PHI. Verify PHI completion on the internet at www.gpmagent.com.

Build Chart

Proposed Insureds with weight exceeding the corresponding height below may be eligible for Graded Death Benefit only. There are no weight maximums for GDB or MBWL.

Height	Weight	Height	Weight	Height	Weight	Height	Weight
4'8"	220	5'2"	245	5'8"	285	6'2"	333
4'9"	224	5'3"	251	5'9"	294	6'3"	341
4'10"	228	5'4"	258	5'10"	301	6'4"	349
4'11"	231	5'5"	264	5'11"	309	6'5"	357
5'0"	237	5'6"	270	6'0"	317	6'6"	365
5'1"	241	5'7"	277	6'1"	325	6'7"	373

Guidelines for Money Orders and Direct Billing Modes

In the best interest of our policyholders, agents and the Home Office, GPM Life encourages quality business. It has been shown that low persistency occurs when non-client money such as a money order, cashier's check, agency check or agent's personal check is submitted for an initial or subsequent premium payment. We also experience a lower than acceptable persistency with some direct bill premium modes.

Based upon our analysis and suggestions from our field force, we have developed the following guidelines for our Ordinary Life and Final Expense business:

1. A Direct Billing is not available for monthly or quarterly premiums.
2. Electronic Funds Transfer (EFT) is allowed from either a checking or savings account.
3. We will draft initial premiums on EFT policies, so there should be almost no need to collect cash or money orders for initial premiums.
4. When EFT is being set up for premiums from a savings account, an exception can be made for the initial premium.

A Cash Receipt Authorization (M09.30 - sample below), signed by both proposed insured and agent, must be submitted along with a bank authorization, voided deposit slip and reason why the customer's own personal check is not being used.

5. In the event an application is received which includes a payment as outlined in the initial paragraph or paragraph #4, it will not qualify for commission advances.
6. When a proposed insured is the agent, his or his spouse's extended family (including parents, siblings, children, aunts, uncles, cousins and second cousins, etc.), a business associate or other controlled Ordinary Life sale, we usually require an exam, blood profile and urine. SECURE-Mark apps usually require an APS.

Controlled or family business doesn't qualify for commission advances.

We hope these guidelines will result in more persistent business and longer lasting commission and renewal streams.

Government Personnel Mutual Life Insurance Company

P O Box 659567, San Antonio, Texas 78265-9567

www.gpmlife.com

CASH RECEIPT AUTHORIZATION

I, _____ have given, \$ _____ in cash to my agent, and have directed my agent to mail a money order or cashier's check payable to Government Personnel Mutual Life. You may call me at the phone number listed below if you have any questions. I was unable to send my personal or corporate check because:

SAMPLE

Date

Applicant's Signature

Applicant's Telephone Number

Agent Signature

NOTE TO APPLICANT / AGENT:

A check from the applicant payable to GPM Life Insurance Company is the preferred method of premium payment. Please use this receipt only in situations where the applicant is unable to write a personal or business check.

Send the original to GPM Life with the payment, retain one copy for the applicant and one for the agent.

Agent's Family Business

Personal business on an agent, the agent's extended family, the agent's partners or business associates must utilize Physical Measurements if a Tele-Underwriting application is used. Full Blood profile and urine are also required. For applications using simplified issue underwriting, medical records are required.

Personal or family business means persons related by blood or marriage, including the agent's children 18 and older (medical records will be required for younger children), step-children (and other "step" relationships of the spouse, parents, siblings, aunts, uncles, cousins, father-in-law, mother-in-law, etc.

A cover memo or application should be clearly marked when submitted to indicate the app is family, personal or controlled business.

Commissions are not advanced on personal, family or controlled business.

SECURE-Mark

Final Expense Portfolio

***Your final expenses shouldn't be your final burden or a burden to your loved ones.
You Can INSURE Them!***

As of December 2012 the cost of an average funeral and burial is around \$8,000, according to the National Funeral Directors Association. Other expenses, when added to reductions in Social Security survivor benefits, can become a burden for your family. Additionally, many people want to remember their children and grandchildren or make special contributions to schools or charities.

Policy Overviews –

1. Simplified Issue Whole Life Insurance (SIWL) Series ICC13 70H SIW13: A Level Premium, Level Death Benefit Whole Life Insurance policy with premiums payable for life.

Policy options for a 10-Pay Life and a 20-Pay Life are available.

Issue Ages: 50-85 (10 Pay Life, Lifetime); 50-70 (20 Pay Life)

Issue Amounts: Minimum: \$3,000 for issue ages 50-85
Maximum: \$35,000 for issue ages 50-80
\$10,000 for issue ages 81-85

Riders on SIWL only:

Accidental Death Benefit Rider (ADB) Series ICC10 59O ADB10: This rider pays a death benefit in addition to the base policy if death is caused by an accident, subject to exclusions. ADB is available for an additional premium per \$1,000 of policy face amount. Issue ages 50-60, benefits to insured's age 70. Additional Indemnity benefits are available if accidental death occurs while a fare paying passenger on a public conveyance or while wearing a seat belt or riding in a seat protected by an air bag.

Children's Insurance Rider (CIR) Series ICC10 59P CIR10: \$5,000 face amount per child aged 15 days to 17 years inclusive, for a premium of \$15 per child per year or \$1.32 per month per child. Available only on SIWL base policies of \$5,000 and over. Proposed Insured child must reside with Proposed Insured. All eligible children must be covered. Other restrictions may apply and vary by state. Convertible to \$25,000 at the age 25 maturity date without evidence of insurability. There is no other conversion option available.

2. Graded Death Benefit Whole Life Insurance (GDB) Series ICC13 70G GDB13: A Level Premium, Graded Death Benefit Whole Life Insurance policy. The death benefit during year one is 30% of the year three sum insured. During year two, the death benefit is 70% of the year three sum insured. In the event of accidental death during the first two years, the death benefit is the year three sum insured. There is no accidental death benefit beginning in policy year three.

Issue Ages: 50-85

Issue Amounts: Minimum: \$3,000 for issue ages 50-85
Maximum: \$25,000 for issue ages 50-80
\$10,000 for issue ages 81-85

3. Modified Benefit Whole Life Insurance (MBWL) Series ICC13 70I MBWL13:

A Level premium, graded death benefit whole life policy. The death benefit payable is a return of premium plus 10% compounded interest in the first two years and \$1,000 per unit issued, in years 3 and later. In the event of accidental death during the first two years, the death benefit is the year three sum insured. There is no accidental death benefit beginning in policy year three.

Issue Ages: 50 – 85

Issue Amounts: Minimum: \$3,000 for issue ages 50-85
Maximum: \$10,000 for issue ages 50-85

Simplified Issue Whole Life Gross Annual Premium Rates Per \$1,000 Sum Insured*						10-Pay Life Policy Gross Annual Premium Rates Per \$1,000 Sum Insured*				20-Pay Life Policy Gross Annual Premium Rates Per \$1,000 Sum Insured*			
Issue Age**	Male		Female		ADB	Male		Female		Male		Female	
	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
50	\$32.94	\$40.80	\$22.91	\$33.00	\$1.76	\$66.65	\$77.05	\$52.81	\$65.28	\$40.67	\$47.72	\$30.36	\$38.73
51	34.15	42.83	23.88	34.40	1.80	68.43	79.18	54.36	67.35	41.79	49.22	31.30	40.13
52	35.40	44.96	24.90	35.86	1.85	70.25	81.37	55.96	69.48	42.93	50.77	32.27	41.58
53	36.70	47.19	25.96	37.40	1.91	72.13	83.63	57.60	71.67	44.11	52.37	33.26	43.08
54	38.04	49.54	27.06	39.01	1.95	74.05	85.94	59.30	73.94	45.33	54.02	34.29	44.63
55	39.44	52.00	28.21	40.70	2.01	76.03	88.32	61.04	76.28	46.57	55.72	35.35	46.24
56	40.67	54.83	29.28	42.80	2.09	78.01	90.79	62.84	78.65	47.94	58.55	36.52	48.09
57	41.95	57.82	30.39	45.05	2.16	80.05	93.33	64.69	81.09	49.35	61.53	37.72	50.02
58	43.26	61.00	31.54	47.44	2.24	82.14	95.94	66.60	83.61	50.80	64.66	38.97	52.02
59	44.61	64.39	32.74	50.02	2.31	84.28	98.62	68.57	86.21	52.30	67.95	40.25	54.10
60	46.01	68.00	33.98	52.80	2.39	86.48	101.38	70.59	88.89	53.84	71.40	41.58	56.27
61	48.40	72.83	35.90	55.88		89.08	104.75	72.97	92.17	55.94	76.50	43.31	59.37
62	50.92	78.02	37.94	59.13		91.75	108.24	75.43	95.58	58.12	81.96	45.11	62.65
63	53.57	83.60	40.08	62.58		94.50	111.84	77.98	99.11	60.38	87.81	46.98	66.10
64	56.35	89.59	42.35	66.23		97.34	115.56	80.61	102.77	62.74	94.08	48.94	69.74
65	59.28	96.00	44.75	70.09		100.26	119.41	83.33	106.56	65.18	100.80	50.97	73.59
66	62.79	102.08	47.54	74.78		103.62	123.98	86.39	110.86	68.41	107.27	53.56	78.52
67	66.51	108.56	50.50	79.78		107.09	128.73	89.55	115.33	71.79	114.15	56.28	83.77
68	70.45	115.49	53.65	85.11		110.67	133.66	92.84	119.98	75.35	121.47	59.14	89.37
69	74.62	122.95	57.00	90.80		114.38	138.78	96.24	124.82	79.08	129.26	62.15	95.34
70	79.04	131.00	60.55	96.87		118.21	144.10	99.77	129.85	82.99	137.55	65.31	101.71
71	84.59	141.88	64.84	103.02		122.58	156.07	103.75	135.10				
72	90.54	153.70	69.43	109.56		127.10	169.07	107.88	140.56				
73	96.90	166.49	74.35	116.51		131.80	183.14	112.19	146.24				
74	103.71	180.25	79.62	123.91		136.66	198.28	116.66	152.15				
75	111.00	195.00	85.26	131.77		141.71	214.50	121.31	158.30				
76	119.44	211.22	89.85	134.25		147.60	232.34	124.15	160.31				
77	129.04	228.38	94.69	136.77		153.74	251.22	127.06	162.34				
78	139.45	246.75	99.79	139.35		160.13	271.43	130.04	164.40				
79	150.80	266.57	105.17	141.97		166.79	293.23	133.09	166.49				
80	154.75	269.84	110.83	144.64		173.72	296.82	136.21	168.60				
81	158.50	274.69	121.08	150.88		185.80	302.16	144.29	179.39				
82	163.94	279.43	132.89	160.50		198.71	307.37	152.85	190.87				
83	181.29	282.49	139.64	170.95		212.53	310.74	161.92	203.08				
84	200.30	286.79	147.43	189.13		227.30	315.47	171.53	216.07				
85	221.00	291.00	163.00	209.00		243.10	320.10	181.71	229.90				

Simplified Issue Whole Life CIR rates of \$15.00 annual per child.

*To compute modal premium using age last birthday**:

- (1) Multiply the sum of the base policy premium rate plus the ADB premium rate (if applicable) by the Sum Insured/\$1,000.
- (2) If applying for CIR, multiply \$15.00 by the number of Proposed Insured Children.
- (3) Multiply the sum of the result from (1) and (2) by the Premium Mode Factor: (0.088 EFT, 0.53 Semi-Annual, 1.00 Annual).
- (4) Add the policy fee: \$2.50 EFT, \$15.00 Semi-Annual, \$30.00 Annual.
- (5) Round resultant premium to the nearest whole cent.
- (6) Add any applicable collection fee (\$1.00 Semi-Annual).

Not available in all states.

Graded Death Benefit Whole Life				
Gross Annual Premium Rates Per \$1,000 Sum Insured*				
Issue Age**	Male		Female	
	Non- Tobacco	Tobacco	Non- Tobacco	Tobacco
50	\$47.00	\$61.00	\$33.60	\$46.74
51	48.99	63.57	34.91	49.04
52	51.08	66.25	36.26	51.44
53	53.28	69.05	37.67	53.97
54	55.58	71.97	39.14	56.62
55	58.00	75.00	40.66	59.40
56	60.52	78.27	42.43	62.56
57	63.17	81.68	44.27	65.90
58	65.96	85.27	46.19	69.41
59	68.90	89.04	48.20	73.11
60	72.00	93.00	50.29	77.00
61	75.73	98.30	53.29	82.25
62	79.68	103.91	56.47	87.86
63	83.87	109.84	59.84	93.86
64	88.31	116.10	63.41	100.26
65	93.00	122.72	67.20	107.10
66	98.41	131.19	71.75	114.91
67	104.18	140.25	76.61	123.29
68	110.35	149.94	81.79	132.29
69	116.96	160.29	87.33	141.94
70	124.00	171.36	93.24	152.29
71	134.12	183.94	100.04	163.32
72	145.05	197.44	107.34	175.14
73	156.84	211.94	115.18	187.82
74	169.48	227.50	123.58	201.42
75	183.00	244.20	132.60	216.00
76	197.29	252.96	142.56	216.03
77	212.85	262.03	153.26	216.06
78	229.62	271.42	164.77	216.09
79	247.74	281.16	177.15	216.12
80	256.78	291.24	190.45	216.15
81	265.78	299.11	199.12	225.86
82	273.45	307.20	206.33	236.00
83	282.01	315.51	218.47	246.60
84	290.14	324.04	229.46	257.67
85	298.00	332.80	239.00	269.24

Modified Benefit Whole Life				
Gross Annual Premium Rates Per \$1,000 Sum Insured*				
Issue Age**	Male		Female	
	Non- Tobacco	Tobacco	Non- Tobacco	Tobacco
50	\$49.82	\$61.00	\$40.96	\$52.26
51	51.36	64.00	42.14	54.17
52	52.94	66.25	43.35	56.14
53	54.58	69.05	44.59	58.19
54	56.26	72.00	45.87	60.31
55	58.00	75.00	47.19	62.51
56	61.00	78.27	48.78	65.64
57	63.17	82.00	50.42	68.92
58	66.00	85.27	52.11	72.37
59	69.00	89.04	53.87	76.00
60	72.00	93.00	55.68	79.80
61	76.00	98.30	58.38	85.58
62	80.00	103.91	61.21	91.78
63	84.00	109.84	64.18	98.44
64	88.31	116.10	67.30	105.57
65	93.00	122.72	70.56	113.22
66	99.00	131.19	75.13	121.11
67	104.18	140.25	80.00	129.55
68	111.00	149.94	85.18	138.58
69	117.00	160.29	90.70	148.24
70	124.00	171.36	96.57	158.57
71	134.12	183.94	102.89	168.68
72	145.05	197.44	109.63	179.44
73	157.00	211.94	116.81	190.88
74	169.48	227.50	124.45	203.05
75	183.00	244.20	132.60	216.00
76	197.29	252.96	142.56	219.79
77	212.85	262.03	153.26	223.64
78	229.62	271.42	164.77	227.56
79	247.74	281.16	177.15	231.54
80	256.78	291.24	190.45	235.60
81	265.78	316.41	199.12	251.58
82	273.45	343.75	207.00	268.65
83	293.00	373.46	224.00	286.88
84	317.00	405.74	243.00	306.34
85	343.00	440.80	263.00	327.12

* To compute GDB or MBWL modal premium using age last birthday**:

- (1) Multiply the base policy premium rate by the Sum Insured/\$1000.
- (2) Multiply result of (1) by Premium Mode Factor: (0.088 EFT, 0.53 Semi-Annual, 1.00 Annual).
- (3) Add modal policy fee (\$2.50 EFT, \$15.00 Semi-Annual, \$30.00 Annual). Round premiums to the nearest whole cent.
- (4) Add any applicable collection fee (\$1.00 Semi-Annual)

Not available in all states.

SECURE-Mark Processing

1. An agent should complete the following:
 - a. Verify Proposed Insured's identity with a photo ID, note the ID number on the application
 - b. Application, HIPAA form, EFT Authorization and obtain a "void" check
 - c. Watch the customer sign the application and other forms
 - d. Mail, FAX or upload via the internet, all forms and paperwork to the Home Office
 - e. Money collected must be received in the HO before a policy is settled
2. Applications are received by "Records" to index, input into the workflow system and scan into Imaging
3. Applications are assigned to an underwriter and case manager, then sent to New Business
4. New Business will order an MIB, an MVR and a ScriptCheck
5. An Initial Personal History Interview (PHI) call is made, with daily follow-up, until we reach the applicant. We verify the following:
 - a. Customer identification:
 - i. Address
 - ii. Ownership
 - iii. Beneficiaries
 - b. Agent information:
 - i. Agent's name and any relationship to the insured
 - ii. Whether the agent present when the application was completed and signed
 - iii. Was money collected for the initial premium
 - c. Review of application questions including:
 - i. Regular doctor, current medications and tobacco usage
 - ii. In-force insurance and will there be any replacement involved
 - iii. GDB or MBWL questions on the application
 - iv. Felony question and driving information
 - d. Additional broadly worded, general medical questions may be asked to resolve any concerns or MIB code hits, to help prevent the need to re-call a proposed insured
6. An Underwriter uses the collected data and makes an underwriting decision, if possible.
7. The system is updated upon U/W approval. "UA" appears on Agent Access in red letters.
8. The file moves to new business to issue the policy and settle it that same day, which can be done if the application is complete and all EFT information has been received.
9. If the application cannot be settled, the case manager will contact the agent for needed information or instructions
10. Typically, we complete 50-60% of the PHI interviews the day we receive the application. We settle about 33% of all cases within 24 hours and about 70% of all cases within 48 hours.

SECURE-Mark Application Checklist:

- **Review the Agent Guide section** prior to submitting an application! GPM Life may process business differently than other companies you've used in the past. Don't be caught unaware, it could require an amendment and delay commissions.
- Premiums are based on "**Age Last Birthday or Actual Age**," as of the date of issue.
- Verify that "**Height and Weight**," **Questions 8 & 9**, are answered. Omitted answers require amendments and delay commissions. These questions are easy to miss.
- Verify that **Question 36 on the age 50-85 application (or on any state specific variant)** is answered and initialed by the proposed Owner/Applicant. By doing so, a GDB or MBWL policy may be issued and settled without an amendment! Omitted initials require an amendment to issue an alternate policy, which delays commissions.
- Applications are state specific. Download your application from Agent Access at www.gpmagent.com.
- **Questions 19a and 19b** Answers about **in-force** and **replacement insurance** should match the answers in the Agent's Statement. Replacement applications are acceptable if they are clearly in the best interest of the insured and the appropriate state replacement disclosure accompanies the application. Incomplete applications require amendments and delay commissions. We cannot underwrite a replacement policy without a completed replacement form.
- The 30 "NAIC Model Replacement Regulation" states are: **AK, AL, AR, AZ, CO, CT, HI, IA, KS, KY, LA, MD, ME, MS, MT, NC, NE, NH, NM, OH, OR, RI, SC, SD, TX, UT, VA, VT, WI, and WV** and each requires form "REPLMOD," whenever an applicant has in-force insurance. GPM Life doesn't accept replacements in **KS** or **KY** as they require using the replaced policy's Suicide and Incontestability effective date. **SD** is a Model Replacement Regulation state, but has its own replacement form.
- In 19 states, **CA, DC, DE, FL, GA, ID, IL, IN, MA, MI, MN, MO, ND, NV, OK, PA, TN, WA, and WY**, we also require the form, "Understanding of Policy Replacement" (# 01.56), in addition to the state required replacement form. GPM Life is not authorized in **NJ** or **NY**.
- **Question 18. Include the Name, Address and Phone Number of the Insured's Physician.** Almost everyone has either a personal physician or health clinic. Get a HIPAA form signed, too.
- **Question 10. Faxing** can cause words and phone numbers to become illegible. **A legible phone number is the best processing expediter! Personal History Interviews (PHIs)** are made using **agent provided** telephone numbers and approximate calling times, when possible.
- A **Personal History Interview (PHI)** is completed on every application. An employee from our Home Office will call the applicant to clarify answers provided on the application, as necessary. Most often, the call will be the same business day we receive the application and it takes an average of about 14 minutes. If we have been unable to reach one of your customers, urge them to telephone us on the day following application submission to help expedite issue and delivery of the policy. A Toll-Free WATS Line is available for use:

(888) 476-5433 or (888) GPM-Life

Monday and Wednesday
Tuesday and Thursday
Friday

8:00 AM to 7:30 PM Central Time Zone
8:00 AM to 5:45 PM Central Time Zone
8:00 AM to 4:00 PM Central Time Zone

Errors that cause issue problems and commission delays:

- No job is over until the paperwork is done correctly.
 - Illegible handwriting. If we can't read it, we can't issue it
 - Blank answers. Put an answer for every question.
- **See a photo ID:** Check a valid driver's license or state ID, note the number on your application in the "Agent's Statement" section on page 4.
- **Blank answers!** Make sure you have an answer for every question.
- **Sloppy Corrections!** If you make an error, draw a single line through the mistake, write the correct information next to it and have it initialed by the insured. Overwritten changes are often not clear and cause questions, especially if underwriting is looking at a faxed copy and not the original.
- **Write "Draft Initial Premium"** in the "Special Instructions/Requests" section on page 3 of the application, when submitting applications without a premium.
- **Write "Date Policy on the (1st, 2nd, 3rd, 4th, 5th, 10th, 15th, 20th or 25th) of the Month"** in the "Special Instructions/Requests" section on page 3 of the application, when submitting applications with EFT premiums. The policy date and draft date must be the same.
- **Missing EFT documentation** for Checking or Savings Accounts - Failure to include all required forms slows commissions. You **must** include one of the following to qualify for **Commission Advances**:
 - A **Voided Check or Deposit Slip** for a Checking or Savings Account
 - An **Account Statement** for a Checking or Savings Account
 - A **Bank's letter** verifying an active account
 - Completed **EFT Supplement (form # 02.15)** for a Non-transaction bank savings accounts or Checks not pre-printed with the account owner's name and address.
- When collecting **Money Orders for initial premiums:** Always attach a copy of the **Cash Receipt Authorization (M09.30)**. **With an EFT form, a Money Order isn't necessary**, as GPM Life drafts initial premiums when requested.
- **FAX, Mail or Upload Applications Through Agent Access.** What's the best way? Any, it's up to you! Any one will work well when **all** the required forms are included. Fax your applications, using the toll free number, to **(888) 701-3869 only**. Do not mail originals of Faxed or uploaded applications to the HO.
- **DO NOT ATTACH APPLICATION FILES TO E-MAIL.** E-mail is not acceptable. It isn't a secure way to transmit personal information. Remember to keep all originals for your files for at least 3 years.
- You will receive an automated receipt confirmation once the application is input into our system, usually, in several business hours. If you don't receive a confirmation within 24 hours, contact Records, there may be a problem that you can resolve before it delays underwriting or commissions.
- If you collect a check and then fax your application, include a copy of the check. After you receive the policy number, note that number on the check and send it in. Such policies can't be settled until payment is received in the HO.
- Ask every question exactly as written and record every response exactly as given by the applicant.

SECURE-Protector

10-Year Indeterminate Premium, Renewable Level Term Life Insurance Policy to Age 70, Convertible through age 60

- ✓ Simplified Issue Underwriting from ages 18 through age 60 using a Personal History Interview (PHI), MIB, Script Check and MVR.
- ✓ Face amounts \$25,000 to \$100,000
- ✓ Commissionable \$50 annual policy fee and Renewal commissions
- ✓ Renewable every ten years (renewal after age 60 is only to age 70)
- ✓ Like most Term Life policies, this policy does not generate any cash value.
- ✓ Allows conversion to a Simplified Issue Whole Life policy, but only at the end of each 10 year coverage period. If the end of a 10 year coverage period occurs after age 60, then the maximum conversion age is age 60.
- ✓ Non-Illustrated policy, but quote software available

Agents have requested a term product to provide wider coverage possibilities to our SECURE-Mark portfolio. SECURE-Protector is our answer. This level term policy is not available in MT, NY or NJ.

SECURE-Protector will be issued using the simplified issue underwriting procedures consistent with our SECURE-Mark products.

Our SECURE-Mark team will complete a Personal History Interview (PHI) as quickly as possible, most often the day after we receive your application. The interviewer will have already obtained a Script Check, an MIB report and an MVR, so any questions regarding application answers can be clarified during the initial call and will also help avoid any follow up calls.

SECURE-Protector is a non-illustrated policy, but we do have quote software for agents who prefer showing policy premium changes on a year-by-year basis. The software is available for download at the SECURE-Mark Forms Map in Agent Access (www.gpmagent.com).

Since SECURE-Protector is an “indeterminate premium” policy, the initial premium is guaranteed for 10 years. Subsequent renewal premiums must be quoted at “guaranteed maximum premiums.” However, if at renewal the current premium is lower than the guaranteed maximum premium, the lower current premium will be guaranteed for the new 10-year renewal period.

The policy allows conversion to SECURE-Mark SIWL at every renewal, based in company rules, up to age 60!

SECURE-Protector has a commissionable policy fee, renewal commissions and service fees in policy year 11 and over.

Use the HIPAA form, EFT form and Application Certificate with SECURE-Protector applications.

**Initial Annual Premiums
per \$1,000 Face Amount*
Issue ages 18-60**

**Guaranteed Maximum
Annual Renewal Premiums
per \$1,000 Face Amount For Ages 28-69**

Issue Age	MALE		FEMALE		Renewal Age	MALE		FEMALE	
	No Tobacco	Tobacco	No Tobacco	Tobacco		No Tobacco	Tobacco	No Tobacco	Tobacco
18	1.37	2.62	0.71	1.22	28	2.10	4.58	1.56	2.83
19	1.37	2.74	0.74	1.30	29	2.15	4.74	1.66	3.05
20	1.38	2.84	0.76	1.38	30	2.06	4.85	1.68	2.96
21	1.38	2.90	0.78	1.42	31	2.16	5.11	1.79	3.18
22	1.38	2.94	0.80	1.46	32	2.28	5.43	1.90	3.41
23	1.38	2.98	0.83	1.51	33	2.42	5.83	2.03	3.67
24	1.38	3.00	0.86	1.57	34	2.60	6.30	2.16	3.93
25	1.38	3.02	0.90	1.63	35	2.73	6.71	2.12	3.66
26	1.40	3.07	0.94	1.70	36	2.97	7.34	2.26	3.94
27	1.40	3.13	0.99	1.78	37	3.24	8.04	2.43	4.25
28	1.42	3.21	1.03	1.86	38	3.53	8.80	2.63	4.62
29	1.45	3.33	1.08	1.94	39	3.83	9.59	2.85	5.06
30	1.49	3.48	1.13	2.03	40	4.04	10.19	2.93	5.23
31	1.56	3.60	1.19	2.11	41	4.38	11.05	3.21	5.79
32	1.64	3.76	1.24	2.19	42	4.74	11.98	3.54	6.42
33	1.75	3.95	1.30	2.28	43	5.14	12.98	3.91	7.14
34	1.88	4.19	1.35	2.36	44	5.59	14.07	4.32	7.95
35	1.90	4.47	1.41	2.42	45	5.90	15.29	4.78	8.57
36	2.07	4.89	1.48	2.60	46	6.45	16.67	5.30	9.53
37	2.26	5.36	1.56	2.81	47	7.09	18.23	5.86	10.58
38	2.46	5.86	1.65	3.05	48	7.81	19.99	6.48	11.70
39	2.67	6.39	1.73	3.34	49	8.62	21.94	7.15	12.89
40	2.76	6.72	1.85	3.51	50	9.24	23.54	7.39	13.69
41	2.99	7.28	2.03	3.88	51	10.22	25.84	8.11	14.99
42	3.24	7.89	2.23	4.31	52	11.32	28.39	8.88	16.36
43	3.51	8.55	2.47	4.79	53	12.57	31.21	9.71	17.81
44	3.81	9.27	2.73	5.33	54	13.95	34.28	10.59	19.34
45	4.01	9.59	2.96	5.77	55	14.99	37.60	10.75	20.22
46	4.38	10.45	3.28	6.42	56	16.61	41.15	11.68	21.85
47	4.81	11.43	3.63	7.12	57	18.39	44.97	12.68	23.59
48	5.30	12.54	4.01	7.88	58	20.34	49.10	13.75	25.45
49	5.85	13.76	4.43	8.68	59	22.47	53.51	14.92	27.44
50	6.23	14.45	4.83	9.44	60	23.98	56.81	15.62	28.54
51	6.90	15.87	5.30	10.34	61	26.40	61.58	16.97	30.79
52	7.64	17.43	5.80	11.28	62	29.04	66.62	18.46	33.26
53	8.48	19.16	6.34	12.28	63	31.93	71.97	20.11	35.97
54	9.42	21.05	6.92	13.34	64	35.12	77.67	21.94	38.94
55	10.06	22.21	7.45	14.30	65	37.33	81.81	23.96	42.20
56	11.14	24.31	8.09	15.45	66	41.08	88.36	26.20	45.75
57	12.34	26.57	8.78	16.68	67	45.26	95.59	28.68	49.61
58	13.65	29.00	9.53	17.99	68	49.97	103.68	31.42	53.80
59	15.08	31.61	10.34	19.40	69	55.29	112.77	34.44	58.35
60	16.63	34.36	11.22	20.93					

*Rates are based on current age on effective date of coverage, excluding age changes. Once a policy is issued the initial premium rate is guaranteed for 10 years. Otherwise, these initial rates may be changed at anytime.

	Policy Fee	Modal Factor
Annual	\$50.00	1.0
Semi-Annual	\$26.00	0.515
EFT Monthly	\$4.50	0.089
Bi-Weekly	\$2.00	0.0410769



Sample Initial and Renewal Monthly EFT Premium Calculations

1. \$50,000 Initial Face Amount
Male 55, No Tobacco,

Renewal at age 65, premium to 70

\$ 10.06	Premium per \$1,000	\$ 37.33	Premium per \$1,000
X <u>50</u>	Number of \$1,000s	X <u>50</u>	Number of \$1,000s
\$ 503.00	Total premium	\$ 1,866.50	Total premium
X <u>.089</u>	Monthly Modal Factor	X <u>.089</u>	Monthly Modal Factor
\$ 44.77	Basic EFT Premium	166.12	Basic EFT Premium
+ \$ 4.50	Monthly Policy Fee	+ \$ 4.50	Monthly Policy Fee
\$ 49.27	Total EFT Premium	\$ 170.62	Total EFT Premium

2. \$30,000 Initial Face Amount

Female 40, Tobacco, to Age 50*

Renewal at age 50 to age 60*

Renewal at age 60 to age 70*

\$ 3.51	Premium per \$1,000	\$ 13.69	Premium per \$1,000	\$ 28.54	Premium per \$1,000
X <u>30</u>	Number of \$1,000s	X <u>30</u>	Number of \$1,000s	X <u>30</u>	Number of \$1,000s
\$ 105.30	Total premium	\$ 410.70	Total premium	\$ 856.20	Total premium
X <u>.089</u>	Modal Factor	X <u>.089</u>	Modal Factor	X <u>.089</u>	Modal Factor
\$ 9.37	Basic EFT Premium	\$ 36.55	Basic EFT Premium	\$ 76.20	Basic EFT Premium
+ \$ 4.50	Monthly Policy Fee	+ \$ 4.50	Monthly Policy Fee	+ \$ 4.50	Monthly Policy Fee
\$ 13.87	Total EFT Premium	\$ 41.05	Total EFT Premium	\$ 80.70	Total EFT Premium

*Conversion Option to SECURE-Mark SIWL, monthly premiums:

@ Age 50 Renewal Date: \$89.62 @ Age 60 Renewal Date: \$141.89 @ Age 70 = Not Available

Find news, forms and information on
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