

GTL's Heritage Plan-Graded Benefit Whole Life Insurance

RATE SHEET & UNDERWRITING GUIDE

AK, AL, AZ, AR, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MA, MD, MI, MN, MS, MO, NE, NV, NH, NJ, NM, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WA, WV, WI, WY

	GTL'S HERITAGE PLAN-GRADED BENEFIT WHOLE LIFE RATES				
	40-65			66-90	
ISSUE AGE	М	F	ISSUE AGE	М	F
40	\$46.00	\$35.00	66	\$96.00	\$70.00
41	\$47.00	\$35.00	67	\$101.00	\$73.00
42	\$48.00	\$35.00	68	\$107.00	\$76.00
43	\$49.00	\$35.00	69	\$112.00	\$79.00
44	\$50.00	\$35.00	70	\$117.00	\$83.00
45	\$51.00	\$36.00	71	\$125.00	\$91.00
46	\$52.00	\$36.00	72	\$132.00	\$96.00
47	\$53.00	\$37.00	73	\$142.00	\$103.00
48	\$54.00	\$37.00	74	\$152.00	\$111.00
49	\$55.00	\$38.00	75	\$162.00	\$118.00
50	\$56.00	\$38.00	76	\$178.00	\$132.00
51	\$57.00	\$39.00	77	\$198.00	\$147.00
52	\$58.00	\$40.00	78	\$224.00	\$162.00
53	\$59.00	\$42.00	79	\$249.00	\$178.00
54	\$60.00	\$45.00	80	\$274.00	\$193.00
55	\$61.00	\$46.00	81	\$290.00	\$203.00
56	\$63.00	\$48.00	82	\$300.00	\$208.00
57	\$66.00	\$50.00	83	\$320.00	\$213.00
58	\$70.00	\$52.00	84	\$336.00	\$219.00
59	\$73.00	\$54.00	85	\$356.00	\$224.00
60	\$76.00	\$56.00	86	\$377.00	\$244.00
61	\$78.00	\$58.00	87	\$397.00	\$264.00
62	\$81.00	\$61.00	88	\$418.00	\$295.00
63	\$84.00	\$63.00	89	\$438.00	\$326.00
64	\$86.00	\$65.00	90	\$459.00	\$356.00
65	\$91.00	\$67.00			

MODAL FACTORS				
Monthly	0.08333			
Quarterly	0.25000			
Semi Annual	0.50000			
Annual	1.00000			

ANNUAL POLICY FEE
\$48.00

Graded Death Benefit

Issue Ages: 40-90 years

Death Benefit Amounts: \$2,500 to \$25,000

- Death Benefit in year 1 is Premiums Paid plus 5%
- Death Benefit in year 2 is 50% of the face amount
- Death Benefit in year 3 is 100% of the face amount

We will pay the full face amount on accidental death in year 1 and year 2 under the Temporary Accidental Death Benefit.

UNDERWRITING **GUIDE**



GTL's Heritage Plan

Issue Ages: 40 – 90

Benefit amounts are \$2,500-\$25,000

Accept/Reject Underwriting (There are 5 Yes/No Questions and Any that are answered "YES" would disqualify an applicant.)

- 1. Within the last twenty four (24) months, have you been receiving kidney dialysis, require 24 hour continuous oxygen use (excluding CPAP), have an implanted defibrillator or received or been advised by a member of the medical profession to get an organ transplant?
- 2. Within the last twenty four (24) months have you been diagnosed with or treated by a member of the medical profession for Alzheimer's, dementia or memory loss?
- 3. Currently diagnosed as having, or receiving treatment by a member of the medical profession for invasive cancer (excluding Stage A Prostate Cancer, Carcinoma in Situ, and Squamous Cell/Basal Cell Carcinoma)?
- 4. Are you currently bedridden, confined to a hospital, nursing home, mental care facility, long term care facility, hospice or been diagnosis with a terminal illness?
- 5. Have you been diagnosed by a member of the medical profession as having the Human Immunodeficiency Virus (HIV), ARC or AIDS?

Underwriting Requirements: None Height Weight Guidelines: None

Signature rules: Full signature of the Proposed Insured and Owner (if applicable) is required.

POA / Guardianship: Will not be accepted.

Policy Benefit Changes: Increase in coverage – we will allow increase up to max face amount (25K). You will be required to complete a new application which will be subject to underwriting approval and a second policy will be issued.

Reinstatement Process: A policy can be considered for reinstatement if it lapses. Please refer to the reinstatement provision in the policy for the guidelines as they may vary by state.

The applicant must have a valid social security number and be a U.S. citizen. If the applicant holds a "green card" (permanent resident of US) they also qualify for coverage.

If the application is over 31 days old when received by the Company, a new currently dated application will be required.

The draft date cannot be more than 15 days before or after the effective date.

(OVER) (3/20)

Persistency/Placement and Debit Balance Guidelines for Heritage Plan Final Expense:

- Agent level:
 - If persistency falls below 70% (3,6,9, or 13 mo. persistency) and/or Placement rate fall below 70%, will receive an automatic warning. An Agent will have 60 days to increase their metrics to levels of at least 70% persistency ratio and 70% placement rate. If metrics are not achieved the agent will be automatically terminated in the offering of the Heritage Plan Final Expense product.
- Agencies/ MGA/ FMO:
 - If persistency falls below a 70% and/or an 80% Placement Rate, will receive an automatic warning. In the event that a warning is given, you will have 90 days to improve their metrics to levels of at least 70% persistency ratio and an 80% placement rate. If metrics are not achieved the agent will be automatically terminated in the offering of the Heritage Plan Final Expense product.
- Debit Balance Procedure:
 - If writing agent has a debit balance greater than \$150 for 30 days or more, a warning will be sent out. If there is not a reduction in the debit balance within 15 days, it is an automatic termination and immediate debt roll-up to the next available upline. For an upline If the debit balance is not cleared within 10 days, it is an automatic termination and an immediate debt roll-up to the next available upline. Each immediate upline has ten days to clear the debit balance before it rolls-up to the next available upline.

Chargebacks for Heritage Plan Final Expense:

If the insured dies in the 1st policy year Guarantee Trust Life will charge back all earned and unearned commissions.