

Final Expense Risk Qualifier & Point of Sale Underwriting



Dignified Choice[®] -
Classic Series

The Process

1. Risk Qualifier -

Prequalify Applicant & Calculate Premium



2. Complete Application -

Get signatures



3. POS Underwriting -

Get decision

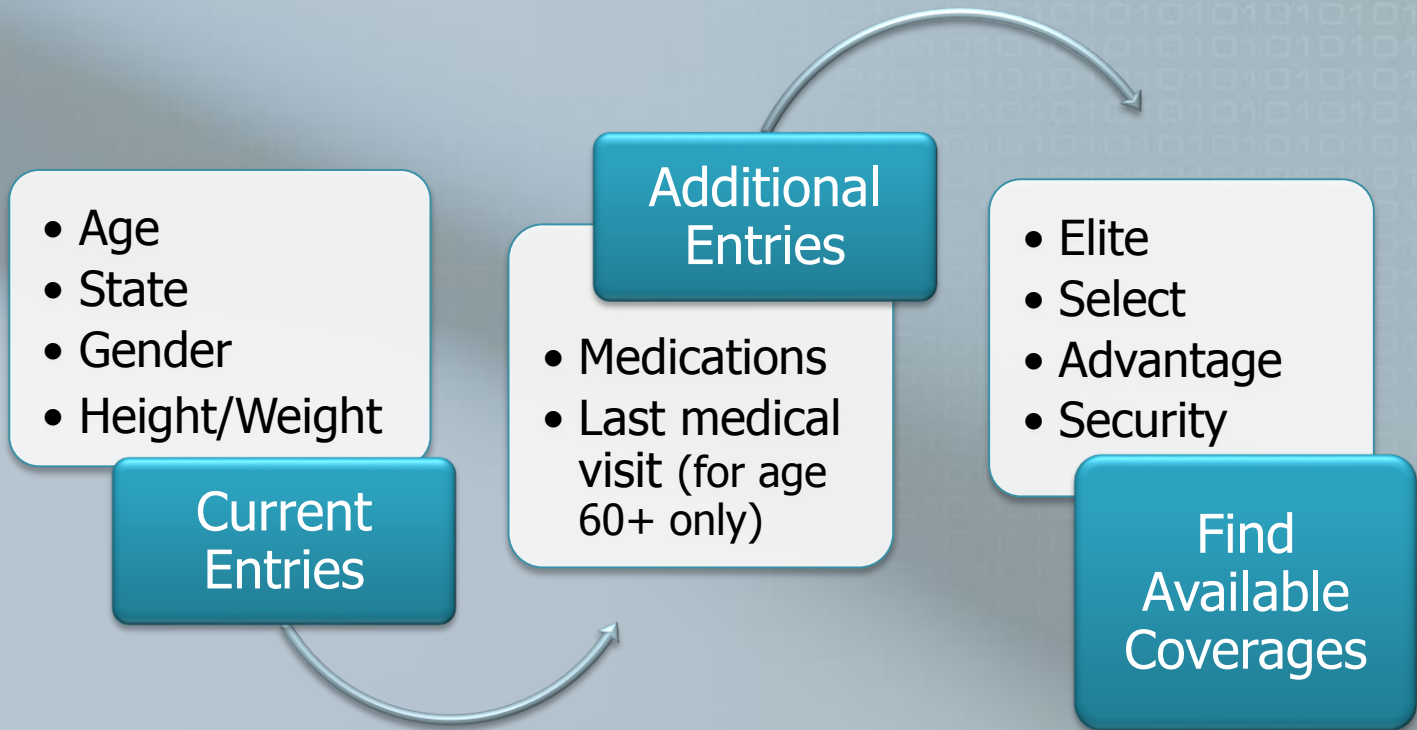


4. Submit Application

Get paid

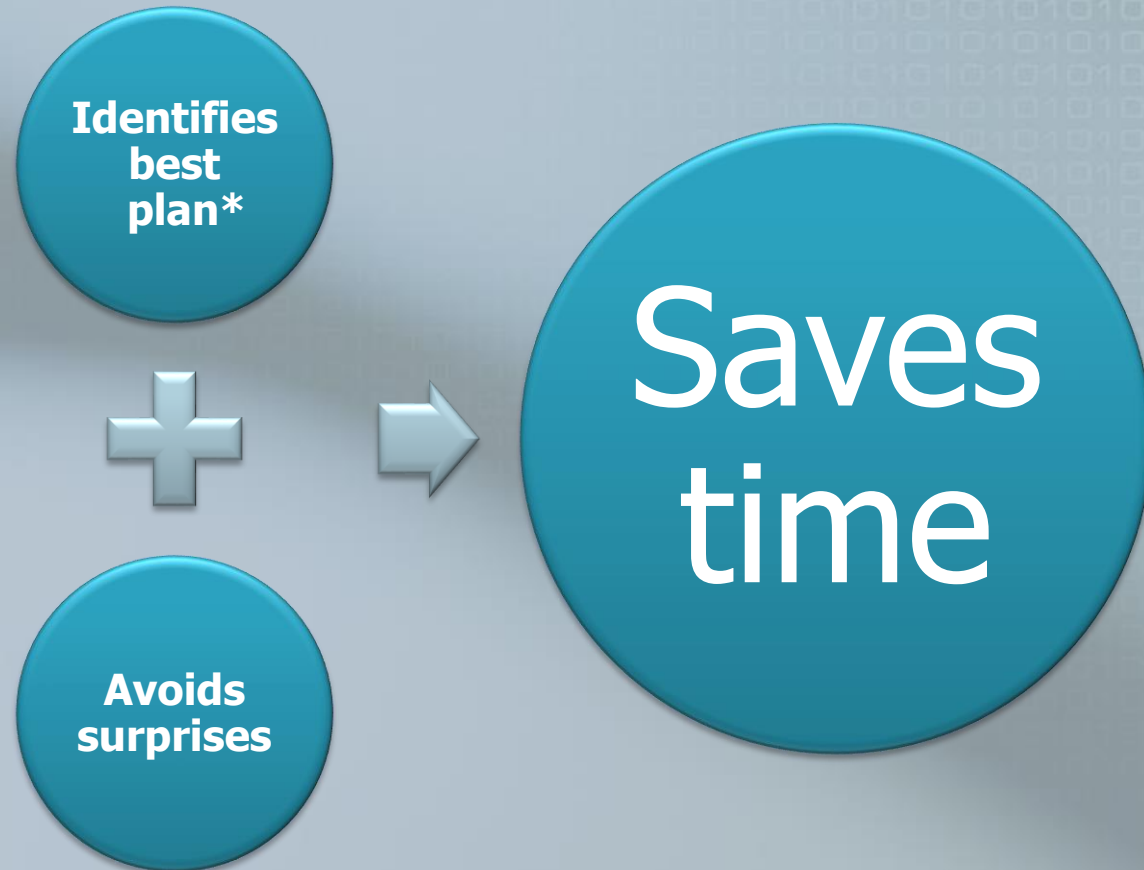
Risk Qualifier

Enhanced version of Final Expense calculator



Risk Qualifier

Advantages

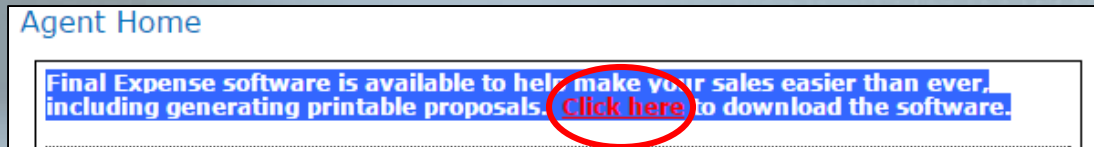


*Based on age, build and medications.

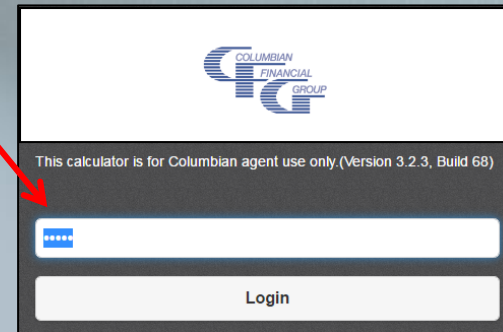
Risk Qualifier

How to get it

If you currently use the calculator app on a handheld device, it will be updated with the new features. If you do not have the app or want to download a computer version, click the link on your Partners dashboard and follow the instructions.



Type **cfgfe** in the text box and tap the Login button.



The password will be saved so you will not need to enter it each time you start the app. *Take note of the password because you will need to enter it again if you get a new device.*



Risk Qualifier

How to use it

Enter client information as usual.

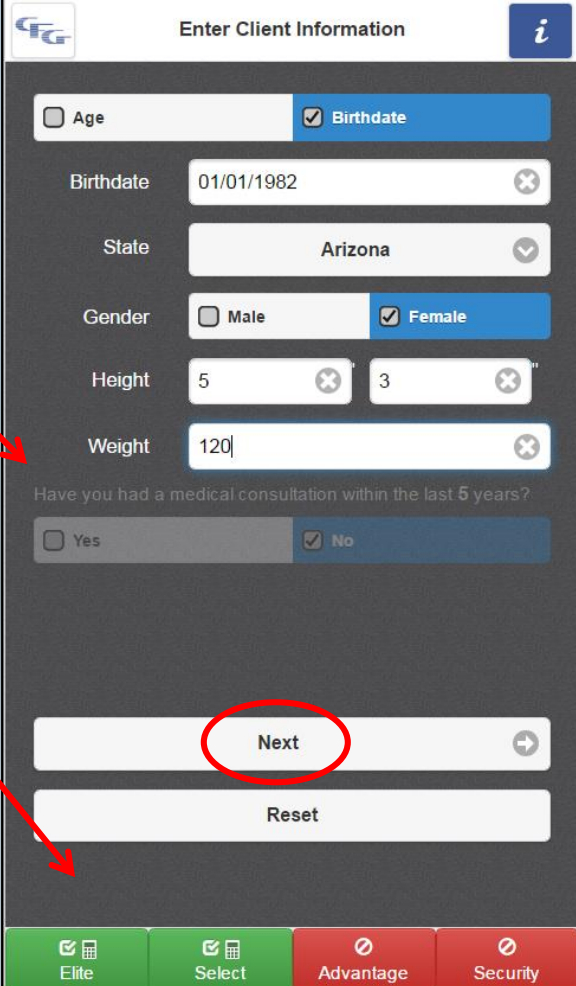
Medical consultation question is enabled only for ages 60+


Preliminary eligibility changes as information is input:

- Green = available 
- Red = not available 


Tap "Next" to proceed to medication list or tap an available plan to bypass medication list and go directly to the calculator.


Please note: The medication list may take a few moments to download the first time you use it and when periodic updates are made to the list.





CFG Enter Client Information 


Age Birthdate

Birthdate 01/01/1982 

State Arizona 


Gender Male Female

Height 5  3 

Weight 120 

Have you had a medical consultation within the last 5 years?

Yes No

Next 

Reset

Elite Select Advantage Security

Risk Qualifier

Bypassing Medicine List

If you tap a plan name instead of the "Next" button, you will receive a pop up reminder that you are bypassing the medication list and going directly to the calculator.

You may disable the pop up by tapping the box labeled "Don't show this message again."

The screenshot shows a mobile application interface titled "Enter Client Information". At the top left is a logo with the letters "CG". The form contains several input fields: "Age" (unchecked), "Birthdate" (checked, value: 01/01/1982), "State" (dropdown menu showing "Arizona"), and "Gender" (unchecked for "Male", checked for "Female"). Below these fields is a white warning box with the text: "By clicking Next, you will bypass the medication list and go directly to the rate calculator." Below the warning box is a checkbox labeled "Don't show this message again." At the bottom of the warning box are "Back" and "Next" buttons. Below the warning box are two large buttons: "Next" and "Reset". At the very bottom of the screen is a navigation bar with four buttons: "Elite" (circled in red), "Select", "Advantage", and "Security". A red arrow points from the "Elite" button to the "Next" button in the warning box.




Risk Qualifier

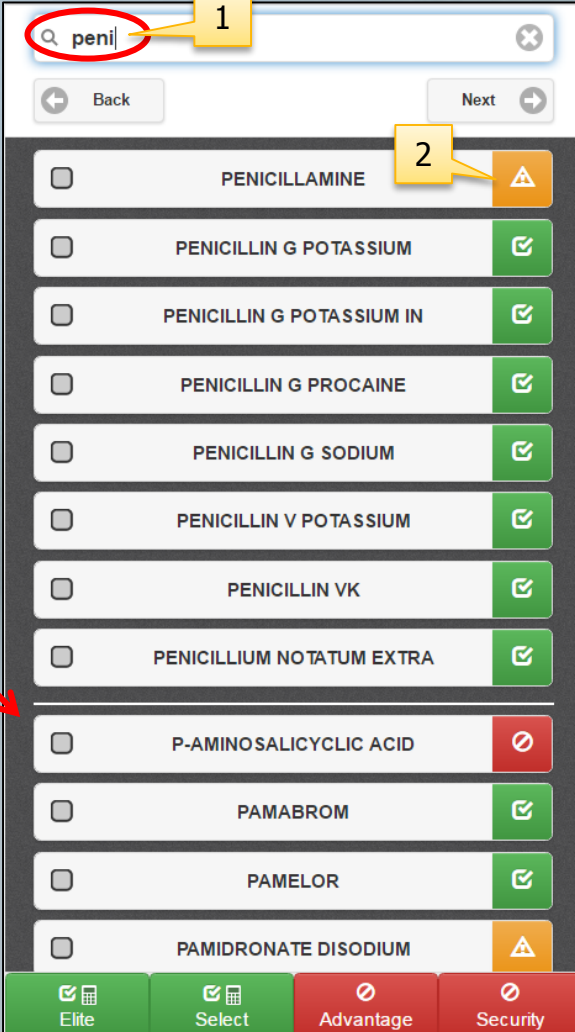
Medication List

1. Begin typing medication name in search bar and possible matches will appear.

- Exact matches show at the top of the screen.
- "Sounds like" matches appear below.

2. Symbols at right indicate risk.

- Green = Low 
- Yellow = Medium 
- Red = High 



The screenshot shows a search bar at the top with the text "penil" entered. A yellow callout box labeled "1" points to the search bar. Below the search bar are "Back" and "Next" buttons. A list of medication names is displayed, each with a checkbox on the left and a risk indicator icon on the right. A yellow callout box labeled "2" points to the risk indicator for "PENICILLAMINE". The risk indicators are: PENICILLAMINE (Yellow), PENICILLIN G POTASSIUM (Green), PENICILLIN G POTASSIUM IN (Green), PENICILLIN G PROCAINE (Green), PENICILLIN G SODIUM (Green), PENICILLIN V POTASSIUM (Green), PENICILLIN VK (Green), PENICILLIUM NOTATUM EXTRA (Green), P-AMINOSALICYCLIC ACID (Red), PAMABROM (Green), PAMELOR (Green), and PAMIDRONATE DISODIUM (Yellow). At the bottom of the screen are four buttons: "Elite" (Green), "Select" (Green), "Advantage" (Red), and "Security" (Red).

Risk Qualifier

Medication List

1. Tap any medication name for additional information.

PENICILLAMINE

Popular Name: CUPRIMINE

Indications: Cystinuria; Rheumatoid Arthritis; Wilson's Disease;

Priority: MEDIUM

Debug: YYGG

Rx/C

Cancel Add

2. Tap the box to the left of the medication name to select it. The medication will be saved in the top section.

The screenshot shows a search results page for 'peni'. At the top, there is a search bar with 'peni' and a 'Back' button on the left and a 'Next' button on the right. Below the search bar is a list of medications. The first medication, 'PENICILLAMINE', is highlighted in purple and has a checkmark in a box to its left. A yellow callout box with the number '1' points to the 'PENICILLAMINE' text, and another yellow callout box with the number '2' points to the checkmark box. To the right of the medication name is a green checkmark icon. Below 'PENICILLAMINE' are several other medications, each with a checkbox and a green checkmark icon. At the bottom of the list, there are four colored buttons: 'Elite' (orange), 'Select' (orange), 'Advantage' (red), and 'Security' (red). The 'Advantage' and 'Security' buttons have a red circle with a slash through it.

Risk Qualifier

Medication List

Additional questions may appear for some medications. These medications are labeled with a question mark.

ADASUVE

Popular Name: ADASUVE

Indications: Agitation associated with Bipolar I Disorder ; Agitation Associated with Schizophrenia ;

Priority: MEDIUM

Debug: 66A

Rx/OTC: Rx

Is ADASUVE for treatment of Schizophrenia in the last 36 months?

Yes No

Cancel Done

Q adas

Back Next

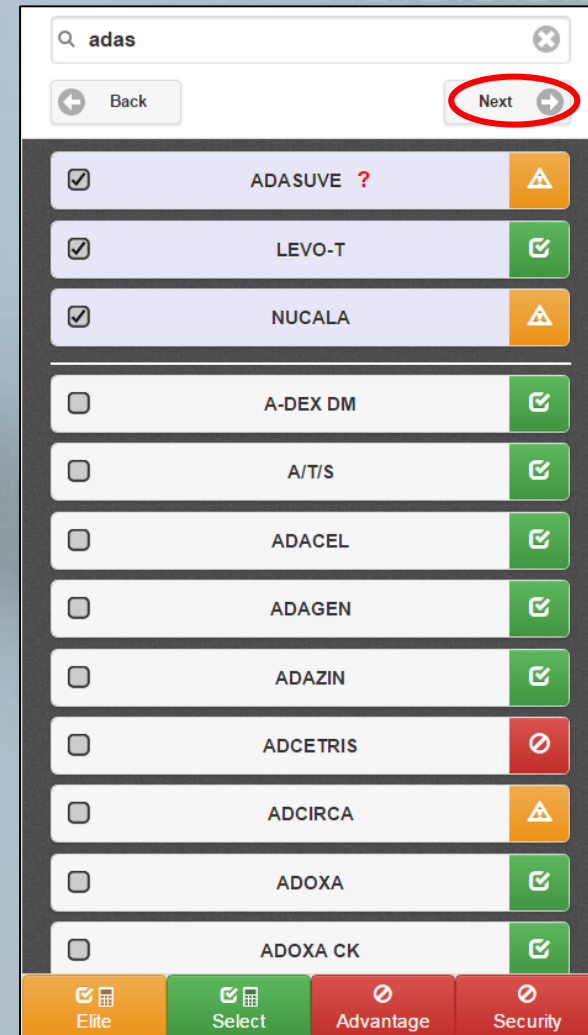
<input checked="" type="checkbox"/>	PENICILLAMINE	
<input type="checkbox"/>	ADASUVE ?	
<input type="checkbox"/>	A-DEX DM	
<input type="checkbox"/>	A/T/S	
<input type="checkbox"/>	ADACEL	
<input type="checkbox"/>	ADAGEN	
<input type="checkbox"/>	ADAZIN	
<input type="checkbox"/>	ADCETRIS	
<input type="checkbox"/>	ADCIRCA	
<input type="checkbox"/>	ADOXA	
<input type="checkbox"/>	ADOXA CK	
<input type="checkbox"/>	ADOXA PAK 1/100	

Elite Select Advantage Security

Risk Qualifier

Medication List

Continue selecting medications until the list is complete, then tap Next to proceed.



Risk Qualifier

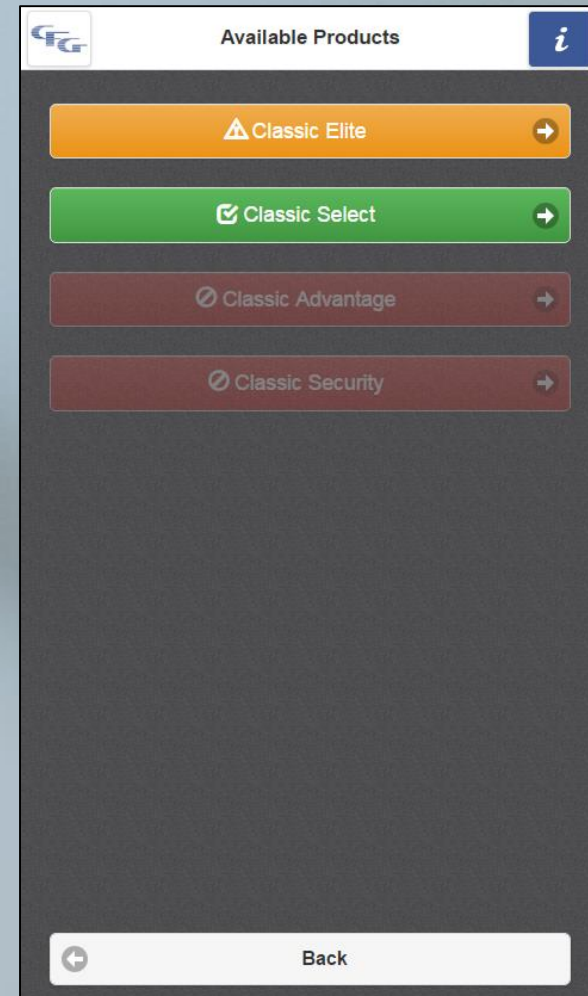
Available Products

Risk qualifier shows availability of plans based on the preliminary information.

- Green = available*
- Red = not available
- Yellow = may be available

Yellow indicates a *possible* risk based on the medications entered. The POS decision will be based on underwriting checks, which will clarify the actual level of risk based on combinations of drugs, the number of times prescriptions have been filled and the type of doctor prescribing the drugs.

*Not a guarantee of coverage.

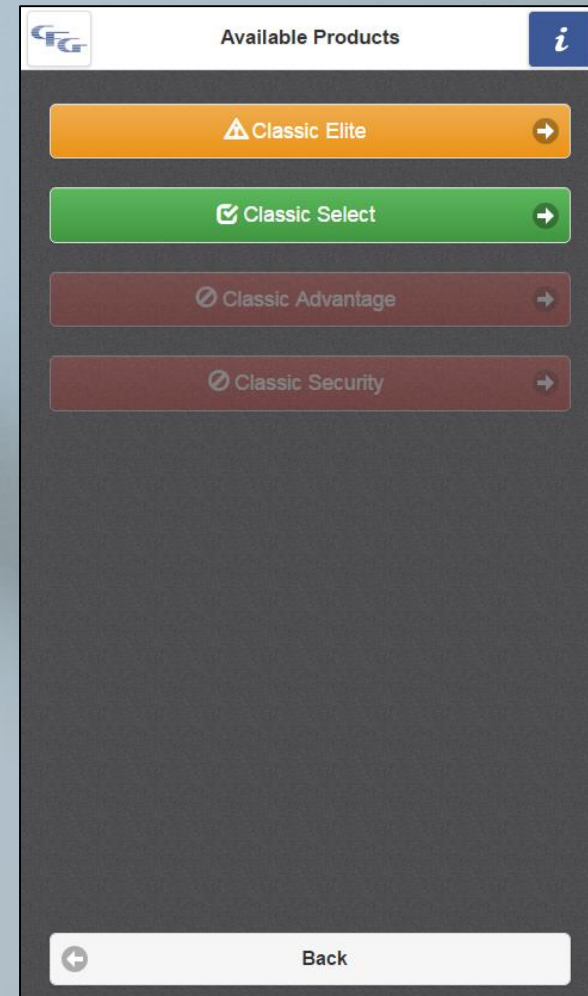


Risk Qualifier

Available Products

Tap an available plan to calculate premiums for the plan.

Please note that the POS underwriting tool will return decisions for all four plans, regardless of which plan is selected here.



Risk Qualifier

Choose Plan Features

Select amount, premium mode and any desired riders to calculate premium.

Tobacco question appears only when applying for the Elite or Select plan.

Rider selections appear only when available based on age and plan.

The screenshot shows a mobile application interface titled "Choose Elite Features". At the top, there is a header with a logo on the left, the title "Choose Elite Features", and an information icon on the right. Below the header, a summary bar displays "\$5,000.00 / \$10.46 Monthly EFT" and demographic information: "Female / Age 35 / NT / 120 lbs / 5'3\" / AZ".

The main content area contains several sections:

- A section for "Face Amount" and "Premium" with a checked checkbox for "Face Amount" and an unchecked checkbox for "Premium". Below this is a numeric input field showing "5,000" with a range of "(5,000.00 ~ 535,000.00)" and two buttons for "-1000" and "+1000".
- A "Mode" section with a dropdown menu set to "Monthly EFT".
- A "No Tobacco" section with a checked checkbox for "No Tobacco" and an unchecked checkbox for "Tobacco".
- A "No ADB" section with a checked checkbox for "No ADB" and an unchecked checkbox for "ADB".
- A "Number of Children" section with a numeric input field showing "0" and a range of "(0 ~ 20)", with two buttons for "-1" and "+1".

At the bottom of the screen, there are two buttons: "POS Underwriting" and "Back".

Complete Application

- Complete E-App or paper application to prequalify the proposed insured
- Obtain signatures before proceeding to POS underwriting



Point of Sale Underwriting

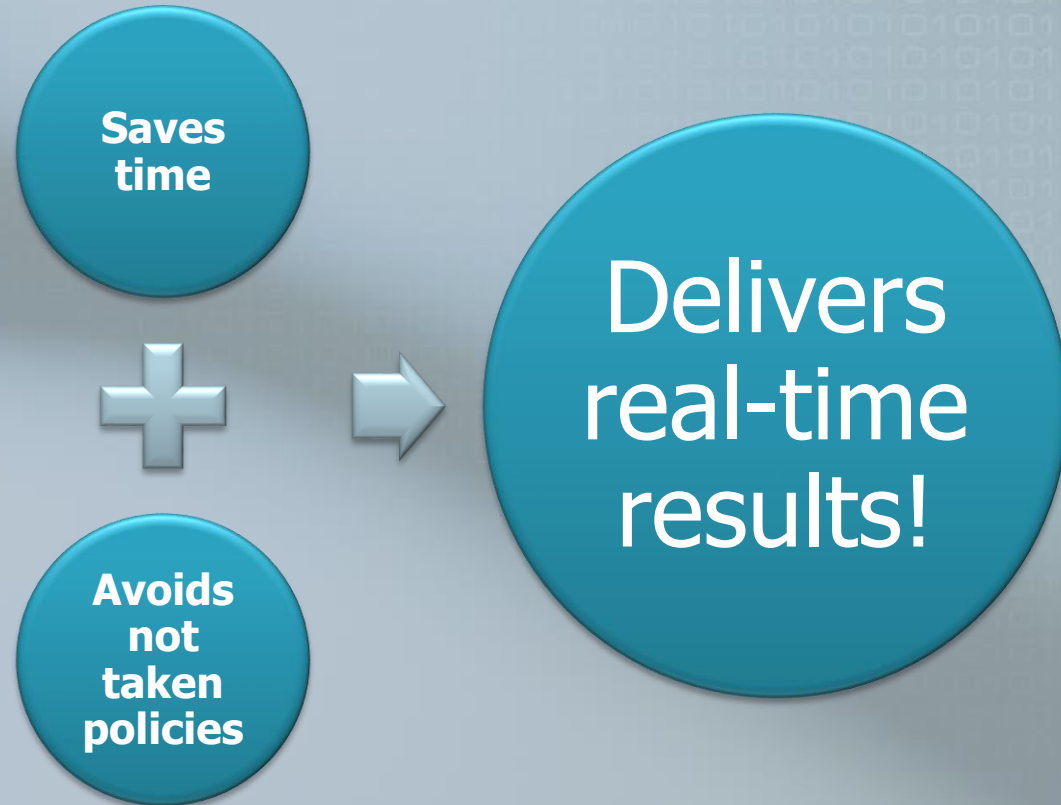
Advantages

- Efficient process saves time
- Delivers real-time results to clients
- Avoids not taken policies
 - Improve your placement ratio



Point of Sale Underwriting

Advantages



Point of Sale Underwriting

How to get it

After completing the application, tap the POS Underwriting button on the Risk Qualifier screen to proceed.

Choose Elite Features

\$5,000.00 / \$10.46 Monthly EFT
Female / Age 35 / NT / 120 lbs / 5'3" / AZ

Face Amount Premium
5,000 (25,000.00 ~ 35,000.00)

Mode: **Monthly EFT**

No Tobacco Tobacco

No ADB ADB

Number of Children: 0 number (0 ~ 20)

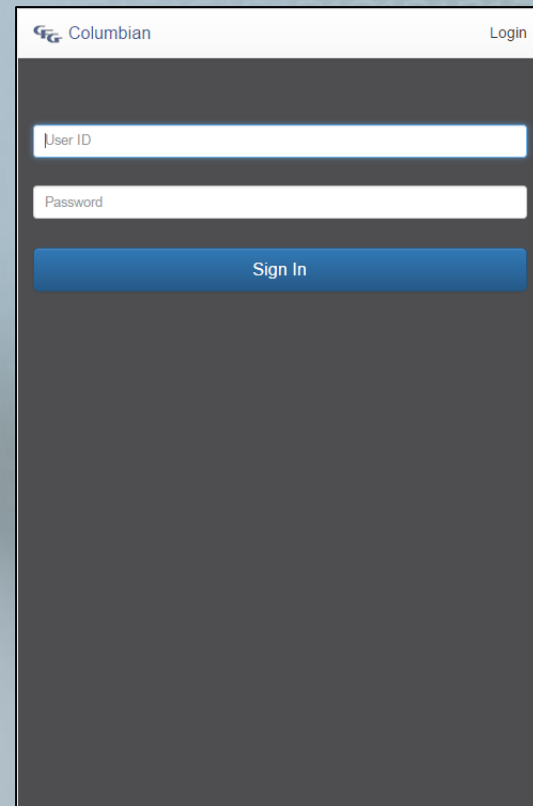
POS Underwriting

Back

Point of Sale Underwriting

How to get it

- POS requires an internet connection or cellular data plan.
- Log in using your Partners User ID and password.



The screenshot shows a mobile application login screen for 'Columbian'. At the top left is the 'Columbian' logo, and at the top right is the word 'Login'. Below the header are two white input fields: the first is labeled 'User ID' and the second is labeled 'Password'. Below these fields is a blue button with the text 'Sign In' in white. The background of the app is dark grey with a faint pattern of binary code (0s and 1s).

Point of Sale Underwriting

How to get it

If you do have or do not remember your Partners login, go to www.cfglife.com/login and click the Login to Partners Website link.

- First-time users, click Not Registered? Enroll here!
- If you have forgotten your login, click Forget your password? Reset here!

You will need:

- Your agent number
- The last four digits of your tax ID
- One additional piece of identifying information (date of birth, zip code, telephone number or email address)

Point of Sale Underwriting

How to use it

1. Tap the check box to attest that you have completed the application and obtained signatures.
2. Residence state will carry forward from the Risk Qualifier.
3. Tap "Continue."

The screenshot shows the 'POS Underwriting' screen in the Colombian app. At the top, the 'Columbian' logo and a hamburger menu icon are visible. The title 'POS Underwriting' is prominently displayed. Below the title, there is a confirmation step: a checkbox (labeled '1') followed by the text 'I attest that I have completed the application and obtained all signatures. I will submit the application to Colombian regardless of the underwriting outcome.' Below this, there is a 'Residence State' dropdown menu (labeled '2') currently showing 'AZ Arizona'. At the bottom, there are two buttons: a blue 'Continue' button (labeled '3') and a white 'Cancel' button.

Point of Sale Underwriting

How to use it

Have Proposed Insured read Authorization & Acknowledgement.

Have Proposed Insured sign with fingertip or stylus.

Tap Sign & Continue.



POS Underwriting

Authorization & Acknowledgement

State of Residence - Arizona

I **authorize** any licensed physician, medical practitioner, hospital, clinic, pharmacy benefit manager, other medical or medically related facility, insurance company, MIB, Inc., consumer reporting agency, or other organization, institution or person that has any records or knowledge of me, to give any such information to Columbian Life Insurance Company ("the Company") or its reinsurers for underwriting purposes. This authorization also includes information about drugs, alcoholism, prescription drug records, or any other medical history information. To facilitate rapid submission of such information, I authorize all said sources, except MIB, to give such records or knowledge to any agency employed by the Company to collect and transmit such information. I **understand** my information may be subject to redisclosure to a third party and may no longer be protected by federal privacy laws. I **authorize** Columbian Life Insurance Company, or its reinsurers, to make a brief report of my personal health information to MIB. A photocopy of this form will be as valid as the original; this authorization will be valid for two (2) years from the date shown below. You may revoke this authorization by contacting us at (PO Box 1381, Binghamton, NY 13902-1381) however, we retain the right to use any information obtained under your authorization prior to your revocation. I **have read and understand** this Authorization & Acknowledgment.

Authorization & Acknowledgement

Proposed Insured, please sign below to affirm your approval.

Jane Doe

Signature of Proposed Insured

Sign & Continue

Point of Sale Underwriting

How to use it

Any data entered on risk qualifier will be carried forward so only the remaining information will need to be entered.

Gender, height, weight and tobacco status (if applicable) are carried forward from the risk qualifier.

POS Underwriting
State of Residence - Arizona

Birthdate * Jan 1 1982

Gender * Male **Female**

Height * 5 3

Weight * 120

First * Jane

Middle * Middle

Last * Doe

SSN * 123-45-6789

Zip Code * 12345

Place of Birth * AZ Arizona

Tobacco * **No** Yes

Driver's License * **No** Yes

Driver's License State * AZ

Driver's License Number * D123456789

Continue

Clear

If birthdate (not age) was entered on risk qualifier, it will carry forward.

Driver's License information requested only for ages 25 - 35.

Point of Sale Underwriting

How to use it

Driver's license question appears only for ages 25-35.

If Yes, enter state and license number.

POS Underwriting
State of Residence - Arizona

Birthdate * Jan 1 1992

Gender * Male **Female**

Height * 5 4

Weight * 225

First * Jane

Middle * E

Last * Doe

SSN * 123-45-6789

Zip Code * 12345

Place of Birth * AZ Arizona

Tobacco * No Yes

Driver's License * No **Yes**

Driver's License Number * Driver's License Number

Driver's License State * Choose state

Continue Cancel

If No, select the reason.

POS Underwriting
State of Residence - Arizona

Birthdate * Jan 1 1992

Gender * Male **Female**

Height * 5 4

Weight * 225

First * Jane

Middle * E

Last * Doe

SSN * 123-45-6789

Zip Code * 12345

Place of Birth * AZ Arizona

Tobacco * No Yes

Driver's License * No Yes

No Driver's License * Reason

Reason

- Non Driver-Lives in the city
- Non Driver-Uses public trans
- Non Driver-Driving too costly
- Non Driver-Failed driving test
- Not a US Citizen
- Expired or up for renewal
- Suspended/revoked-DUI or DWI
- Suspended/revoked-Criminal act
- Suspended/revoked-Unpaid tax
- Suspended/revoked-Unpaid tax
- Suspended/revoked-Child support
- Suspended/revoked-Violations
- Suspended/revoked-Other

Continue

MVR results are not immediately returned for CA or HI. POS underwriting decision cannot be rendered for applicants age 25-35 in those states.

Point of Sale Underwriting

How to use it

Medical consultation question appears only for ages 60-85.

POS Underwriting
State of Residence - Arizona

Birthdate * Jun 4 1935

Gender * Male Female

Height * Feet Inches

Weight * Weight

Last Medical Consultation Month Year

First * First

Middle * Middle

Last * Last

SSN * xxx-xx-xxxx

Zip Code * Zip Code

Place of Birth * Choose state

Tobacco * No Yes

Continue Cancel

Point of Sale Underwriting

How to use it

When all fields are complete, tap the Continue button.

The screenshot shows a mobile application interface for 'Columbian' with a 'POS Underwriting' form. The form is titled 'POS Underwriting' and indicates the 'State of Residence - Arizona'. The form fields are as follows:

- Birthdate: Jan, 1, 1959
- Gender: Male, Female (selected)
- Height: 5, 4
- Weight: 225
- First: Jane
- Middle: E
- Last: Doe
- SSN: 123-45-6789
- Zip Code: 12345
- Place of Birth: AZ Arizona
- Tobacco: No (selected), Yes

At the bottom of the form, there are two buttons: 'Continue' (highlighted with a red circle) and 'Clear'.

Point of Sale Underwriting

How to use it

Underwriting checks will be performed, including:

- Prescription database
- MIB
- Rx Rules
- MVR (if required)

Processing time is usually
less than 2 minutes!

POS Decision

Jane E. Doe

Requesting Decision: Please Wait



Point of Sale Underwriting

Underwriting Decision

Example

- Plans in green are approved.*
- Plans in red are declined.
- Plans in yellow would require further review by Underwriting after the application is received by the Company.



*Approval is contingent on appropriate answers to application health questions. 28

Point of Sale Underwriting

Underwriting Decision

Yellow Decisions

The following are examples of reasons for a yellow decision:

- Proposed Insured is over age 70 and no prescription drug history is found
- MIB information indicates a possible risk
- Rx Rules indicate a possible risk

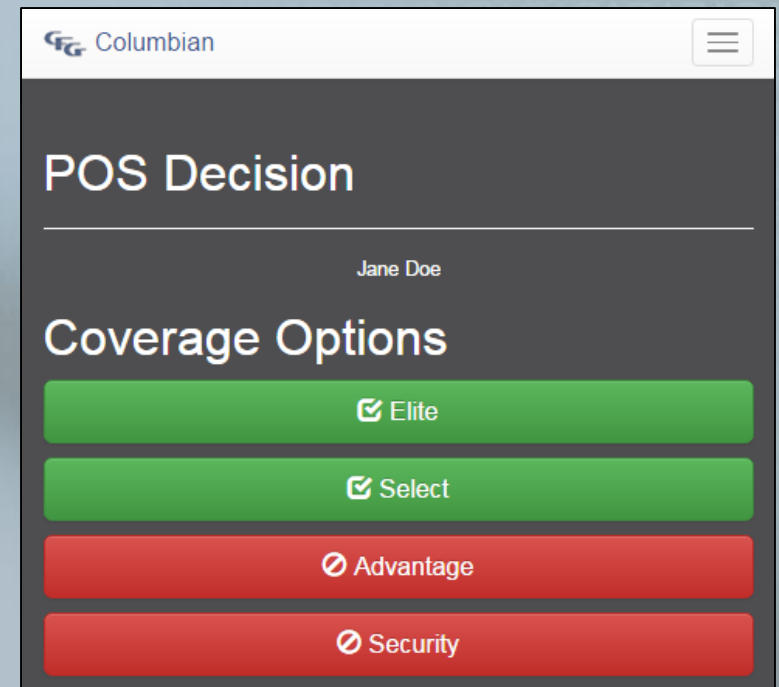
If you apply for a plan with a yellow decision, Underwriting will review the case when the application is received and will make every effort to issue the plan applied for.

Tap the desired plan for further instruction.

Point of Sale Underwriting

Underwriting Decision

Tap the desired plan for further instruction.



Point of Sale Underwriting

Underwriting Decision

Plan Approved

Be sure the premium and face amount on the application are correct for the plan applied for.

If a different plan was originally entered on the Risk Qualifier, return to the calculator and calculate for the new plan.

POS Decision

Jane E. Doe

Please be sure the premium and face amount are correct for the plan applied for and submit the signed application for final processing.

By submitting the application you are affirming the information provided is true and correct to the best of your knowledge.

We thank you for your business!

Close

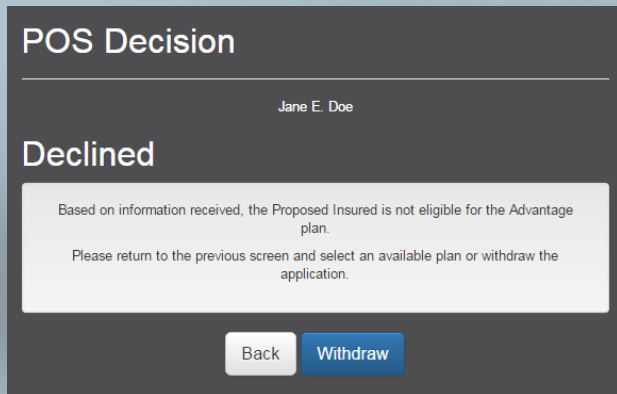
New POS Decision

Submit the Application

The signed application **must be** submitted for final processing, *regardless of the outcome.*

If coverage was declined for all four plans, write “Declined” on the application.

If the application is withdrawn by the client, write “Withdrawn” on the application.



POS Decision

Jane E. Doe

Declined

Based on information received, the Proposed Insured is not eligible for the Advantage plan.

Please return to the previous screen and select an available plan or withdraw the application.

Back Withdraw



POS Decision

Jane E. Doe

Application Withdrawn

Please write "Withdrawn" on the signed application and submit it to the Company so that we may close the file.

Close New POS Decision

The Risk Qualifier and Point of Sale underwriting decision will make doing business with Columbian easier than ever!

If you need assistance:

- Email - POSHelp@cfglife.com
- Phone - 800-423-9765 ext. 7582

Columbian Mutual Life Insurance Company

Home Office: Binghamton, NY

Columbian Life Insurance Company

Home Office: Chicago, IL • Administrative Service Office: Binghamton, NY

Columbian Life Insurance Company is not licensed in every state.

This refers to Policy Form Nos. 1F156, 1F156-CL, 1F157-CL, 1F158, 1F158-CL, 1F159 and 1F159-CL or state variation. Product availability and specifications may vary by state.
Form No. 5398CFG (Rev. 5/18)

Not for use with consumers.