



Med Supp Cheat Sheets

A Helpful Guide for Selling Medicare Supplements

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Table of Contents

SECTION 1 Missouri Anniversary	3
SECTION 2 Guarantee Issue.....	5
SECTION 3 Premium Quoting	8
SECTION 4 Payment Options	10
SECTION 5 Household Discount.....	13
SECTION 6 Extra Things to Know.....	15

(CTRL Click on subject to jump to the section)

Within this document you will find information to help with everything from Quoting to Verifying Eligibility to Writing Medicare Supplement applications. You will see tables with the most popular and competitive Medicare Supplement carriers we work with at this time.

We are always here to help. Our goal is to help you find and provide the best products available to meet each of your individual client's needs. Our mission is to provide you with product, education, information, training, and services to help you grow your business.

SECTION 1 - Missouri Anniversary

Changing to a New Medicare Supplement Company

A client has the right to switch insurance companies each year during the 30 days before or after their current policy's Anniversary/Effective Date (the date on which the policy first started).

For Example: If client's current policy was effective July 1st, the client may apply for an Effective Date anytime from June 1st through August 1st. **The application must be accompanied with PROOF of prior coverage.*** (See below Key Words.)

- ❖ Proof must be provided to carriers to obtain guarantee issue during Missouri Anniversary timeframe
- ❖ This section's table will list the Supporting Documents required with applications for each carrier
- ❖ The table includes who pays commission on Missouri Anniversary

- ❖ **Changing to a new Medicare Supplement Company**
 - Clients have the right to switch insurance companies each year 30 days before or after their current policy's anniversary/effective date. The application must include proof of prior coverage.
- ❖ **Carrier Commissions**
 - Agent commissions vary across the board with Missouri Anniversary business. Refer to this section's table for details.

- ❖ **Key Words included in Missouri Anniversary verbiage**
 - **Dec Page:** This is a document which reflects the client's REPLACING Medicare Supplement policy information. It may be a mixture of information from various sources. **Example:** Policy ID card, Policy pages, or printout from online Agent Portal (carrier name must be visible).
 - **Proof Must Include:**
 - Carrier Name
 - Client's Name
 - Plan Type (example – Plan "F" or Plan "G")
 - Policy Number
 - Effective Date of Replacing Medicare Supplement Policy
 - **Paid to Date (PTD):** This is documentation proving the client's Replacing Medicare Supplement policy is paid current.
 - **Most Common Proof Examples:**
 - Letter from the Replacing Carrier
 - Billing / Invoice statement
 - Printout from online Agent Portal (carrier name must be visible)
 - Bank statement (all information may be redacted except for: Bank Name, Account Number, Client Name, and Payment Information and Date)

Missouri Anniversary

Company	Required Supporting Documents	Paid Commissions
AARP *UHC (must be certified)	Dec Page & PTD	Ages 50+ Plans B, C, D, F, G – Pays \$282 Plan N – Pays \$210 Plans A, K, L – Pays \$105
Ace	Dec Page & PTD	All Ages – Full
Aetna / Accendo	Dec Page & PTD	ALL Ages – Reduced by 98.5%
AFLAC	Dec Page	All Ages - Reduced by 99.92%
Allstate (National General)	Dec Page	All Ages – Reduced by 53%
American Home Life	Dec Page	All Ages – Reduced by 98.65%
Anthem / Elevance Health	Dec Page & PTD	All Ages – Full
Assured Life	Dec Page & PTD	All Ages – Reduced by 42%
CIGNA (CHLIC)	Dec Page & PTD	All Ages: Plan A – Reduced by 78% Plan F – Reduced by 76% Plan G – Reduced by 37% Plan HDG & Plan N – Reduced by 22%
Elips (Lumico)	Dec Page & PTD	All Ages: Plans G, N, HDG – Reduced by 30% All Other Plans – Reduced by 35%
Humana Value	Dec Page & PTD	All Ages - Reduced by 98%
Life Shield	Dec Page	All Ages: Plan F, G & N – Reduced by 50% All Ages: Plan A – Pays - 0%
Manhattan Life Assurance	Dec Page	All Ages: Plan N – Reduced by 50% All Ages: Plans A, F & G–Reduced by 58%
Pekin	Dec Page & PTD	One Time Payment of \$25
Physicians Mutual	Dec Page & PTD	All Ages – Reduced by 99%
SBLI USA (Prosperity)	Eff 1-2 yrs Dec Page Only Eff >2 yrs ago Dec Page & PTD	One Time Payment if \$25
United American	Dec Page & PTD	All Ages - Reduced by 26%
United World (Mutual of Omaha)	Dec Page	ALL Ages Plans A, F, G - Reduced by 14% Plans HDF, HDG & N - Pays Full
Wellabe (Medico)	Dec Page & PTD	All Ages – Reduced by 50%

SECTION 2 - Guarantee Issue – (Not Missouri Anniversary)

- ❖ Two ways to apply for a Medicare Supplement using the Guarantee Issue Special Enrollment timeframe
 - Coming off an Employer Group
 - Coming off Terminated Medicare Advantage Plan

- ❖ **Coming off an Employer Group**
 - May be voluntary or involuntary to qualify
 - Client has 63 days from group coverage ending date to apply for Medicare Supplement coverage
 - Client must apply for one of the named “Guarantee Issue Plans”
 - **Guarantee Issue Plans:**
 - Client Eligible for Medicare **ON OR AFTER** January 1, 2020: A, B, D, G, K, L
 - **Guarantee Issue Plans:**
 - Client Eligible for Medicare **PRIOR TO** January 1, 2020: A, B, C, F, K, L
 - Application must include proof of credible group coverage
 - **Termination Date** must show specific termination date and **cannot** indicate client has the right to continue coverage
 - **Effective Date** of original group coverage (must be a SPECIFIC date listed)
 - **Carrier Name**
 - **Client’s name** (if a **spouse** is to be covered, must reflect spouse’s name also)
 - **Policy Number**
 - Indicate client was covered under **Credible Group Coverage**

- ❖ **Coming off Terminated Medicare Advantage Plan**
 - Client has 63 days from the date they are INVOLUNTARILY terminated from MAPD plan
 - Client must apply for one of the named “Guarantee Issue Plans”
 - **Guarantee Issue Plans:**
 - Client Eligible for Medicare **ON OR AFTER** January 1, 2020: A, B, D, G, K, L
 - **Guarantee Issue Plans:**
 - Client Eligible for Medicare **PRIOR TO** January 1, 2020: A, B, C, F, K, L
 - Application must include proof of MAPD termination
 - Official disenrollment letter is the only proof accepted and must have a specific termination date.
 - If the client receives the initial termination letter indicating right to other coverage, client should decline to the carrier and receive another letter with specific termination date.

❖ Medicare Advantage TRIAL PERIOD

- If the client utilized MAPD trial period and decides to return to Med Supp, they have the right to go back to the same plan and carrier they were on before the Guarantee Issue within 12 months.
- If the Med Supp carrier is no longer available, they have the right to choose another carrier guarantee issue following the NEW January 2020 Guarantee Issue plan rules.

- For Example: Client went onto Medicare in 2018 and took out a Medicare Supplement Plan G. The Client decided to try a Medicare Advantage plan and has now decided they want to go back to their Medicare Supplement Plan G.
 - If their Medicare Supplement carrier is still available – no problem.
 - If their Medicare Supplement carrier is **not still available**, like Transamerica, this client would **not have the option to go back to a “G”** plan guarantee issue, since eligible for Medicare prior to January 1, 2020, and the Guarantee Issue plans before January 1, 2020, are A, B, C, F, K, or L.
 - This client would need to take out a plan A, B, C, F, K, or L to be guarantee issue.
 - Of course, they always have the option to go through underwriting to get a different plan (AARP is best route if medical issues).

Guarantee Issue

Company	Guarantee Issue Plans 1st Year
AARP (UHC) (must be certified)	Ages 50+ Plans B, C, D, F & G = Pays \$458 Plans A, K & L = Pays \$105 Plan N = Pays \$210
Ace	All Ages = Pays Full
Aetna / Accendo	All Ages = Reduced by 98.5%
AFLAC	All Ages = Reduced by 99.92%
Allstate (National General)	All Ages = Reduced by 98.5%
American Home Life	All Ages = Reduced by 98.65%
Anthem / Elevance Health	All Ages = Full
Assured Life	All Ages = Reduced by 98%
CIGNA (CHLIC)	All Ages = Reduced by 98%
Elips (Lumico)	All Ages Plans G, N, HDG = Reduced by 30% All Other Plans = Reduced by 35%
Humana Value	All Ages = Reduced by 98%
Life Shield	All Ages = \$25 one time
Manhattan Life Assurance	All Ages Plan N – Reduced by 50% All Other Plans = Reduced by 58%
Pekin	All Ages = \$25 one time
Physicians Mutual	All Ages = Reduced by 99%
SBLI Life (Prosperity)	All Ages = \$25 One Time
United American	All Ages = Reduced by 26%
United World (Mutual of Omaha)	All Ages = Reduced by 99%
Wellabe (Medico)	All Ages = \$25 one time

SECTION 3 - Premium Quoting

- ❖ During the quoting phase of the application process, you may be required to answer questions.
- ❖ **Tobacco** – When applying during Open or Initial Enrollment (OE), Missouri Anniversary or Guarantee Issue (GI) timeframes, the premium is typically based on NON-TOBACCO.
- ❖ Look to see the carriers that have filed Tobacco use as a “Lifestyle,” thus enabling them to charge tobacco rates, if applicable.
- ❖ Do you have to answer or mark the Tobacco question on the application IF tobacco premium **does not** apply during Open or Initial Enrollment (OE), Missouri Anniversary or Guarantee Issue (GI) enrollment times? This is designated as Y or N in the table below.
- ❖ Policy effective date options and signature date may be able to the same day and is designated in the last column of the table.
- ❖ The client having a birthday between the date the application is signed and the requested effective date can change the premium.
- ❖ Our online Quoter only quotes monthly EFT bank draft and annual direct bill. The table gives information on how to calculate different time periods or based off a rate sheet or Outline of Coverage (OOC).

Premium Quoting Table

*OE: Open Enrollment *GI: Guarantee Issue *OOC: Outline of Coverage

Company	Premium Based On		Tobacco		Quoting	Effective Date	
	Effective Date	Signature Date	Apply Tobacco Prem for OE/GI	If no Tob Prem, Need to answer tob question	How to calculate prem for Qrtly & SemiAnnual	Available Effective Date	Can Eff & Sig Date be the same
AARP/UHC (must be 50 to apply)	Y		NO	NO	Times by Month Add \$2 if paying direct	1 st	Y
AARP membership: Apply online when writing app OR upon receipt. App needs membership number							
ACE	Y		NO	NO	Times by Month	1 st - 28 th	N
Aetna / Accendo	Y			NO	Ratio – See Rate Sheet / OOC	1 st - 28 th	N
AFLAC	Y		NO	NO	Ratio – See Rate Sheet / OOC	1 st - 28 th	N
Allstate (National General)		Y	YES	N/A	Times by Month	1 st - 28 th	N
American Home Life	Y		NO	NO	Ratio – See OOC	1 st - 28 th	Y
Anthem / Elevance Health	Y		YES	N/A	Times by Month	1 st (15 th with prior approval)	N
Assured Life		Y	NO	NO	Times by Month add \$1 for dues. NOT Reflected on	1 st - 31 st	Y
CIGNA (CHLIC)		Y	NO	NO	Ratio - See Rate Sheet / OOC	1 st - 28 th	Y
Elips (Lumico)	Y		NO	NO	Times by Month	1 st - 28 th	N
Humana Value	Y		NO	YES	Times by Month	1 st	Y
Humana NOTE: If app is received on or after requested eff date, will be moved to 1 st of next month							
Life Shield		Y	No	No	Times by Month	1 st - 28 th	N
Manhattan Life Assurance		Y	NO	NO	Times by Month	1 st - 28 th	Y
Pekin	Y		NO	YES	Times by Month	1 st - 28 th	N
Physicians Mutual	Y		Yes (all enrollments)	N/A	Times by Month (Credit card must add \$5.00)	1 st - 27 th	Y
SBLI USA (Prosperity)	Y		NO	No	Ratio - See Rate Sheet / OOC	1 st - 28 th	Y
United American	Y		YES	N/A	Ratio - See Rate Sheet / OOC	1 st - 28 th	N
United World (Mutual of Omaha)		Y	NO	NO	Times by Month	1 st - 31 st	Y
Wellabe (Medico)		Y	Yes	YES	EFT Times by Month Debit or Credit Monthly x 1.032, Qtrly x 3.096, Semi-Annually x 6.18, Annually x 12.36	1 st - 28 th	Y

SECTION 4 - Payment Options

- ❖ Dates available for EFT premium draft and the different rules for each carrier are important to know. Many carriers have unusual rules on drafting, which can seriously affect your client. AARP/UHC is top of the list.
- ❖ Carriers differ on acceptable modes of payment and how the payment may be made. The table will explain options to determine how to pay and how often.
- ❖ Each carrier may have different dates when the initial payment is taken.
- ❖ If paying by bank draft, determine if the client must submit a voided check (not deposit slip).
- ❖ Some carriers have the option to pay with credit card for the premium payment

AARP (UHC) Notes:

- Possible issues with *INITIAL PREMIUM EFT DRAFT*:
 - When paper application is submitted with an EFT bank form to draft **initial** premium and the policy is processed/accepted PRIOR to the requested effective date, the client's draft will be the first of the effective date month.
 - When paper application is submitted with an EFT bank form to draft **initial** premium and the policy is processed/accepted AFTER the requested effective date, AARP will draft the following month. The policy, in this case, **will be over 30 days grace period before initial premium is taken**. AARP suggests sending a check with application for initial premium or having the client call in to make the payment over the phone.
- Column 4 in Table: denotes if document must be provided to show immediate family member relationship
- Column 5 in Table: denotes if a money order or cashier's check must be shown from client and not bank.
- Column 6 in Table: EFT "**M**"
 - If husband and wife have separate bank accounts or separate payment methods, they must have separate AARP membership numbers. This results in loss of household discount; it would no longer apply. To keep the discount, they must pay from the same bank account with the same payment method

Payment Options Table

Company	Acceptable Payment Methods				Payment Options				EFT Bank Draft	
	Pers Check	Bus Check	Immediate Family Doc*	Money Order Client	EFT	Direct Bill	Voided Ck	Credit Card	Initial Prem Processed	EFT Draft Dates
AARP/UHC	Y	N	Y	N	M	Coupon (add \$2)	N	N	Policy Issue	5 th
Ace	Y	Y Owner Spouse	Y	N	M, Q, SA, A	Q, SA, A	Y	N	At Issue or Effective Date	1 st - 28 th
Aetna/Accendo	Y	Y Owner Spouse	Y	N	M	Q, SA, A	Y	N	Policy Issue	1 st - 28 th
AETNA: If EFT draft date request is more than 15 days greater than effective date, it will draft a month in advance.										
AFLAC	Y	Y	Y	Money Order Only	M, Q, SA, A	Q, SA, A	Y	N	May choose approval or effective date	1 st - 28 th
AFLAC: If EFT draft date request is more than 15 days greater than effective date, it will draft a month in advance.										
Allstate (National General)	Y	N	Y	N	M, Q, SA, A Chkg or Svgs	Q, SA, A***	Y	N	Policy Issue	1 st - 28 th
Allstate: EFT draft must be within 10 days of eff date or will draft in advance. Husb/Wife must be two separate checks.										
American Home Life	Y	Y(client's)	Y	N	M, Q, SA, A	Q, SA, A	Y	N	May choose policy issue or effective date	1 st - 28 th
Amer Home Life: Cannot be more than 15 days from eff date or will draft two times initially										
Anthem/Elevance Health	Y	Y names on ck	Y	Y	M, Q, A	M, Q, A	N	N	Policy Issue	5 th
Assured Life	Y	Y names on ck	Y	Y	M	A	N	N	Policy Issue	1 st - 28 th
CIGNA (CHLIC)	Y	Y Owner/Spouse	N	N	M, Q, SA, A	Q, SA, A	Y	N	Policy Issue	1 st - 28 th
Elips (Lumico)	Y	Y Owner/Spouse	Y	Y	M,Q,	Q, SA, A	N	N	Policy Issue	1 st - 28 th

Payment Options Table (cont.)

Company	Acceptable Payment Methods				Payment Options				EFT Bank Draft	
	Pers Check	Bus Check	Immediate Family Doc*	Money Order Client	EFT	Direct Bill	Voided Ck	Credit Card	Initial Prem Processed	EFT Draft Dates
Humana Value	Y	Y Owner/Spouse	Y	Y	M	M	Y	Y	Depends. See note	2 nd – 7 th
Humana: Paper Ck is processed upon receipt. EFT when policy issued. Drafts between 2 nd and 7 th , no choice.										
Life Shield	Y	Y	Y	Y	M, Q, SA, A	Q, SA, A	Y	N	Policy Issue or Effective Date	1 st - 28 th
Life Shield: Cannot be more than 15 days from effective date or will draft two times initially.										
Manhattan Life Assurance	Y	Y	Y	N	M, Q, SA, A	Q, SA, A	Y	N	Policy Issue	1 st - 28 th
Pekin	Y	Y Names on ck OR bank letter	N	Y	M	Q, SA, A	N	N	Policy Issue or Effective Date	1 st - 28 th
Physicians Mutual	Y	Y Client/Spouse		Y	M	M, Q, SA, A	Y	Y add \$5.00	At issue	1 st - 28 th
Physicians Mutual: Business check must include Business Owner Waiver form found on Agent Page										
SBLI USA (Prosperity)	Y	Y	Y	N	M, Q, SA, A	Q, SA, A	Y	N	Effective Date or specific date	1 st - 28 th
United American	Y	Y Owner/Spouse Family Member	Y if no pers acct	N	M, Q, SA, A	M, Q, SA, A	N	N	Upon Receipt	1 st - 28 th
United World (Mutual)	Y	Y Owner/Spouse	Y	Y	M, Q, SA, A	Q, SA, A	N	N	Policy Issue	1 st - 28 th
Wellabe (Medico)	N	N	N	N	M,Q,SA,A	N	Y	Y & Debit	Selected Draft Date	1 st - 28 th

SECTION 5 – Household Discount

- ❖ Many carriers offer household discount rates. See the percentage rates for these discounts and how each carrier’s unique spin on client eligibility.

Household Discount Table

Company	Discount	Amount	Definition & Notes
AARP/UHC	Yes	7% (.93)	Must be SAME AARP Membership Number and each must have AARP / UHC Medicare Supplement plan or be applying at the same time
Ace	Yes	7% (.93)	Must be married and residing with spouse OR have resided with a person who is age 50 or older for at least previous 12 months.
Aetna / Accendo	Yes	14% (.86)	Must currently reside with Spouse or validly recognized Civil Union / Domestic Partner OR continuously resided for 12 months with another household resident (at least 1, no more than 3)
AFLAC	Yes	10% (.90)	Must reside with spouse (including civil union / domestic partner (OR) have lived with a family member who is age 50 or older for previous 12 months.
Allstate (National General)	Yes	7% (.93)	Base Household Discount: Client will receive a 7% discount if client lives with at least one, but no more than three adults who are age 50 or older for the past year. If living with another adult who is their legal spouse, domestic partner, or in a civil union partnership, the one-year requirement is waived.
Allstate (National General)	Yes	Additional 3% (.90)	Possible Additional 3% Household Discount: If someone (50 or older) in the new client’s household is already covered under a National General Med Supp, the new client should receive an additional 3% discount – total of 10% household discount. NOTE: The current client insured with National General WILL NOT receive the additional 3% discount. Quote Engine will reflect – Rating Class: Household/Dual
Allstate (National General))	Yes	10% (.90)	<u>Annual Pay Discount: NEW CLIENTS ONLY</u> will receive a 10% discount if they elect to pay the full year’s premium in one payment, <u>(not available for current policyholders)</u> . Quote Engine will reflect this discount automatically under the Annual Rate.
Allstate (National General)	Yes	5% (.95)	<u>Wearable Activity Device Tracker Discount:</u> New clients may register their wearable Activity Tracker (Fitbit) or Smartwatch when they enroll in Med Supp plan to receive a 5% discount. Quote Engine will reflect – Rating Class: Wearable/Household OR If not eligible for the Household discount, but eligible for the Wearable Activity Device Tracker, Quote Engine will reflect: Rating Class Wearable

Household Discount Table (cont.)

Company	Discount	Amount	Definition & Notes
(Allstate) National General /Health	Yes	5% (.95)	<u>Dental Discount</u> : If you bundle the Med Supp policy with a Dental plan when initially applying.
American Home Life	Yes	7% (.93)	Must currently live with spouse who owns or is issued a Med Supp policy w/American Home OR currently have a household resident (at least 1, no more than 3) who have continuously resided for the last 12 months and at least 1 owns or is issued a Med Supp w/American Home
Anthem / Elevance Health	Yes	5% (.95)	Must reside with a person who also has an Anthem (Elevance Health) Med Supp plan or is applying at the same time
Assured Life	Yes	7% (.93)	Must reside with spouse (including Civil Union / Domestic Partner)
CIGNA (CHLIC)	Yes	7% (.93)	Must reside with a person who also has a CIGNA Health (or affiliated company) Medicare Supplement plan or is applying at the same time
Elips (Lumico)	Yes	12% (.88)	Must currently be married and residing with spouse <u>OR</u> resided for previous 12 months in a household with a person who is 50 years or older. Provide: Name, Address, SS#, DOB & Relationship
Humana Value	Yes	5% (.95)	Must reside with a person who also has a Humana Med Supp plan or is applying at the same time. Need to provide Name and Medicare#
Life Shield	Yes	7% (.93)	Must live with spouse (including validly recognized civil union & domestic partners); <u>OR</u> currently have a household resident (at least 1, no more than 3) with whom they have continuously resided with for the last 12 months.
Manhattan Life Assurance	Yes	7% (.93)	Must be 65 years or older and married, residing with spouse Or be 65 years or older, residing in the same household for the previous 12 months with individual who is at least 60 years old. NOTE: you need the other resident's DOB & SS#.
Pekin	NO		
Physicians Mutual	Yes	10% (.90)	Must reside with spouse (includes Registered Domestic Partner, Civil Union Partner, or party to a domestic partnership between two adults as recognized by state law). <u>OR</u> have resided continuously for the previous 12 months, with at least 1 person (no more than 3), age 60 or older.
SBLI Life (Prosperity)	Yes	7% (.93)	Must be married and residing together <u>OR</u> have resided for at least 1 year, with a living person over the age of 18.
United American	NO		
United World (Mutual)	Yes	12% (.88)	Must reside with Spouse or Domestic Partner
Wellabe (Medico)	Yes	10% (.90)	Must live in the same household with another person who is age 50 or older

SECTION 6 - Extra Things to Know

- ❖ Under 65 disability Medicare clients going through underwriting
 - Most carriers will only accept Under Age 65 Medicare clients when applying during Open/Initial Missouri Anniversary or Guarantee Issue enrollment time frames. The table below lists the carriers who will consider Under Age 65 clients through full underwriting.
 - Call our office to help pre-screen those clients who have a medical disability.

- ❖ Durable Power of Attorney. (DPOA)
 - Most carriers accept clients with a DPOA signing on their behalf during Open/Initial, Missouri Anniversary or Guarantee Issue enrollment time frames.
 - Verify the few that will accept during any enrollment period (includes going through underwriting) and other carriers who do not accept DPOA's in any circumstance.
 - The table will explain the exact way an application has to be signed by the DPOA; many carriers have specific rules.
 - Some carriers have special forms to be signed or require current DPOA paperwork.

- ❖ Premium Rate Guarantee
 - Typically, a carrier will provide an initial 12-month rate guarantee at policy issue. The table includes information regarding these guarantees.

- ❖ Pre-Existing Condition Clause
 - A few carriers now have Pre-X clauses on their policies. This can apply to all enrollment scenarios. This is very important if dealing with a client that has not had continuous coverage.

- ❖ Correct Individual or Agency Writing Numbers to use on Applications
 - If you are contracted as an agent where commissions pay to your social security number, you will always use your individual writing number. This could also be called an Agent, Broker, SAN or Producer number.
 - If you are contracted as a licensed only agent (LOA) working under an agency, you will always use your individual writing number. Again, could be called an Agent, Broker, SAN or Producer number.
 - If you are contracted as an agent or principal of your agency and commissions are paid to your tax ID number – it is important to know and verify whether you are to use your individual or agency/entity number on applications. If you received only one writing number, this would be the one to use.

Extra Things to Know Table

Company	Will they consider Underage Disability through Underwriting	Will Carrier Accept Power of Attorney (POA)	Does a Pre-Existing Clause Apply?	Initial Rate Guarantee (months)	WRITING # to use on Apps (use Individual number if no agency)
AARP / UHC	NO They will take in GI / Open Enrollment timeframe <u>BUT</u> , client must be 50+ years of age	Yes - Guarantee Issue and Open Enrollment Only Must be dated within the last 12 months or it will need to be updated	UNDERWRITTEN applications only. 3 months (Waived if at least 3 months of continuous credible coverage prior)	12	Agency
Accendo & Aetna	NO	Yes - Guarantee Issue and Open Enrollment Only Must be dated within the last 12 months or it will need to be updated	No	12	Individual
ACE	Yes	GI and Open Enrollment ONLY. If paperwork date is over 12 months, Affidavit signed by POA & Notarized is needed	No	12	Individual
AFLAC	NO	Yes – GI & OE Only. Dated within the last 12 months or update.	No	12	Individual
Allstate (National General)	Yes	Yes - GI & OE Only	No	12	Individual
American Home Life	NO	NO	NO	12	Individual
Anthem / Elevance Health	YES	Yes	Yes - 6 mo (Waived if client CCC without a break of 63 days)	6	Agency
Assured Life	YES	Yes	No	12	Individual
CIGNA (CHLIC)	NO	Yes - GI & OE Only	No	12	Individual
Elips (Lumico)	Best not to Write	Yes – Must be dated in last 12 months or POA form is needed	NO	12	Individual

Extra Things to Know Table (cont)

Company	Will they consider Underage Disability through Underwriting	Will Carrier Accept Power of Attorney (POA)	Does a Pre-Existing Clause Apply?	Initial Rate Guarantee (months)	WRITING # to use on Apps (use Individual number if no agency)
Humana Value	YES	YES	Yes - 6 months (Waived if client had CCC)	12	SAN Number
Life Shield	NO	Yes – GI & OE Only	No	12	Individual
Manhattan Life Assurance	NO	Yes – GI, OE & Underwriting	No	12	Individual
Pekin	NO	Yes - GI & OE Only	YES	12	Individual
Physicians Mutual	NO	Yes - GI & OE Only	No	6	Agent
SBLI USA (Prosperity)	Yes	Yes – GI & OE Only Must submit paperwork; if documents are over 12 months old, an affidavit will be needed.	Yes - Open Enrollment Only 6-month Pre-X if not replacing COO	12	Individual
United American	YES	NO	No	12	Individual
United World (Mutual)	Yes	Yes	No	12	Individual
Wellabe (Medico)	No	Yes (Requires a special request & a paper application, along with POA paperwork)	No	12	Agency