

Secure Advantage

Preferred Whole Life

Ages 0 - 49

Agent Guide

For use with states: AL, AR, CO, GA, IN, KY, LA, MS, MO, NV, NC, OH, OK, SC, SD, TN, TX, and UT

Standard Life and Casualty Insurance Company

Agent Use Only



Standard Life[™]

AND CASUALTY INSURANCE COMPANY

A ManhattanLife Company

Secure Advantage Preferred Whole Life

The Secure Advantage program provides you with the tools to fulfill a vital niche in the smaller face amount life insurance market.

Secure Advantage is a whole life insurance program for your healthiest clients.

By balancing tighter underwriting with extremely competitive rates, we're able to provide your healthiest clients with a product that will save them money, get them more coverage for their premium dollar, maximize your renewals through the higher persistency expected from lower premium rates, and minimize the possibility of someone replacing the policy later.

For Ages 0—49, Secure Advantage uses a simplified-issue application along with a telephone verification interview, prescription history and MIB records to provide quick processing of your business.

Agent Instructions

For Ages 0—49 Issue Amounts: \$3,000 to \$50,000

(Applicants ages 50-85 and Idaho applicants ages 0-85 require a different application and telephone interview process. See the Agent Resource Center (ARC) at <https://producer.manhattanlife.com/> for state-specific materials and instructions.)

A point-of-sale telephone interview is required for each application. It should be done from the Proposed Insured's home phone, or on a 3-way call.

Call 1-800-737-6972, refer to “Standard Life Secure Advantage.”

Telephone Interview regular business hours (ET):

Monday-Friday 8:30 am – Midnight

Saturday-Sunday 10:00 am - 10:00 pm

If the application is written after business hours, leave a message with the Proposed Insured's name and telephone number(s), along with the best time to call the applicant. An interviewer will contact the applicant and complete the interview.

Most complete applications for amounts of **\$25,000 and under** are **issued within 24 hours of receipt**. By “complete”, we mean: (1) the application must be correctly and completely filled out, (2) the phone interview must be completed, and (3) there is no MIB record or prescription history record which contradicts the applicant's answers to the application questions.

The proposed insured must review the entire application, including the marked answers to each health question, before signing.

Sometimes medical impairments listed in the application are known to the applicant by another name. If either you or the applicant are not sure of something or have any questions about medical treatments, medications, or conditions, get as much information as you can and include it in the Comments section of the application. **Please also include the applicant's primary care physician contact info (name, phone, etc.) in the Comments section.** With more information, we are much more likely to be able to issue the policy.

Medication is a form of treatment. Medications used as a treatment for any impairment listed in the health questions in the application would require a "yes" answer to the appropriate question. We **do not** consider medications for hypertension (high blood pressure) or cholesterol to be a treatment for a heart/circulatory disorder; we consider these maintenance drugs.

Ineligible Persons include anyone who:

- Is incarcerated in a penal institution
- Is on parole or released from prison within the last 2 years
- Is in a psychiatric facility
- Is terminally ill
- Is mentally incompetent and/or lacks the legal capacity or mental facility to conduct their own affairs
- Has not been a permanent US resident for at least 12 months

******* If any questions 1-6 are answered "YES", the applicant is NOT eligible for this coverage. *******

Rate Quoting: Ages 0 - 49

For applicants ages 0 to 49 we will add a rating for certain conditions such as controlled high blood pressure that are not typically rated-up in applicants over the age of 50. Applicants ages 0 to 49 who exceed the weight table limitations may still apply but they will generally be rated up. The table below shows the likely rating for certain conditions. Using this table, you will usually be able to quote the proper premium at point of sale:

- If over Preferred Maximum Weight limit in Height/Weight..... Add 7 years to age
- If over Standard Maximum Weight limit in Height/Weight Table..... Decline
- Type 1 (insulin) Diabetes Decline
- Type II (non-Insulin) Diabetes, NOT combined with High Blood Pressure Add 6 years to age
- Type II (non-insulin) Diabetes, COMBINED with High Blood Pressure Decline
- High Blood Pressure, NOT combined with any kind of diabetes Add 6 years to age
- Any prior heart or circulatory surgery, disease or disorder We will order records and rate for cause

- We must have a physical address. If the applicant wants to be billed at a PO Box, indicate that in the comments section of the application.
- Age: Use the Proposed Insured's age at last birthday.
- Use black ink; no felt tipped pens.
- Any corrections must be initialed and dated by the Proposed Insured/Owner. Do not use white out.
- Include all Social Security numbers of beneficiaries, if available. Also list each beneficiary's share.
- The Owner's Tax ID / Social Security Number is required.
- For children under the age of 18, a parent's signature is required, even if parent is not the Owner.
- Premium Receipt — leave with owner only if collecting the initial premium payment.
- We do not accept cash, money orders, counter checks, or agent/agency checks.

Height/Weight Table for Ages 0 - 49:

Height	Rate 7 Years if Over:	Decline if Over:	Height	Rate 7 Years if Over:	Decline if Over:
4' 9"	166	176	5' 10"	240	284
4' 10"	171	181	5' 11"	247	291
4' 11"	176	203	6' 0"	254	301
5' 0"	181	212	6' 1"	260	310
5' 1"	187	219	6' 2"	268	318
5' 2"	192	227	6' 3"	275	327
5' 3"	198	236	6' 4"	283	335
5' 4"	204	243	6' 5"	289	342
5' 5"	210	250	6' 6"	297	352
5' 6"	216	258	6' 7"	305	360
5' 7"	221	260	6' 8"	312	366
5' 8"	228	269	6' 9"	319	372
5' 9"	234	277	6' 10"	325	382

Submitting Applications

You may submit completed applications to us via any of the methods listed below:

Fax

FAX ALL PARTS OF THE COMPLETED APPLICATION TO:

1-866-754-9350 or 801-538-0392

File Upload of Scanned Applications

If you have scanned the application to a PDF format, you may upload it to us using Easy Upload, our HIPAA-Secure communications server. Directions are available at <https://easyupload.manhattanlife.com/>

We will draft the initial premium for uploaded applications.

By Mail

Standard Life and Casualty Insurance Company
New Business
P.O. Box 510690
Salt Lake City, UT 84151-0690

By Overnight Delivery

Standard Life and Casualty Insurance Company
New Business
4525 S. Wasatch Blvd.; Suite 150
Salt Lake City, UT 84124-4221

We will draft the initial premium for mailed applications.