

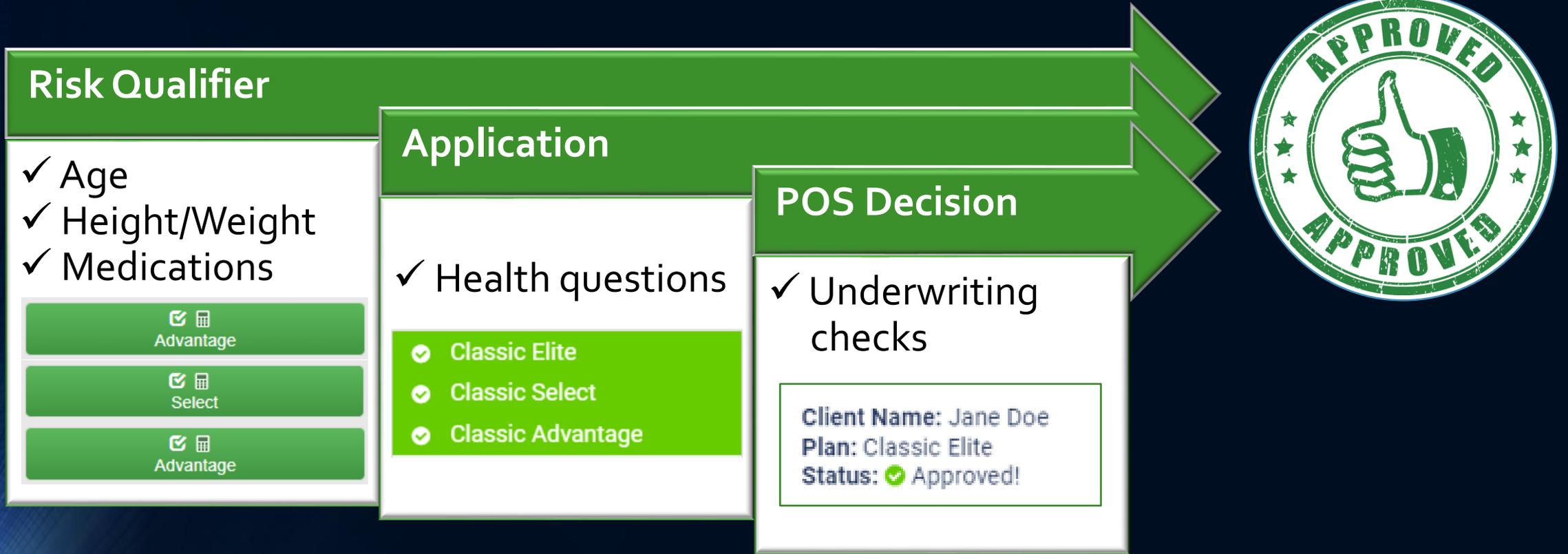


# Dignified Choice<sup>®</sup> Final Expense

**UNDERWRITING TOOLS**

*Save time and eliminate surprises*

# Simple Process



Columbian's Risk Qualifier and application let you know which plans may be available for your client, and the Point of Sale Underwriting delivers an immediate decision. Use of these tools can prevent not taken policies and policy amendments with delivery requirements.

# Risk Qualifier and Calculator

To download the Risk Qualifier, go to [www.cfglife.com/calculator/finalexpense-risk-qualifier-and-calculator/](http://www.cfglife.com/calculator/finalexpense-risk-qualifier-and-calculator/)

As you enter the client's age, height and weight, the Risk Qualifier lets you know if eligibility changes.

In this example, the client is below the minimum age for Classic Advantage, so the plan is shown in red. The medical consultation question is not required at this age, so it is grayed out.

Select the Next button to proceed to the medication list or, if you know the client isn't taking medications that would affect eligibility, select an available plan to go directly to the premium calculator.

A screenshot of the "Enter Client Information" form on the CFC website. The form includes fields for Age (35), Birthdate, State (Georgia), Gender (Female), Height (5'3"), and Weight (118). There are buttons for "Next" and "Reset". At the bottom, there are three plan selection buttons: "Elite" (green), "Select" (green), and "Advantage" (red). A green circle highlights the "Age" field with the value "35".

Medical consultation question is asked only for ages 60+

Select the Next button to proceed to the medication list

Advantage plan not available at age 35

Select an available plan to bypass the medication list

# Looking Up Medications

As you begin typing a medication name into the search bar, possible matches will appear. Because some medications are hard to spell, the list shows exact matches above the white line and medications that sound similar below the white line.

Each medication displays a color based on risk level:

- Green = low risk
- Yellow = medication may affect plan eligibility
- Red = decline for all plans

Risks levels shown are based on single medications. Some combinations of medications may affect the final underwriting decision.

The screenshot shows a search interface titled "Select What Drugs You Take" with the CFC logo. A search bar contains the text "acam". Below the search bar is a list of medication suggestions, each with a checkbox, the medication name, a risk indicator (question mark, triangle, or circle with slash), and a color-coded risk level icon. A green callout bubble points to the first two items, which are exact matches.

Medication Name	Risk Level
ACAMPROSATE CALCIUM ?	Yellow (Triangle)
ACAMPROSATE CALCIUM DR ?	Yellow (Triangle)
AKYNZEO	Red (Circle with slash)
ASCENIV	Red (Circle with slash)
ASCOMP/CODEINE	Green (Checkmark)
ASENAPINE	Yellow (Triangle)
ASENAPINE MALEATE ?	Yellow (Triangle)
ASMANEX HFA	Green (Checkmark)

Exact matches above this line. "Sounds like" matches below the line



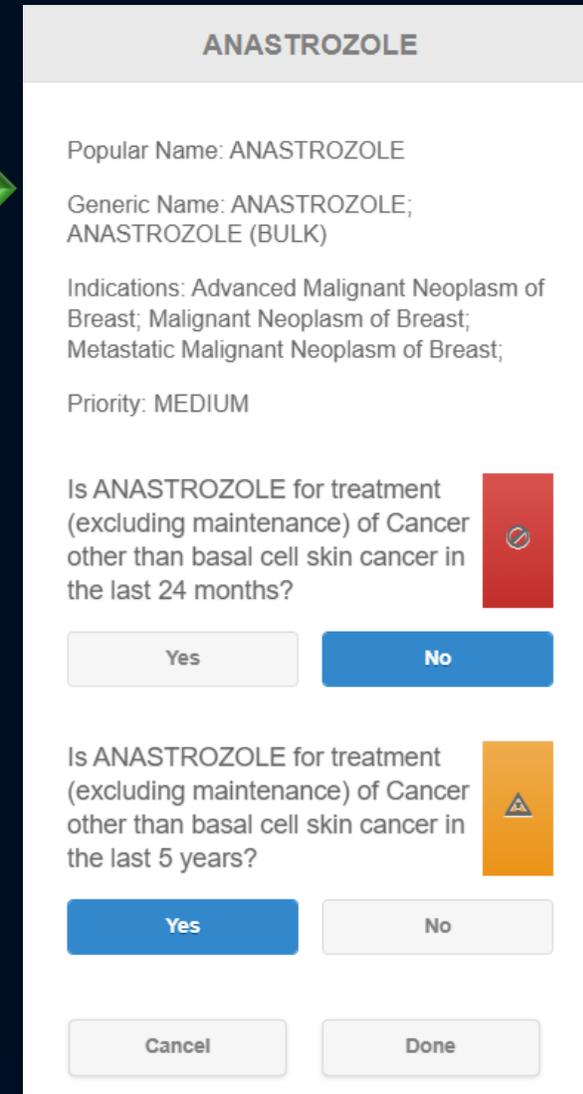
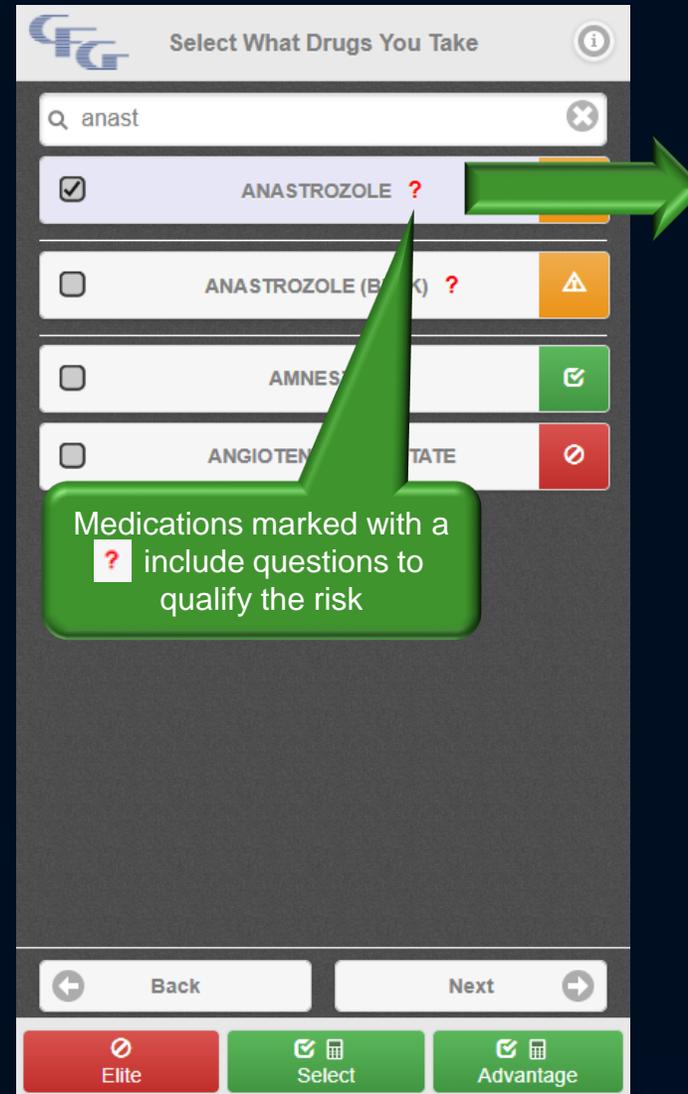
# Selecting Medications

Tap or click a medication name for conditions associated with the drug. Medications marked with a question mark have questions to qualify the risk.

As you add medications and answer any applicable questions, the status bar will reflect plan eligibility.

- Red = Not eligible for the plan
- Yellow = Underwriting will review
- Green = Eligible to apply for the plan

Choose an available plan to proceed to the calculator.



*The final underwriting decision will take into consideration combinations of drugs, the number of times filled, and the type of doctor prescribing the drug.*

# Calculating Premium or Face Amount

On this screen, you can easily calculate premium based on face amount or face amount based on premium.

Use the drop-down to select premium mode and use the buttons to select the tobacco class (for Elite or Select) and add any riders.

For premium details or to see all premiums for all modes, select the plus sign at the top of the screen.



CFG Choose Elite Features

**+** \$20,000.00 / \$47.75 Monthly EFT

Select the + sign for details

Face Amount Premium

20,000.00

-1000 +1000

Monthly EFT

No Tobacco Tobacco

No ADB ADB

Number of Children: 2

Children Face Amount: 2,500.00

POS Underwriting - Paper App

eApp w/POS Underwriting Option

**-** \$20,000.00 / \$47.75 Monthly EFT  
Female / Age 45 / NT / 118 lbs / 5'3" / GA

Min \$2,500.00 Max \$35,000.00

\$47.75 Monthly EFT

Details Modes

\$44.53 Base  
\$1.04 Child Rider 2  
\$2.18 ADB Rider

Toggle for Modes

**-** \$20,000.00 / \$47.75 Monthly EFT  
Female / Age 45 / NT / 118 lbs / 5'3" / GA

Min \$2,500.00 Max \$35,000.00

\$47.75 Monthly EFT

Details Modes

\$47.75 Monthly EFT  
\$145.44 Quarterly  
\$285.39 Semi-Annual  
\$548.83 Annual

Toggle for Details

# Point of Sale Underwriting

Point of Sale Underwriting can deliver an immediate decision through an internet or cellular connection.

- For paper applications, you must complete the application and obtain signatures before selecting the POS Underwriting – Paper App button. Do not use this button if you will be completing an electronic application.
- If you will be completing an electronic application, select the eApp w/POS Underwriting Option button. The decision will be delivered after the electronic application is completed.



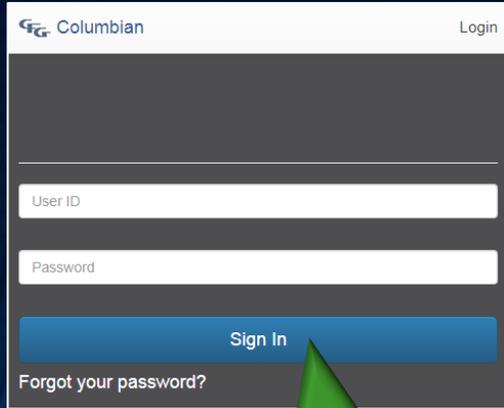
*Point of Sale Underwriting is not available for telephone sales.*

A screenshot of a mobile application interface titled "Choose Elite Features". The interface displays a summary of a policy: "\$20,000.00 / \$47.75 Monthly EFT" for a "Female / Age 45 / NT / 118 lbs / 5'3" / GA". Below this, there are two columns of buttons: "Face Amount" (selected) and "Premium", "No Tobacco" (selected) and "Tobacco", "No ADB" and "ADB" (selected). There are also input fields for "Number of Children" (set to 2) and "Children Face Amount" (set to 2,500.00). At the bottom, there are two large green buttons: "POS Underwriting - Paper App" and "eApp w/POS Underwriting Option".

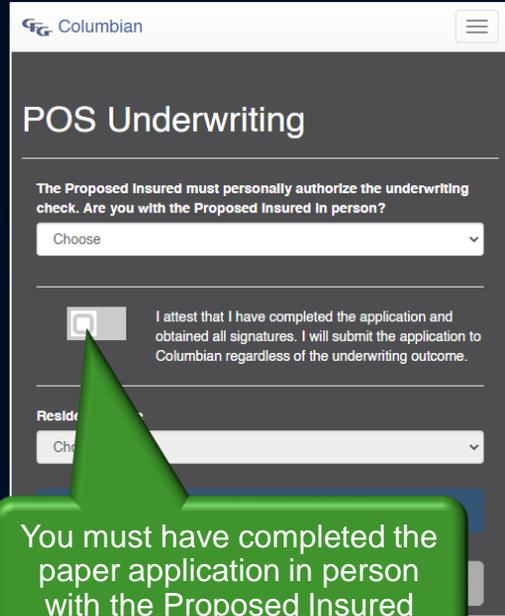
Application must be completed and signed before using this option

Decision will be rendered after eApp is completed and signed

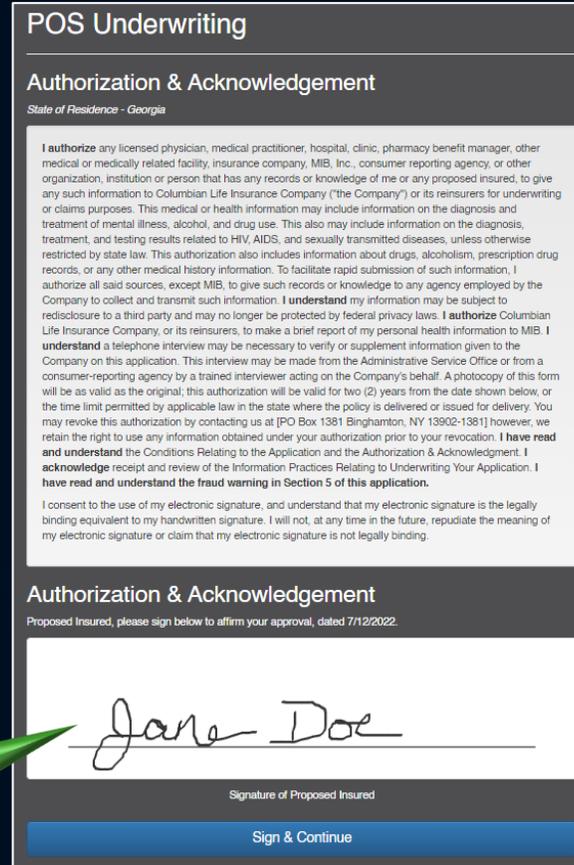
# POS with Paper Application



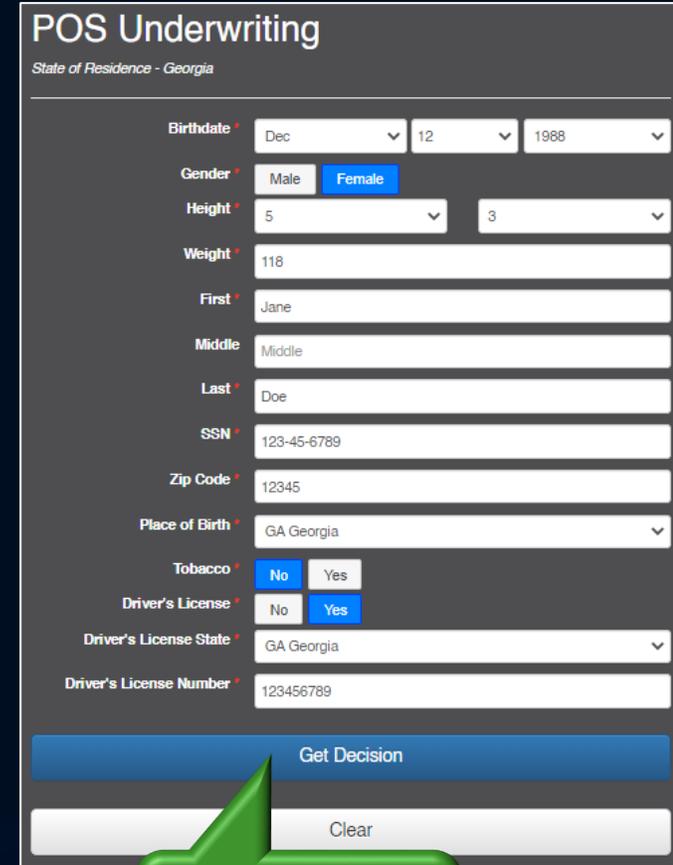
Sign in with your Partners User ID and password



You must have completed the paper application in person with the Proposed Insured



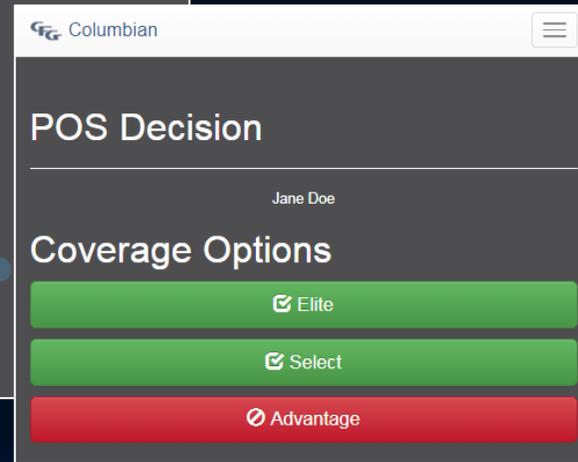
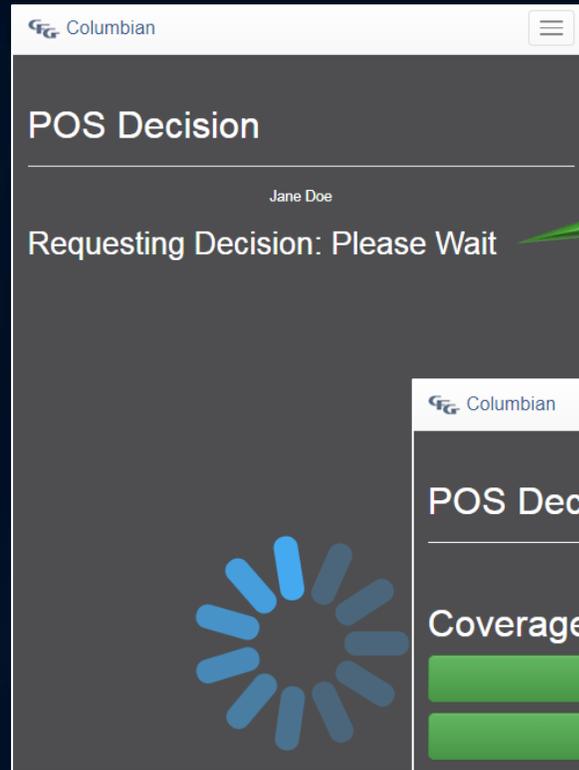
Proposed Insured must sign using fingertip, stylus or mouse



Get decision after completing required fields



# Point of Sale Decision



Most decisions delivered within 37 seconds!

Green = Client is approved for the plan, contingent on appropriate answers to the application health questions

Yellow = An Underwriter will review when the application is received

Red = decline



# POS with eApp

**Finish**

Application entries are complete. Please sign and submit the application by clicking the button below. The application forms shown below have been filled out with the answers you provided on the previous screens. Please review the forms and verify that the information on them is correct.

If any of the information on the forms is not correct, you may click the "Decline" button to return to the application entry screen and the forms shown below will be discarded.

Pay special attention to the portions of the forms where your signatures are requested.

After you review the forms, you will be asked to accept the terms of this application by signing your name electronically.

**Please use your full name when entering the electronic signature.**

Was the application completed by phone? Yes  No

**PRINT**      **Sign and Submit**      **POS Authorization**

Complete the eApp in person with the Proposed Insured

**Finish**

All required information has been entered. Your application is In Good Order.

Signature(s) are required from Jane Doe. Please pass control to that person.

Name	Signee	Checklist	
Jane Doe	Insured	✘	<b>Sign</b>
Columbian Representative	Licensed Agent	✘	<b>S</b>

**Cancel S**

POS Authorization must be signed

**POINT OF SALE AUTHORIZATION AND ACKNOWLEDGEMENT**

**COLUMBIAN MUTUAL LIFE INSURANCE COMPANY • HOME OFFICE: BINGHAMTON, NY**  
**COLUMBIAN LIFE INSURANCE COMPANY • HOME OFFICE: CHICAGO, IL**

ADMINISTRATIVE SERVICE OFFICE:  
 PO Box 1381, Binghamton, NY 13902-1381  
 (800) 423-9765 / www.cfglife.com

Issue State: GA

Signature of Proposed Insured: Jane Doe      Date: 07/14/2022

Signature of Policyowner (if other than proposed Insured): \_\_\_\_\_      Date: \_\_\_\_\_

Signature of Agent: Andy Agent      Date: 07/14/2022

Decision is rendered after the Authorization is signed

**Finish**

**Client Name:** Jane Doe  
**Plan:** Classic Elite  
**Status:** ✔ Approved!

The policy will be issued as applied for, subject to Home Office review of any existing CFG coverage.

Please be sure to tap or click the Submit button or the application will be considered withdrawn. Thank you for your business.

**Sign and Submit**

The application is signed and submitted after the decision is rendered



# Fast and Easy Underwriting

Using Columbian's Final Expense underwriting tools will save you time by letting you know what your client can qualify for while you're still with them.

If you're not using these great tools, now's the time to try them. It's just one more way we make doing business with Columbian fast and easy.

For underwriting questions, contact our Underwriting Team  
Monday - Friday 8:00am to 8:00 pm Eastern  
800-423-9765 extension 5904 or [Risk.Assessment@cfglife.com](mailto:Risk.Assessment@cfglife.com)





**Columbian Mutual Life Insurance Company**  
Home Office: Binghamton, NY



**Columbian Life Insurance Company**  
Home Office: Chicago, IL  
Administrative Service Office: Binghamton, NY

[www.cfglife.com](http://www.cfglife.com)  
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