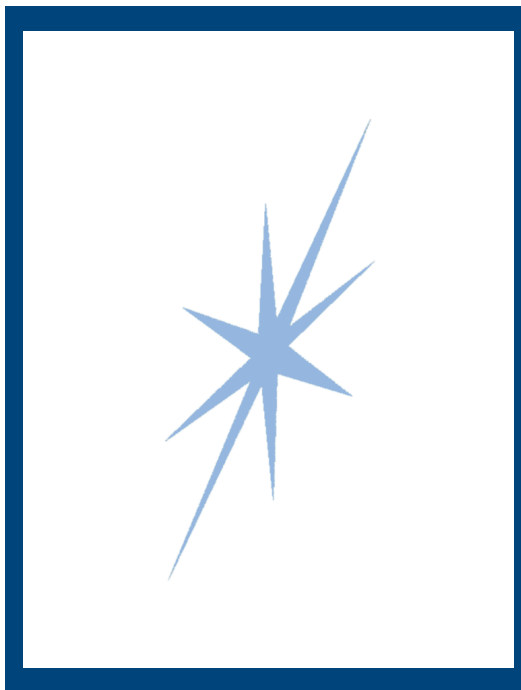


GuideStar®

Final Expense

A Whole Life Product



The American Home Life
Insurance Company
Trusted For Generations®

400 S Kansas Ave • P.O. Box 1497
Topeka, KS 66601
800-876-0199

www.amhomelife.com

For Agent Use Only

GS-RATES(Rev. 12.19)



GuideStar[®]
Final Expense

| | |
|---|-------------|
| Level & Graded Plan Overview..... | 1 |
| Level Benefit | 2 |
| Graded Benefit | 3 |
| Optional Plan Overview | 4 |
| Accidental Death Benefit | 5 |
| Calculating Monthly Rates..... | 4, 5 |
| Underwriting Requirements | 6 |
| Build Table..... | 7 |
| Submission Options | 7 |
| Telephone Inspection Rules..... | 8 |
| Phone Interview Approval | 9 |
| Accelerated Benefit Rider/Nursing Home Confinement ... | 9 |

GuideStar Final Expense

Plan Overview

- ◆ Level
Issue Ages 50-85 (Age Nearest)

- ◆ Policy Fee \$120.00

- ◆ Graded
Issue Ages 50-80 (Age Nearest)

- ◆ Minimum Benefit – \$1,000

- ◆ Maximum Benefit – Level
 - Ages 50 - 75 \$35,000
 - Ages 76 - 80 \$15,000
 - Ages 81 - 85 \$ 7,500

- ◆ Maximum Benefit – Graded
 - Ages 50 - 75 \$10,000
 - Ages 76 - 80 \$ 5,000

- ◆ Includes Accelerated Benefit Rider and Nursing Home Confinement (Pg. 9)
(Nursing Home Rider Not Approved in Florida)

- ◆ Accidental Death Benefit Rider
available (Pg. 5)

- ◆ Simplified Issue

- ◆ Planning Guide

Level

Annual Premium Rates Per \$1,000

Minimum: \$1,000

Policy Fee: \$120.00

| A G E | MALE | | FEMALE | |
|-------------|-------------|---------|-------------|---------|
| | Non-Tobacco | Tobacco | Non-Tobacco | Tobacco |
| 50 | \$36.98 | \$49.24 | \$28.46 | \$42.91 |
| 51 | 38.83 | 51.10 | 29.31 | 44.81 |
| 52 | 40.77 | 53.21 | 30.19 | 47.08 |
| 53 | 42.41 | 55.52 | 31.10 | 49.50 |
| 54 | 44.10 | 57.99 | 32.03 | 51.97 |
| 55 | 45.42 | 60.61 | 32.99 | 54.47 |
| 56 | 45.88 | 63.38 | 33.98 | 57.01 |
| 57 | 46.34 | 66.31 | 35.00 | 59.64 |
| 58 | 47.26 | 69.43 | 36.05 | 62.39 |
| 59 | 48.68 | 72.76 | 37.49 | 65.31 |
| 60 | 50.63 | 76.33 | 38.99 | 68.42 |
| 61 | 53.46 | 80.18 | 40.03 | 71.74 |
| 62 | 56.23 | 84.34 | 41.44 | 75.28 |
| 63 | 59.02 | 88.85 | 43.17 | 79.00 |
| 64 | 61.90 | 93.75 | 45.18 | 82.89 |
| 65 | 64.92 | 99.09 | 47.45 | 86.91 |
| 66 | 68.16 | 104.90 | 49.97 | 91.04 |
| 67 | 71.70 | 111.25 | 52.73 | 95.26 |
| 68 | 75.59 | 118.17 | 55.76 | 99.57 |
| 69 | 79.91 | 125.74 | 59.08 | 103.98 |
| 70 | 84.74 | 134.02 | 62.74 | 108.55 |
| 71 | 90.14 | 143.09 | 66.79 | 113.36 |
| 72 | 96.19 | 153.04 | 71.30 | 118.51 |
| 73 | 102.97 | 163.96 | 76.35 | 124.15 |
| 74 | 110.54 | 175.98 | 82.04 | 130.45 |
| 75 | 118.98 | 189.22 | 88.48 | 137.59 |
| 76 | 128.37 | 203.82 | 95.78 | 145.75 |
| 77 | 138.79 | 219.93 | 104.09 | 155.11 |
| 78 | 150.31 | 237.73 | 113.55 | 165.80 |
| 79 | 163.01 | 257.39 | 124.32 | 177.87 |
| 80 | 176.97 | 279.13 | 136.58 | 191.29 |
| 81 | 191.13 | 303.14 | 148.87 | 205.86 |
| 82 | 206.42 | 329.65 | 160.78 | 221.20 |
| 83 | 222.93 | 358.87 | 172.04 | 236.65 |
| 84 | 240.77 | 391.04 | 184.08 | 251.23 |
| 85 | 260.03 | 426.39 | 195.12 | 263.57 |

Graded

Annual Premium Rates Per \$1,000

Minimum: \$1,000

Policy Fee: \$120.00

| A G E | MALE | | FEMALE | |
|-------------|-------------|---------|-------------|---------|
| | Non-Tobacco | Tobacco | Non-Tobacco | Tobacco |
| 50 | 57.44 | \$81.81 | 46.87 | 73.42 |
| 51 | 62.64 | 86.58 | 48.81 | 78.28 |
| 52 | 69.05 | 91.35 | 50.75 | 83.14 |
| 53 | 74.60 | 96.12 | 52.68 | 88.00 |
| 54 | 79.59 | 100.89 | 54.62 | 92.86 |
| 55 | 83.45 | 105.66 | 56.56 | 97.72 |
| 56 | 86.13 | 111.50 | 58.44 | 102.91 |
| 57 | 88.12 | 117.34 | 60.33 | 108.10 |
| 58 | 89.47 | 123.18 | 62.21 | 113.30 |
| 59 | 90.23 | 129.02 | 64.10 | 118.49 |
| 60 | 90.45 | 134.86 | 65.98 | 123.68 |
| 61 | 91.31 | 143.12 | 68.49 | 131.61 |
| 62 | 92.18 | 151.37 | 71.01 | 139.53 |
| 63 | 93.04 | 159.63 | 73.51 | 147.46 |
| 64 | 93.91 | 167.88 | 76.04 | 155.38 |
| 65 | 94.77 | 176.14 | 78.55 | 163.31 |
| 66 | 101.51 | 187.24 | 83.74 | 171.92 |
| 67 | 108.25 | 198.34 | 88.94 | 180.53 |
| 68 | 114.98 | 209.44 | 94.13 | 189.13 |
| 69 | 121.72 | 220.54 | 99.33 | 197.74 |
| 70 | 128.46 | 231.64 | 104.52 | 206.35 |
| 71 | 138.46 | 248.95 | 111.76 | 215.85 |
| 72 | 148.46 | 266.26 | 118.99 | 225.35 |
| 73 | 158.46 | 283.56 | 126.23 | 234.84 |
| 74 | 168.46 | 300.87 | 133.46 | 244.34 |
| 75 | 178.46 | 318.18 | 140.70 | 253.84 |
| 76 | 193.20 | 351.84 | 153.14 | 274.87 |
| 77 | 207.95 | 385.51 | 165.58 | 295.89 |
| 78 | 222.69 | 419.17 | 178.02 | 316.92 |
| 79 | 237.44 | 452.84 | 190.46 | 337.94 |
| 80 | 252.18 | 486.50 | 202.90 | 358.97 |

Premium Modes Overview

Annual (100% of Annual Premium)

Semi-Annual (52% of Annual Premium)

Quarterly (26.5% of Annual Premium)

Monthly Automatic (.0875 of Annual Premium)

Check to see if you're calculating monthly rates correctly!

Ex. 1) Male, Level, 50, NT, \$10,000 Death Benefit

$$\begin{aligned}\text{Annual} &= [(\text{Rate Per Thousand}) \times (\# \text{ of Thousands}) + (\text{Policy Fee})] \\ &= [(36.98) \times (10) + (\$120.00)] = \$489.80\end{aligned}$$

$$\begin{aligned}\text{Monthly} &= [(\text{Annual Premium}) \times (\text{Monthly Processing Factor})] \\ &= [(\$489.80) \times .0875] = \$42.86\end{aligned}$$

Premium Modes

Annual

Semi-Annual (.52)

Quarterly (.265)

Monthly Automatic (.0875)

| Accidental Death Benefit | | | | |
|---|-------|--|----------|--|
| For Level Benefit Plans Only Rates per \$1,000 | | | | |
| Issue Ages | | | Premiums | |
| | 50-59 | | \$1.20 | |
| | 60-69 | | \$1.80 | |
| | 70-74 | | \$2.40 | |

Accidental Death Benefit (ADB)

Ages of Issue 50 -74
 Minimum Amounts \$1,000

Maximum Amount

An amount equal to but no greater than the face amount of the base policy. In no event will the benefit exceed \$35,000.

Benefit Termination

Policy anniversary nearest age 80.
 When the base policy is surrendered.

To Calculate Monthly ADB Rates...

Formula to calculate Monthly Price of ADB

$$= \left[\frac{\text{Annual ADB Rate per Thousand}}{\text{---}} \times \frac{\text{(# of Thousands)}}{\text{---}} \right] * .0875$$

Ex. 1) Male, Level, 50, NT, \$10,000 D B + **\$10,000 ADB**

Mo. Rate without \$10,000 ADB = \$42.86 (See Ex. 1 on Pg. 4)

Mo. Rate with \$10,000 ADB = \$42.86 + [(1.2) x (10)]* .0875 = \$43.91

Underwriting Information

Coverage is routinely underwritten from the application.

No examinations or laboratory studies are required.

MIB reports and prescription drug reports are ordered on all applicants.

We reserve the right to order medical records where we believe such information will improve the offer we can make to the applicant.

APS will be ordered on all applications with face amounts greater than \$25,000.

We encourage our agents and applicants to give explanations for all “yes” answers, so we can make a fair judgment regarding insurability.

Application Health Questions

- Questions 1-9 Answer "No" **Qualify for Level Death Benefit**
- Questions 1-5 Answer "Yes" **Decline - Do Not Submit Application**
- Questions 6-9 Answer "Yes" **To one or two questions qualify for Graded product. Answer "yes" to more than two Do Not Submit Application.**

If there are circumstances that modify the medical risk, an explanation should be given in the Remarks/Requests section of the application. Underwriting consideration will be given and additional medical information may be sought if it is believed that an offer of coverage is possible. If it is not possible to offer any coverage or it is necessary to change from Level to Graded, we will write a letter of explanation to the applicant.

Graded Death Benefit

Reduced death benefits are paid during the first two years of the policy. The reduced benefits per \$1,000 of ultimate death benefit are shown below:

| | Premium Class |
|--------------------------|---------------------------------|
| <u>ISSUE AGES</u> | <u>MNT, F NT, FT, MT</u> |
| 50-80 (age nearest) | 25% - 50% - 100% |

GuideStar

Build Table

| HEIGHT | DECLINE WEIGHT | LEVEL WEIGHT | *LIMITED WEIGHT | DECLINE WEIGHT |
|--------|----------------|--------------|-----------------|----------------|
| 5'0" | Below 80 | 80-240 | 241-270 | 271 - up |
| 5'1" | Below 85 | 85-245 | 246-275 | 276 - up |
| 5'2" | Below 90 | 90-250 | 251-280 | 281 - up |
| 5'3" | Below 90 | 90-255 | 256-285 | 286 - up |
| 5'4" | Below 90 | 90-265 | 266-290 | 291 - up |
| 5'5" | Below 95 | 95-275 | 276-305 | 306 - up |
| 5'6" | Below 95 | 95-280 | 281-310 | 311 - up |
| 5'7" | Below 100 | 100-290 | 291-315 | 316 - up |
| 5'8" | Below 105 | 105-300 | 301-325 | 326 - up |
| 5'9" | Below 105 | 105-305 | 306-330 | 331 - up |
| 5'10" | Below 105 | 105-310 | 311-335 | 336 - up |
| 5'11" | Below 110 | 110-320 | 321-335 | 336 - up |
| 6'0" | Below 115 | 115-325 | 326-340 | 341 - up |
| 6'1" | Below 115 | 115-335 | 336-350 | 351 - up |
| 6'2" | Below 120 | 120-340 | 341-355 | 356 - up |
| 6'3" | Below 125 | 125-345 | 346-360 | 361 - up |
| 6'4" | Below 130 | 130-355 | 356-365 | 366 - up |
| 6'5" | Below 130 | 130-360 | 361-370 | 371 - up |
| 6'6" | Below 140 | 140-365 | 366-375 | 376 - up |

*If height and weight fall within the limited range it will count as a yes answer.

NOTES:

Use the Build Table as a guide to field selection. Weight will be considered in combination with other impairments to determine the applicant's insurability.

Submission Options

[AHL prefers electronic submission](#) (underwriting direct fax # 785-235-1037 or upload via website) vs. receiving applications in the mail because it expedites processing, issuance, and settling of commissions. [Always use the Application Submission Cover Page](#) (Form U-ASCP), regardless of submission method, when submitting applications to AHL. In addition to telling AHL what forms we should be receiving, this Cover Page can serve as legal authorization for AHL to draft the initial premium (if the client accepts), allowing the agent to provide a conditional receipt and AHL to immediately settle commissions.

Final Expense Telephone Inspection Rules

We conduct telephone inspections on all final expense applications.

Home Office Interviews: (800) 298-6020

7:45 AM to 8:00 PM (CST), Monday - Thursday

7:45 AM to 4:25 PM (CST), Friday

Interviews completed on Friday afternoon will be reviewed by underwriting on the following business day.

Spanish Interviews Available:

10:30 AM to 7:00 PM (CST), Monday - Thursday

11:30 AM to 5:00 PM (CST), Friday

If you are unable to complete a Point of Sale Telephone interview during available interview hours, you may:

1. Have your customer call the Home Office on the following business day to complete the interview.
2. Call the Home Office and ask our interviewer to contact your customer to complete the interview.

Approval During Phone Interview

In order to approve an Application at the time of the telephone interview, AHL must be able to evaluate your client's insurability. AHL will:

1. Run a MIB and Script Check (in order for AHL to do this you must have read and explained to your client the Application's Declarations and Authorization Declarations and Authorization to Obtain Information). AHL will obtain an electronic signature from your client affirming they have been read the authorizations and agree to AHL obtaining this information. **(Continue on Page 9)**
2. Ask the Application's Health Questions (in order) to confirm your client's answers.

If the Information provided indicates we can insure your client we will approve the Application at the conclusion of the telephone interview and a policy will be issued when the Application is received by AHL.

Accelerated Benefit Rider / Nursing Home Confinement (ABR)

The Accelerated Benefit Rider (ABR) enables the owner of an American Home Life policy to claim a portion of the policy's death benefit prior to the actual death of the insured, when the Insured is diagnosed as having a Qualifying Event. There is no premium for the ABR benefit until the benefit is claimed. The Company will require a physician's statement verifying the existence of a terminal illness or certifying permanent confinement to a nursing home.

1. Accelerated Benefit: The Insured must be diagnosed as having a non-correctable medical condition that, with reasonable medical certainty, will result in the death of the Insured within 12 months from the date on which this benefit is requested.

2. Nursing Home Confinement: *The Insured must be permanently and continuously confined to a nursing home that provides nursing care as its primary function. Nursing Home confinement must begin after the effective date of this policy, at least 90 days prior to the request for acceleration of benefits.

***NOT AVAILABLE IN FLORIDA.**

***** IMPORTANT *****

Summary and Acknowledgement form must be signed by the agent and owner at the time of application. One copy is to be given to the applicant. The other is to be sent to us with the application.