



Liberty Bankers Life

Insurance Company



LIBERTY BANKERS LIFE
MEDICARE SUPPLEMENT
AGENT GUIDE

CONTACT INFORMATION



Agent Support

1-844-770-2400

- Sales and Marketing
- Commissions
- Supplies
- Product Availability



New Business

1-844-770-2400

- New Business Status
- Underwriting
- Claims
- Fax App Submission

1-855-493-9242

Mailing Address

Administrative Office
P.O. Box 15357
Clearwater, FL 33766-5357

Overnight/Express Address

2650 McCormick Drive
Clearwater, FL 33759

Claims Address

P.O. Box 14707
Clearwater, FL 33766-4707



Policyholder Services

1-844-770-2400



Technology

1-844-550-1200

- eApp
- eContracting
- AgentXcelerator (<https://aiatpa.agentxcelerator.com/>)

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CONTRACTING AND APPOINTMENTS

Liberty Bankers offers both eContracting and paper contracts.

Just In Time (JIT) Appointments – Liberty Bankers Life processes appointments just in time. Contracts will be processed and issued a producer number. Appointment with the state will not happen until you submit your first piece of business. While it is preferred you contract and obtain a producer code prior to submitting business, we understand that is not always possible. Please print and sign your name and include your NPN number on any business submitted prior to receiving your producer code to assist with timely processing.

Pre-Appointment States – Some states require that you are appointed with the Department of Insurance prior to taking an application. These states are NM, PA and UT.

IMPORTANT: Before writing business in these states, confirm that you are appointed with Liberty Bankers.

Appointment Fees – Liberty Bankers Life will pay all appointment fees either on a JIT or preappointment basis dependent on state requirements.

Welcome Letters – Agent welcome letters will be sent out upon issuance of a producer number. Welcome letters are sent to the email address you specified in your agent contract.

Agent Portal – When you receive your welcome letter with your producer code you will need to register for access to Agent Portal by using the link in the Welcome Email. Once registered, you will find all of your current materials and forms, new business status, commission reports and much more! After you register, visit <https://aiatpa.agentxcelerator.com> to login.

Advancing – Liberty Bankers offers commission advancing of 9 months. Interest is charged on all advances at 1% per month. For more information please consult your agent contract.

Errors and Omissions (E&O) – E&O is not required.

Licensing Requirements – If you are completing a contract as a corporation, and the state issues a corporate license, you must have a corporate license to receive commissions. The below states require that everyone in the agent hierarchy must be licensed to receive overrides.

FL, GA, KS, LA, MS, MT, NM, PA, SD, VA, WV

NEW BUSINESS

New Business Mailing Address

Liberty Bankers Life Insurance Company
Administrative Office
PO Box 15357
Clearwater, FL 33766-5357

New Business Overnight Mail

Liberty Bankers Life Insurance Company
2650 McCormick Dr
Clearwater, FL 33759

Application Fee – The standard application fee is \$25 in most states for each application submitted. Application fees may vary by state, please refer to the Underwriting Guide for state specific details. The application fee is non-commissionable.

HEIGHT AND WEIGHT CHART

	Lower Weights - Higher Weights		
Height	Standard Premium Weight	*Preferred Premium Weight ¹	Standard Premium Weight
4' 2"	54 - 59	60 - 124	125 - 149
4' 3"	56 - 62	63 - 129	130 - 155
4' 4"	59 - 64	65 - 135	136 - 161
4' 5"	60 - 67	68 - 140	141 - 168
4' 6"	63 - 70	71 - 145	146 - 174
4' 7"	65 - 72	73 - 151	152 - 181
4' 8"	67 - 75	76 - 156	157 - 187
4' 9"	70 - 78	79 - 162	163 - 194
4' 10"	72 - 80	81 - 167	168 - 201
4' 11"	75 - 83	84 - 173	174 - 208
5' 0"	77 - 86	87 - 179	180 - 215
5' 1"	80 - 89	90 - 185	186 - 222
5' 2"	83 - 92	93 - 191	192 - 229
5' 3"	85 - 95	96 - 198	199 - 237
5' 4"	88 - 98	99 - 204	205 - 244
5' 5"	91 - 101	102 - 210	211 - 252
5' 6"	93 - 104	105 - 217	218 - 260
5' 7"	96 - 108	109 - 223	224 - 268
5' 8"	99 - 111	112 - 230	231 - 276
5' 9"	102 - 114	115 - 237	238 - 284
5' 10"	105 - 117	118 - 244	245 - 292
5' 11"	108 - 121	122 - 251	252 - 301
6' 0"	111 - 124	125 - 258	259 - 309
6' 1"	114 - 128	129 - 265	266 - 318
6' 2"	117 - 131	132 - 273	274 - 326
6' 3"	121 - 135	136 - 280	281 - 335
6' 4"	124 - 139	140 - 288	289 - 344
6' 5"	127 - 142	143 - 295	296 - 353
6' 6"	130 - 146	147 - 303	304 - 363
6' 7"	134 - 150	151 - 311	312 - 373
6' 8"	137 - 154	155 - 319	320 - 382
6' 9"	140 - 158	159 - 327	328 - 392
6' 10"	144 - 162	163 - 335	336 - 402
6' 11"	147 - 166	167 - 343	344 - 412
7' 0"	151 - 170	171 - 351	352 - 422
7' 1"	155 - 174	175 - 360	361 - 432
7' 2"	158 - 178	179 - 368	369 - 442
7' 3"	162 - 182	183 - 377	378 - 452
7' 4"	166 - 186	187 - 386	387 - 463

*Preferred premium requires both a Preferred Premium Weight (green column) and no tobacco or nicotine use within the past 12 months.

If the applicant's weight falls within one of the Standard Premium Weight columns, standard premium rates apply even if the applicant has not used tobacco or nicotine within the past 12 months.

If the applicant's weight is below the lowest Standard Premium Weight or above the highest Standard Premium Weight, the applicant is not insurable.

¹In ND only, premium rates are Tobacco/Nicotine and Non-Tobacco/Non-Nicotine. Height and weight is not a factor for determination of premium rate. In ND, use the Height/Weight table from the Standard Low to the Standard High to determine insurability.

METHODS OF SUBMISSION

If sending in a check with an application, the application must be submitted via mail.

eApplication (Our PREFERRED Method) – To ensure timely processing, applications can be submitted quickly and easily via the eApplication process found through the AgentXcelerator agent portal. If submitting initial premium via check, the application must be printed out and mailed. Electronic submissions are only valid with EFT payment mode. Application status can be found on your agent portal. Applications cannot be processed until they are In Good Order. eApplications help to minimize errors that frequently cause delays in processing.

Fax Application (EFT ONLY) – Completed paper applications, or printed eApplications, can be faxed in to the New Business department. Please attach a fax cover sheet with your agent number. The fax cover sheet can be found on the agent portal or in the application pack. Fax completed applications to 1.855.493.9242.

Paper Application ONLY available when mailing initial premium with application – Paper applications can be found on the agent portal. Once completed, they can be mailed overnight or regular mail to the applicable address above. Status on paper applications can be found on the agent portal. If you are mailing in your application please do not fax in the application unless this is your first application in that state.

INCOMPLETE APPLICATIONS

If we receive an incomplete application, you will be notified via email three times a week until the application is in good order. AgentXcelerator, your agent portal, is updated the following business day.

If we do not receive the information within 15 calendar days, a final request letter will be sent giving you an additional 10 days to submit the necessary information. If we do not receive the information by the final request due date, the application will be withdrawn as incomplete and a letter will be sent to you and the client. If premium was submitted with the application, a refund will be sent to the applicant under separate cover. If the client still wants to obtain a policy with Liberty Bankers Life, a new application must be taken and resubmitted.

Still have questions about your current business?

Call agent support at 1.844.770.2400

CHECKING ON APPLICATION STATUS

Application status can be found on the AgentXcelerator agent portal.

If you submit an application via eApplication or fax, please allow up to 2 business days for your business to be viewable on the agent portal. When mailing a paper application, if status is not available on the agent portal within 5-7 days, please contact our office for status

Declined Application – If the application is declined, notification will be sent to both you and the applicant. Please note, due to HIPAA regulations, the information in your letter will be limited. The applicant will receive additional information regarding the reason for the declination.

Appealing a Declined Application – Declination letters include instructions to appeal the underwriting decision. A written request for appeal, along with additional medical documentation supporting the request should be submitted. Allow 30-60 days for the appeal to be processed. A notification of the decision will be mailed to both you and the applicant.

COMPLETING THE APPLICATION IN GOOD ORDER (IGO)

Basic Guidelines

Current Materials – Agents must ensure they are using the most current materials when taking an application. To view the most current Outline of Coverage, applications, and state-specific forms, please refer to the agent portal.

Policy Issue State – The issue state is the resident state of the applicant. The resident state is determined by the state in which the applicant files federal income taxes. Agents must be appointed in the state where the application is signed and may also require an appointment in the issue state.

Effective Dates – Effective dates can be requested any day of the month with the exception of the 29th, 30th or 31st. The requested effective date cannot be prior to the application signature date. Please refer to the underwriting guidelines for additional information with respect to requested effective dates.

Premium Calculations – Verify the premium rates are current prior to submission, including the zip code, age, household discount, etc. For EFT, the initial premium will draft upon policy issuance. Subsequent premium drafts will occur on the draft date selected by the applicant on the EFT Authorization Form in the application.

- **Application Fee** – There is a one-time application fee of \$25 which is nonrefundable and is non-commissionable. (The application fee may vary by state, please refer to the Underwriting Guide for state specific details.) The Household Discount does not apply to the application fee.
- **Premium Modal Factors** – Annual, Semi-Annual and quarterly premium modes are available on an EFT and Direct Bill basis. Monthly premium mode is only available by EFT.

NOTE: Policies may be issued on an annual, semi-annual, quarterly or monthly mode. To obtain annual, semi-annual, quarterly premiums, multiply the Monthly Premium Amount by 12, 6, or 3 respectively.

Calculating Initial Premiums

Calculated Premium (include app fee; HHD)				
\$ _____	- \$ _____	+ \$ _____	= \$ _____	
premium	HHD	app fee	total	

Note:

Premium is the premium for client's EXACT AGE AS OF THE REQUESTED EFFECTIVE DATE multiplied by the premium modal factor.

Some exceptions may apply around open enrollment when turning 65.

Household Discount is the premium multiplied by the Household Discount factor for the applicant's state.

First month's premium is calculated by taking the proper modal premium, less the Household Discount, plus the Policy Fee.

Ongoing premium is the proper modal premium less the Household Discount.

Paper Applications and Fax Applications – Paper applications are acceptable, and must be written legibly. Applications that are not legible will delay processing. Applications may also be faxed to 1.855.493.9242 provided the modal premium selected is EFT. If premium is collected with the application, the application must be submitted via the mail.

- **Errors** – draw a line through the error and have the client initial and date the corrections. Do not use correction fluid or tape, as it will not be accepted.
- **Premiums** – Initial premium must be paid before (check) or at the time of issuance (EFT). Initial premium that is paid by check must be submitted with the application or quickly thereafter. If submitting initial premium via check, application must be printed out and mailed; if you are mailing in your application, there is no need to fax in the application. Third-party payments will not be accepted, only payment from the insured or an immediate family member.
- **Signatures** – Signatures must be original, no stamped signatures will be accepted for either the client or the agent. Be sure to review all pages to ensure that all signature lines have been signed and dated prior to submission; not doing so will cause processing delays.
- **HIPAA** – The HIPAA Authorization form must be signed and dated by the client. The HIPAA Authorization form must be submitted with each underwritten application.
- **Submissions** – Applications for Medicare Supplements must be received within 30 days of the client's signature date. Applications cannot have a requested effective date prior to the client's signature date. If this is your first application in a JIT state, you must submit your application immediately upon signature due to state appointment requirements. A delay in submission may require you to rewrite the application.

Paper Applications can be mailed directly to the appropriate mailing address, if the applicant has selected EFT for premium payment the application may be faxed to 1.855.493.9242.

New Business Mailing Address

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Clearwater, FL 33759

SUPPLIES

All supplies are ordered through the AgentXcelerator agent portal.

3 Easy Steps to Getting Your Materials

- 1.** Log in to your agent portal
- 2.** Click on the **'Sales Forms & Materials - Order Printed Supplies'** link under the **'Resources'** tab
- 3.** Navigate through the available products to select the appropriate materials and quantities you would like to order. You will add your items to the shopping cart and then check out accordingly, following the prompts on your screen. Be sure to complete all required fields for where your order needs to be shipped and include a valid email address to receive order status updates. This information may be pre-populated for you based on your user profile; please verify accuracy before submitting your order.

TRACKING SUPPLY ORDERS

Once you have placed an order, you will receive an automated email at the email address you provided during checkout. This first email will confirm receipt of your order. You will also receive another email alert as your order is fulfilled. The final email you receive will confirm when your order has shipped and include a UPS tracking number to allow you to track shipping on your order. Questions regarding supply orders can be directed to Supply@AIASVCS.com.

COMMISSIONS

Commission Advancing - Liberty Bankers Life offers 9 month commission advancing. Your election to receive advanced commissions is indicated when you complete your agent contract. This election must be approved by your upline. You may change your advancing option. Interest is charged on all advances at 1% per month. For more information please consult your agent contract. Advances will only be paid on policies issued with monthly EFT premium modes that are not Guaranteed Issue. Interest is assessed to you monthly on the unearned commission balance.

Advancing Caps – Commission advances have a maximum of \$1,500 per case.

Chargebacks – Chargebacks are calculated weekly and commissions are applied 100% to any debit balance.

Commission Payment Frequency – Commissions will be paid weekly. You can view your current commission statements online in the agent portal.

SUBMITTING ADVERTISING MATERIALS FOR COMPLIANCE APPROVAL

Liberty Bankers Life requires that all materials that include information about their product, include their logo, or recruiting materials specific to Liberty Bankers must be approved by Liberty Bankers compliance prior to usage. Materials for compliance review must be accompanied by the 'Marketing and Advertising Compliance Approval Request' form which can be downloaded from the agent portal.

General Rules

- Complete the compliance approval form and attach it to the materials requiring approval
- Email completed forms and materials to Compliance@libertybankerslife.com
- Allow at least 5 business days for initial review

Note: To avoid delays in approval, please make sure that you have reviewed and followed all of the requirements listed on the compliance approval form.



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Insurance Company

ADMINISTRATIVE OFFICE
P.O. BOX 15357
CLEARWATER, FL 33766-5357