Asset Care®
Process Guide

A reference tool to help provide seamless processing on Asset Care business, including new business and underwriting.

OneAmerica® Financial

Pre-Underwriting Inquiry (PUI)

3 steps for new business

Asset Care®

FAQ

Pre-Underwriting Inquiry

Pre-Underwriting Inquiry (PUI) is our informal inquiry program. A PUI lets you submit information about an applicant's history and receive an underwriter's response about the applicant's insurability for the indicated product(s), eligibility for fluidless underwriting and tentative rate classification.

With this program, you can receive an informal evaluation within 24 hours without taking a full application or submitting to full underwriting. A PUI is especially useful when talking to an applicant whose insurability is questionable. You can ask for an underwriting opinion before applying for coverage. This saves time for you and the applicant, and it sets expectations for them.

Getting started

To use PUI, simply complete the **PUI form** (I-35823) and email it to **CSPUI@oneamerica.com.** Underwriting will review your request and respond within 24 hours.

Tips to support the PUI process

Prior to completing the PUI form, refer to the **PUI checklist** (I-36066) for some helpful hints with form completion and submission. Refer to the impairment guidelines for Asset Care on Page 6.

- Provide detailed information about the applicant's history. The more detailed the history, the more detailed our response can be. You may attach up to five additional pages of information (such as a pathology report or lab results) to your PUI form.
- Never guarantee the PUI response to the applicant. The response is tentative, subject to receipt of a formal application and review of all requested underwriting requirements.
- If you proceed with submitting a formal application, please include a copy of the PUI response.
- PUI responses are valid for 60 days, assuming no significant change in health.

Contact information

Sales Desk for illustrations, product design and marketing materials: **844-833-5520**.

Pre-Underwriting Inquiry: **CSPUI@oneamerica.com.**

Submission for applications:

- **Care Solutions Calculator**
- **OneSource Online (OSO)**
- Your organization's eApp platform

Fax: **317-285-5235**

Mail:
OneAmerica Financial
P.O. Box 6062
Indianapolis, IN 46206-0368

Licensing: **844-614-3167**

3 steps for new business

1. Submission	2. Underwriting	3. Issue/Pay
Confirm licensing	Requirements	Policy issue/pay
Assess eligibility	Review	Policy delivery
Submit an application	Decision	Delivery requirements returned

Asset Care

Step 1: Submission

Confirm agent's licensing

Confirm that all contracting and training is completed.

Every state has specific sales requirements for Care Solutions products. To verify your state requirements, contact your back office or the OneAmerica Financial licensing team at **844-614-3167**.

If an agent sells a policy but is not licensed or appointed, or has not completed state-required training, they must submit a new application and consumer suitability questionnaire before the case can be paid.

Some states have an annuity training requirement. The required training may be a product-specific course, a general course about annuities or both. You will be required to complete training for the Asset Care product Asset Care Annuity Funding Whole Life.

To complete the Care Solutions product training requirement, go to: **https://naic.pinpointglobal.com/oneamerica/apps/default.aspx**. On this site, you have the option to complete the Care Solutions product training requirement or upload a copy of your training certificate.*

OneAmerica Financial requires that agents are licensed and appointed in the states where the application insured(s)/owner(s) reside and where the application is signed.

Example: If an agent has an applicant who lives in Illinois and signs the application in Indiana, that agent must be licensed and appointed in both Illinois and Indiana.

Assess eligibility

Field underwriting tools help agents determine when applicants qualify for Care Solutions products.

The first step is to review the impairment guidelines for any issues that may disqualify the applicant for coverage. If there are still questions on what products the applicant can qualify for, the agent can submit PUI form (I-35823) to assess eligibility.

Joint applicants

Defining joint applicants for Asset Care

We will consider joint applicants for all Asset Care products. Joint applicants are defined as legally married spouses, domestic partners or those in a civil union.

Age parameters for joint applicants

Standard/preferred	Maximum difference between younger and older age is 25 years.
Tables 5, 6 and 8	Maximum difference between younger and older age is 10 years.

*If you are on a Career or Independent Brokerage contract, please log in to the Center of Excellence via OneSource Online to access the required training. **If you log in to the incorrect site and complete training elsewhere, your applications may be delayed.**

Asset Care impairment guidelines (not all-inclusive)

Impairments	Will consider for fluidless underwriting	Will consider with full underwriting	Decline for Asset Care
Activities of daily living deficits			✓
Alcoholism — recovered for 3 years		✓	
ALS			✓
Alzheimer's/dementia			✓
Aortic/mitral insufficiency — mild, no symptoms, no surgery being considered	✓	✓	
Aneurysm		✓	
Anxiety	✓	✓	
Asthma	✓	✓	
Atrial fibrillation — stable, no coexisting heart disorder, stroke or diabetes	✓	✓	
Balance disorder/gait impairment			✓
Bipolar disorder		✓	
Build — see chart on page 9			
Cancer, internal* — 6 months from completion of all treatment. Approval depends on diagnosis date, stage/grade, treatment type. (Any Stage 4 will not be considered.) *See also lymphoma, leukemia, multiple myeloma and skin cancer.	✓	✓	
Cane — quad or 3-prong			✓
Cardiomyopathy — mild		✓	
Cerebral palsy			✓
Chronic Obstructive Pulmonary Disease (COPD)		✓	
Chronic pain — treatment with non-narcotic medication		✓	
Cirrhosis			✓
Clotting disorders		✓	
Collagen vascular disease (e.g., systemic lupus, scleroderma)		✓	
Coronary heart disease (e.g., heart attack, angioplasty, bypass) — favorable risk factors, asymptomatic, no coexisting diabetes or vascular disease		✓	
Congestive heart failure (CHF)		✓	
Crohn's disease/ulcerative colitis — stable		✓	
Defibrillator			✓
Depression — severe, hospitalized within last 5 years			✓
Depression — mild/stable on treatment	✓	✓	

Asset Care impairment guidelines (not all-inclusive)

Impairments	Will consider for fluidless underwriting	Will consider with full underwriting	Decline for Asset Care
Diabetes — insulin dependent, type 1, no coexisting coronary/vascular history		✓	
Diabetes — type 2, non-insulin	✓	✓	
Dialysis			✓
Down syndrome			✓
Drug addiction/illicit drug usage — within 10 years			✓
Emphysema		✓	
Epilepsy — no seizures in last 2 years	✓	✓	
Falls — not more than 2 in the last year		✓	
Fibromyalgia — Rx non-narcotics	✓	✓	
Handicap parking sticker/plate	✓	✓	
Heart valve replacement		✓	
Hepatitis		✓	
HIV positive		✓	
Huntington's disease			✓
Hydrocephalus — 6 months post-surgery		✓	
Hypertension — stable with treatment	✓	✓	
Hyperlipidemia — stable with treatment	✓	✓	
Hypothyroidism — on treatment	✓	✓	
Incontinence — mild	✓	✓	
Intellectual disability			✓
Kidney failure — mild		✓	
Kidney transplant		✓	
Leukemia		✓	
Lymphoma		✓	
Macular degeneration — mild	✓	✓	
Macular degeneration — progressive/"wet"			✓
Memory loss			✓
Multiple myeloma			✓
Multiple sclerosis			✓

Asset Care impairment guidelines (not all-inclusive)

Impairments	Will consider for fluidless underwriting	Will consider with full underwriting	Decline for Asset Care
Muscular dystrophy			✓
Myasthenia gravis — will consider ocular myasthenia gravis only		✓	
Narcotic pain killer — currently using		✓	
Non-ocular myasthenia gravis			✓
Organic brain syndrome			✓
Osteoarthritis — mild/moderate	✓	✓	
Osteoporosis — mild/moderate	✓	✓	
Osteoporosis with compression fracture(s)			✓
Organ transplants — except kidney			✓
Oxygen use			✓
Pacemaker — 6 months post insertion, stable, no coexisting CAD/diabetes	✓	✓	
Paralysis paraplegia/quadriplegia			✓
Parkinson's disease			✓
Peripheral vascular disease — no coexisting CAD or diabetes		✓	
Pregnancy, current		✓	
Physical therapy, current			✓
Prescription medications — if prescribed any of the following: Antabuse®,Aricept®, Artane®, Avonex® (if treatment for MS), Azilect, Betaseron® (if treatment for MS), Campral®, Cogentin®, Cognex®, Comtan® (if treatment for MS), Copaxone® (if treatment for MS), Depade®, Donepezil, Eldepryl® (if treatment for Parkinson's), Exelon®, Fentanyl, Galantamine, Hydergine®, Interferon®, Larodopa®/L-Dopa (if treatment for Parkinson's), Lucemyra, Memantine, Methadone, Mirapex® (if treatment for Parkinson's), Namenda®, Namzaric®, Parlodel® (if treatment for Parkinson's), Permax® (if treatment for Parkinson's), Razadyne®, Reminyl®,ReVia®, Rivastigmine®, Sinemet® (if treatment for Parkinson's), Suboxone®, Symmetrel® (if treatment for Parkinson's), Vivitrol®			✓
Polymyalgia rheumatica	✓	✓	
Receiving disability payments (except VA disability)			✓
Residing in an assisted living facility, including continuing care retirement community or group home, or receiving home care assistance			✓
Rheumatoid or psoriatic arthritis — mild/moderate		✓	
Schizophrenia		✓	
Skin cancer — nonmelanoma (i.e., basal cell, squamous cell)	✓	✓	

Asset Care impairment guidelines (not all-inclusive)

Impairments	Will consider for fluidless underwriting	Will consider with full underwriting	Decline for Asset Care
Skin cancer — melanoma		✓	
Sleep apnea — mild, stable	✓	✓	
Stroke — over 6 months from event, single episode, no residuals, no coexisting CAD or diabetes		✓	
Stroke — multiple, with residuals and/or coexisting CAD, diabetes			✓
Surgery pending — will consider after surgery and release from physician's care with no use of assistive devices and normal activity level			✓
TIA — no residual, single episode		✓	
Tobacco/nicotine product usage — if in combination with diabetes, COPD, CAD, CVD or PVD		✓	
Using wheelchair, walker, chairlift or stairlift			✓
Ventricular tachycardia			✓

Note: We will not consider for coverage for six months after the following events: heart angioplasty or bypass surgery, carotid artery surgery, heart attack, heart valve replacement, stroke and TIA.

Height and weight guidelines

Height	Maximum weight for fluidless underwriting	Maximum weight for full underwriting		Height	Maximum weight for fluidless underwriting	Maximum weight for full underwriting
4' 10"	203	222		5' 10"	296	324
4' 11"	210	230		5' 11"	304	333
5' 0"	217	238		6' 0"	313	342
5' 1"	224	246		6' 1"	322	352
5' 2"	232	254		6' 2"	331	362
5' 3"	239	262		6' 3"	340	372
5' 4"	247	270		6' 4"	349	382
5' 5"	255	279		6' 5"	358	392
5' 6"	263	288		6' 6"	367	402
5' 7"	271	296		6' 7"	377	412
5' 8"	279	305		6' 8"	386	423
5' 9"	287	314		6' 9"	396	433

Asset Care submission process

Next, it's time for the agent to complete the application and submit it to OneAmerica Financial.

Complete the application according to the state where the primary applicant resides. For your convenience, you may complete the application electronically or on paper.

For Asset Care, the Part 1 Application for Insurance [I-31139 (ICC) or state variation] is always required. Depending on how you are submitting your application, through eApp or via paper, the options for completion of the Part 2 medical questionnaire [I-31140 (ICC) or applicable state variation] are different.

Electronic applications

The digital application option is available through these platforms:

- **OneSource Online (OSO)**
- Your organization's eApp platform

The agent has a choice whether they wish to complete the Part 2 medical questionnaire with the client or opt for the client-led experience, in which the agent submits Part 1 and then sends an email link to the client to complete the Part 2 online.

When you complete the electronic application and provide the electronic signature, the application and all required forms are automatically submitted to OneAmerica Financial.

Flex is only available in certain states. Visit our Flex Resource Page for more information.

The eApp process flow

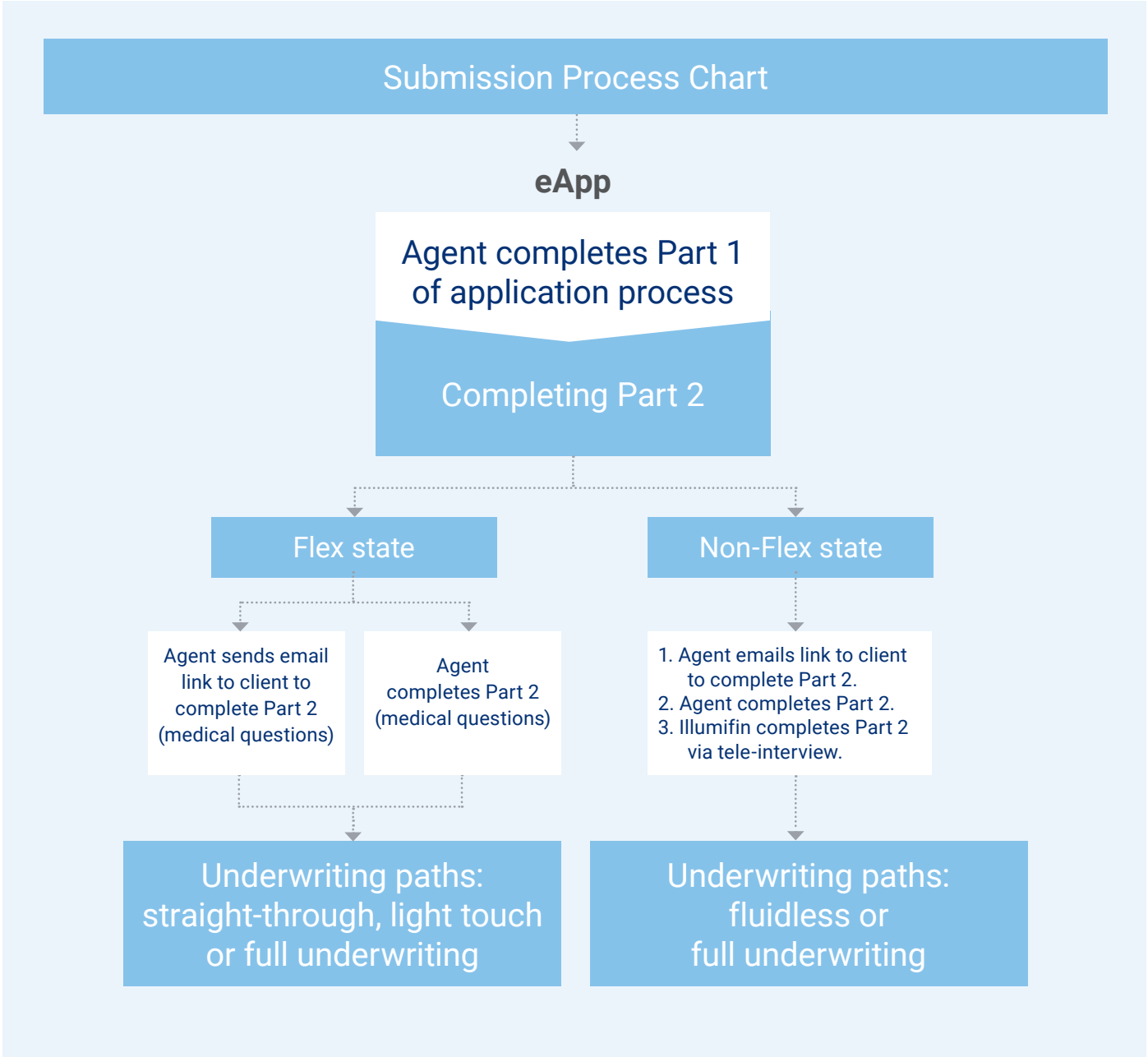
The eApp process is straightforward. After completing Part 1 of the application, the Part 2 medical questions can be completed in a few ways based on whether it's a Flex- or non-Flex state.

For Flex-approved states:

- **Client-led Part 2:** The agent sends an email link to the client to complete the Part 2 medical questions online.
- **Agent-led Part 2:** The agent asks the questions and completes Part 2 during the eApp process.

For non-Flex states:

- **Client-led Part 2:** The agent sends an email link to the client to complete the Part 2 medical questions online.
- **Agent-led Part 2:** The agent asks the questions and completes Part 2 during the eApp process.
- **Illumifin completes Part 2:** OneAmerica Financial orders a teleinterview with our third-party vendor, illumifin, to complete Part 2.

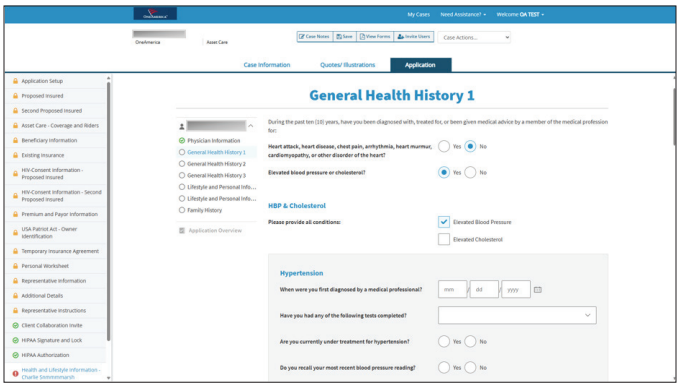


Completing eApp Part 2: Client-led or agent-led

Client-led Part 2

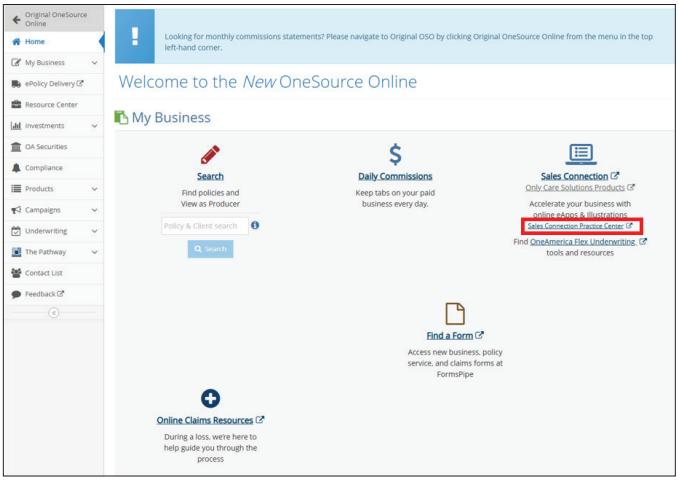
When the agent elects the client-led Part 2 during the eApp process, an email link will be sent to the client after Part 1 is submitted. The client will click the link and log in with their personal information. A code will be texted to them to complete login, and then the client will be able to complete the Part 2 medical questions online.

Flex underwriting brings about a significant change when it comes to completing the Part 2 Medical Questions on the eApp — reflexive questioning. What this means is the eApp will intuitively seek additional information on medical conditions a client may have. Here's an example:



When it comes to choosing which route to go, we recommend the agent fill out PUI form (I-35823) to gauge the client's health history and decide if it makes sense to ask the client medical questions on the Agent-led Part 2; or let the client do it at their convenience in their home where their medical information might be more readily available.

We also recommend practicing the Client-led and Agent-led Part 2 of the eApp by utilizing the Practice Environment. Navigate to www.OneAmerica.com, log in, and select "Practice Environment" to take the Flex Underwriting eApp for a test drive.



Agent-led Part 2

When the agent elects the agent-led Part 2 during the eApp process, the agent will ask the client each question and record the answer. When all the questions have been asked and answered online Part 2 is complete.

Paper applications

The paper application is available in the following locations:

- OneSource Online
- FormsPipe
- Be sure to always use the applicant's legal name when completing forms. Completed paper applications and additional required forms can be faxed to **317-285-5235** or scanned to PDF and uploaded to OneSource Online.
- Submit Part 1. Illumifin completes Part 2 during the telephone interview. We'll take care of the rest, including ordering all underwriting requirements.
- For questions about the paper process for pre-application submission, contact the Sales Desk. For questions post-submission, contact your case manager.

Completing Part 2: Paper and non-Flex eApp

When the application is submitted via paper, illumifin, a trusted OneAmerica Financial vendor, completes the Part 2 health questions and, based on the applicant's age, a cognitive evaluation if needed. An illumifin representative will contact the applicant at the scheduled appointment time to conduct the interview. The interview typically lasts 45–60 minutes per applicant.

The tele-interview will be automatically ordered during the application process. The applicant will receive an email from illumifin with a link to schedule their interview appointment online. If an email address is not provided or the applicant hasn't scheduled online, illumifin will call the applicant after 24 hours to schedule the interview.

Translation services are available. If the applicant needs the interview to be conducted in a language other than English, please notify illumifin. If you're using translation services, please allow additional time to complete the interview.

Only the applicant may be on the phone during the interview. Using a speaker phone or completing the interview while driving isn't permitted. Any indication of coaching or participation by another party will affect the applicant's ability to be approved for coverage.

What will the interviewer ask?

For paper applications and eApp non-Flex, **the Pre-Interview Worksheet (I-30110)** helps the applicant easily prepare for the tele-interview.

The applicant will be asked questions about his or her medical history and health status, such as:

- Physicians' names and addresses
- Medications being taken
- Health conditions and medical diagnoses

The applicant should be prepared to discuss specific details about their medical history. For example, an applicant with a history of diabetes should be prepared to relay the date of onset, current treatment, complications, lab values indicating level of control and the treating physician's name, address and specialty.

The applicant will be asked questions about:

- Employment status
- Residence and living arrangements
- Hobbies and activities
- Social habits

Applicants age 60 and over will be asked to perform verbal exercises to support evaluation of their cognitive status.

Step 2: Underwriting

OneAmerica® Flex Underwriting helps free up your time by streamlining application and underwriting processes for OneAmerica Financial® long-term care products.

Electronic applications (Flex)

OneAmerica® Flex Underwriting combines smart automation and a personal touch to enhance the underwriting experience for distribution partners and clients. Take a closer look at the benefits.

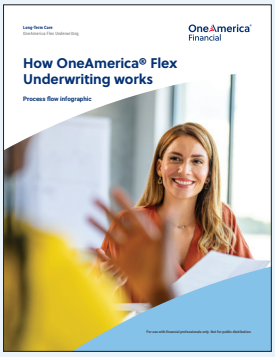
Smart automation to simplify your work

- Enjoy one-day turnaround in some cases
- Speed up workflow with a flexible eApp
- Optimize the client experience with less back-and-forth
- Get personalized support on complex cases
- Increase transparency
- Support more clients faster

Personal touch to empower your business

- Embrace large and complex cases
- Consult with industry experts
- Engage with our advanced market team
- Get help with pre-underwriting inquiries
- Give clients the attention they deserve
- Continue to provide OneAmerica Financial quality

For a visual of the Flex Underwriting paths, see the Asset Care Flex Process Infographic (I-38205).



Underwriting paths for eApp/Flex

There are three paths underwriting can take:

- Straight-through processing (STP), which is fluidless
- Light-touch underwriting, which is fluidless
- Full underwriting

When the Part 2 of the application is received, a Care Solutions underwriter will review the information received.

1. If the case is for an applicant age 59 or under and the Total Amount to Underwrite (TATU) is $250,000 or below, the case could be approved through STP. Not all applicants ages 59 and under and for $250,000 or less will qualify for STP. In this scenario, labs/exams will NOT be required.
2. If the case is for an applicant of any age and TATU of $500,000 or below, the case may qualify for fluidless underwriting. Note: At age 60+, a cognitive screen is required. At age 70+, an Attending Physician Statement (APS) is required.
   - If STP-approved, there are no additional requirements.
   - If light-touch approved, labs and exams are not required. However, an APS or supplement will be requested, and new business will order within one business day.
   - If case moves to full underwriting, the age/amount requirements will be automatically ordered through the selected vendor.
3. For applicants of any age applying for more than $500,000 TATU, age and amount requirements will automatically be posted on the system and ordered through selected vendor. If an APS is requested, new business will order it within one business day.

Additional requirement types

Attending Physicians Statement (APS)/medical records
We may order copies of an applicant's medical records from his or her personal physician, medical facility or other medical specialists. Requested records may include office notes, lab results and test results.

Cognitive screen:
This is also known as the Enhanced Mental Skills Test (EMST). The Cognitive Screen supports evaluation of the applicant's cognitive status. The Cognitive Screen is conducted by illumifin and takes 15–20 minutes to complete. For Flex eApp, OneAmerica Financial will order the cognitive screen and illumifin will reach out to client.

Drug script report
We will review pharmacy databases for a history of prescribed medications. This report contains a history of prescribed medications from the past seven years.

LabPiQ
We will review laboratory databases for a history of lab reports and results. This report contains information from the past seven years.

Medical Information Bureau (MIB) report
The MIB is a not-for-profit membership organization of insurance companies that operates an information exchange on behalf of members. Upon request, coded health information in MIB records is supplied to the requesting member company. Please note that actual coverage decisions by companies are not shared with MIB, and insurance applicants may request disclosure of their information from the MIB. See our Notice of Insurance Information Practices (form I-19080) for more information.

Paramed exam
This exam is done by an approved paramedical facility and includes questions about medical history, blood pressure readings and height/weight measurements. This exam may include collecting blood and urine specimens.

Physical measurements
Physical measurements include height, weight and blood pressure.

Senior LTC exam
This includes the basic paramed exam, plus questions about the applicant's ability to perform the activities of daily living and brief cognitive exercises. The exam may also include collecting blood and urine specimens.

Full underwriting

When full underwriting is needed, a Care Solutions underwriter will use the total amount to underwrite to help determine what additional requirements are needed. To calculate this amount, please use the following guidelines.

Calculating total amount to underwrite

Single Premium Whole Life	Face amount minus Single Pay life premium[1]
Single Premium Whole Life w/ROP	Face amount minus Single Pay life premium[1]
Annuity Funding Whole Life	Face amount
Recurring Premium Whole Life	Face amount
Recurring Premium Whole Life w/SPDR	Total face amount minus SPDR Single Premium

1. Excludes COB premium
Note: The total amount to underwrite is calculated automatically when using the integrated illustration within the OneAmerica Financial eApp. The total amount to underwrite can also be found on the financial professional page of the quote.

Based on the total amount to underwrite and the applicant's age, the following requirements will be needed.

Asset Care age/amount requirements

Total amount to underwrite	Ages			
	35–50	51–59	60–69	70+
$0–$99,999	• Physical measurements • Blood • Urine	• Physical measurements • Blood • Urine	• Physical measurements • Blood • Urine • Cognitive Screen	• Physical measurements • Blood • Urine • Cognitive screen • Medical records
$100,000–$500,000	• Physical measurements • Blood • Urine	• Physical measurements • Blood • Urine	• Physical measurements • Blood • Urine • Cognitive screen	• Physical measurements • Blood • Urine • EKG • Cognitive screen • Medical records
$500,001–$1,000,000[3]	• Paramed • Blood • Urine	• Paramed • Blood • Urine • EKG	• Paramed • Blood • Urine • EKG • Cognitive screen	• Paramed • Blood • Urine • EKG • Cognitive screen • Medical records

Note: Total Amount to Underwrite is all life insurance issued and inforce by all OneAmerica Financial companies within the past 12 months plus the current application. • The requirements noted above will always be ordered. The underwriter has the discretion to order any additional requirements necessary to adequately assess the applicant's eligibility.

Preparing for the exam

Proof of the applicant's identity (a valid government-issued photo ID, such as a driver's license or passport) must be shown to the examiner.

The examiner will complete the exam form and collect specimens if required. If blood is being collected, the applicant may need to fast (drinking only water) eight to 12 hours beforehand for best results.

To complete the exam form, the applicant should be prepared to provide details of his or her medical history and medications being taken, including names, dosages and frequency. The applicant will also need to provide the name(s) and address(es) of physicians/medical facilities, with dates, reasons for treatment and results. The applicant should schedule the exam at a time when he or she will have no interruptions and the least amount of stress. The individual should not engage in strenuous exercise at least 24 hours before the exam. A good night's rest beforehand is recommended.

Undressing isn't required, but we recommend the applicant wear clothing that's short-sleeved or has sleeves that can be rolled up.

Ordering underwriting requirements

Any time underwriting requirements are needed, OneAmerica Financial will order and follow up on the requirements. Medical records, when required, are always ordered by OneAmerica Financial.

Approved vendors

The vendors listed below and on the following page are approved to obtain medical requirements for Care Solutions.

Tele-interview vendor
illumifin: **800-560-0960**

Examination vendor
- American Para Professional Systems, Inc. (APPS): **800-727-2101**
- ExamOne: **877-933-9261**

APS vendor
- Parameds: **888-766-3999**

Note: Care Solutions will make direct payments only to vendors who are contracted with us and are listed above.

Underwriting decision

When all available information has been evaluated against our underwriting guidelines, OneAmerica Financial will make a decision.

The underwriting decision is posted on OneSource Online; at the same time, an automated email is sent with a formal decision letter to the agent's case management contact. Underwriting decisions are valid for 60 days.

Preferred or standard classifications
- Preferred defined as no rating applied to the policy.
- Standard defined as rating applied to the policy.

COB/ROP restrictions
- If applying for Continuation of Benefits (COB) and the policy is rated, only the 2- and 4- year COB options are available.
- If applying for Asset Care with Return of Premium (ROP) product and a rating is determined, ROP product will not be available.

Tobacco classification
Nontobacco
No tobacco or nicotine products or more than infrequent marijuana smoking in the past 12 months.

Tobacco
Current user of tobacco or nicotine products or more than frequent marijuana smoking or use of same in the past 12 months.

If the underwriting offer is other than what was applied for or the applicant is declined for coverage, a letter detailing the reason(s) is mailed to the applicant. If the offer is different than what the applicant applied for, OneAmerica Financial will confirm whether the applicant accepts the offer before issuing the policy. Acceptable confirmation includes verbal or written acknowledgment by the agent or back office.

How does OneAmerica Financial protect the applicant's privacy and information?

OneAmerica Financial and any vendor representing the company will protect the applicant's privacy and safeguard the information provided. Please refer to our Privacy Practice Notice (Form C-24925) and Notice of Insurance Information Practices (Form I-19080).

Step 3: Issue/Pay

Policy issue

Our policy issue guidelines differ slightly by funding type.

Asset Care funded by cash

The policy is issued and paid when the case is approved as applied for and all requirements, including the initial premium, are satisfied. The policy cover sheet will list any outstanding delivery requirements.

Asset Care Single Premium Whole Life funded by 1035 exchange

When the case is approved as applied for and OneAmerica Financial receives the completed Request of Funds form, our new business team will initiate the transfer request. Upon receipt of funds, OneAmerica Financial will apply the premium, issue a policy and pay the case. If the funds received are more than expected, OneAmerica Financial will issue a policy for the face amount the premium received purchases.

Asset Care Annuity Funding Whole Life

When the case is approved as applied for and OneAmerica Financial receives the completed Request of Funds form, our new business team will initiate the transfer request. Upon receipt of the funds, OneAmerica Financial will apply the premium, issue two policies (a life policy and annuity policy) and pay the case. If the funds are more than expected, OneAmerica Financial will issue a policy for the face amount of the premium received.

Single Premium Drop-In Rider (SPDR)

When this optional rider on Asset Care Recurring Premium Whole Life is applied for and approved by Underwriting, the applicant has six months from the policy issue date to fund. The rider may also be funded prior to policy issue. If the rider is being funded by a 1035 exchange, OneAmerica Financial will request these funds upon receipt of the completed Request of Funds form. If the SPDR is being funded with cash, OneAmerica Financial will apply the premium to the rider upon receipt.

Once the funds are applied, a letter and updated Policy Data Page with the adjusted values will be mailed to the applicant.

Policy delivery methods

The final step in the process is to deliver the policy and complete the delivery requirements. All delivery requirements are listed on the policy cover letter.

Paper

A paper policy is sent by FedEx or regular mail to the agent's mailing address of record. Paper policy requirements must be completed and returned to the home office by fax to **317-285-5115** or scanned and uploaded to OneSource Online.

ePolicy

Requirements for ePolicies are delivered to the home office automatically when the applicant completes the electronic signature.

The policy is electronically delivered through DocFast, either to the back office, the agent or both for delivery to the applicant. Policy notification is emailed at the same time.

Premium payment options

Electronic Premium Payment Authorization (I-34818)
This form authorizes a one-time debit from the applicant's checking or savings account (there is no maximum premium amount with eCheck).

Personal check or cashier's check
OneAmerica Financial accepts checks made payable to OneAmerica Financial or to The State Life Insurance Company®.

Note: Money orders are not accepted for payment.

Additional information

Save age
The applicant's age is the actual age on his or her last birthday, however OneAmerica Financial allows individual applicants — and, on joint policies, both applicants — to save age. To save age, OneAmerica Financial must receive the application within 30 days of the applicant's birthday.

Beneficiaries
On joint survivor policies, the beneficiary must be someone other than applicant(s). Provide the beneficiary's name and relationship to the applicant. For multiple beneficiaries, indicate the percentage share for each one. A named owner or beneficiary should have an "insurable interest" in the life of the applicant. Insurable interest implies that the owner or beneficiary would experience a financial loss if the applicant would die prematurely. He or she has a valid interest in the applicant's continued life. Specific state regulations also define insurable interest.

Billing modes
OneAmerica Financial requires a completed Electronic Premium Payment Authorization (I-34818) when the applicant chooses the monthly billing mode. (Monthly billing is available on Asset Care Recurring Premium Whole Life and/or COB Rider.)

Corporate-owned policies
If the owner is a business or a corporation, a copy of a corporate resolution or similar document is required to show who has authority to act on behalf of the entity.

Additional requirements
You can submit additional requirements by uploading them directly to the case in OneSource Online (OSO).

If not uploading to OSO, include the applicant's name and/or policy number so the requirement can be quickly matched to the pending case.

Trusts
A trust may be listed as the policyowner. In this case, OneAmerica Financial requires a copy of the completed trust document before issuing the policy.

Pending business status and communication
Check the status of pending business anytime at OneSource Online, **www.OneAmerica.com**. View cases individually, by agent or by organization/account.

Automated emails are sent to your back office when a new requirement is added by Underwriting and when the home office receives a requirement.

To opt out of automated emails:
- Log in to **www.OneAmerica.com**.
- Click "Update Account Info" at the top of the page.
- Click "Change Email Preferences for Pending Business Status."
- Select the "opt out" button.
- Click "submit."

Post-issue Attending Physicians Statement (APS)
OneAmerica Financial reserves the right to randomly request on Care Solutions business a post-issue APS. If we find inaccuracies on an application and/or interview, we may take action including potential policy rescission with charge back of any paid commissions. We do not notify agents or applicants of post-issue APS if ordered unless a discrepancy is found.

FAQ

Funding

Q: How long does the applicant have to decide whether to accept and fund an approved policy?
A: Underwriting offers are valid for 60 days. All requirements, including initial premium, must be received in the home office within this timeframe or the policy will be canceled.

Q: Can the applicant submit premium with the application?
A: Yes, premium may be submitted with the application. Otherwise, premium can't be submitted until after Underwriting has made a decision. If premium is submitted with the application for Asset Care, a temporary insurance agreement (I-31568 or state variation) must accompany the premium, and all terms within the temporary insurance agreement must be met. If the policy is approved as applied for, and all administrative requirements have been received, new business will issue and pay the policy at the same time.

Q: Can I collect premium at policy delivery?
A: Yes, on Asset Care single premium or recurring premium, OneAmerica Financial will issue a policy COD ("cash on delivery" — please note that actual cash should not be accepted as payment) upon request. With this process, the policy will not be paid until premium is received in the home office. The applicant will receive an endorsement listing the effective date when the premium was received.

General application

Q: Does OneAmerica Financial require original paperwork?
A: In a 1035 exchange or transfer, the surrendering company may require original paperwork. OneAmerica Financial recommends that the originals be sent to us; we'll then forward them to the surrendering company. For all other forms, copies are fine.

General application (continued)

Q: When does OneAmerica Financial require a consumer suitability questionnaire?
A: OneAmerica Financial requires a completed Consumer Suitability Questionnaire (I-22733) with all submitted annuities: Asset Care Annuity Funding Whole Life, Annuity Care products and Indexed Annuity Care products.

Q: How does an applicant apply for both Asset Care and Annuity Care?
A: If the applicant is applying for both products, Care Solutions Underwriting will review the Part 2 medical questions for Asset Care and the completed medical section on the Annuity Care application. Care Solutions Underwriting will then determine what additional requirements may be needed.

Q: What if the applicant wishes to change the funding method for Asset Care?
A: For an annuity-funded policy, the Annuity Application (I-31157) must be completed. For all other funding option changes, written instructions of the change from the agent are sufficient.

Q: What if the applicant wishes to switch products from Asset Care to Annuity Care or Indexed Annuity Care?
A: If a decision has been made on Asset Care, an applicant can switch to Annuity Care within 60 days of the underwriting decision by sending a fully completed Annuity Care application (I-21374 or state variation) or Indexed Annuity Care application (I-25525 or state variation). If a decision has not been made or the decision is past 60 days, please contact your OneAmerica Financial case manager.

Q: The applicants applied for an Asset Care Annuity Funding Whole Life policy, but I received two separate policies. Why?
A: The Asset Care Annuity Funding Whole Life option is built with a life policy and an annuity policy, each with separate policy numbers and forms. The annuity funds the life policy over time, yet each is a stand-alone policy.

Q: Does OneAmerica Financial accept electronic signatures from external sources?
A: OneAmerica Financial is only able to accept externally signed requests using the DocuSign®, Agreement Express or OneSpan platforms, as long as the accompanying certificate of completion is also provided. No other externally signed, third-party signature tools are approved.

Underwriting

Q: Do we accept exam requirements done for another company?
A: Yes, for Asset Care we will accept medical examinations and exam requirements done for another insurance carrier when such requirements are completed within our time parameters. If an agent is requesting to use exam requirements from another carrier, medical questionnaire Part 2 of the application must be completed. All questions must be answered and all appropriate details provided.

Q: What are the time limits for medical requirements?
A: The limits for medical requirements are:

Applications	90 days, or 120 days if exam is completed after the application date
Paramed and Senior LTC Exam	12 months
Blood profiles, urine specimen (HOS), EKG	12 months
Phone interviews	60 days
UW approvals	60 days; the applicant has 60 days to fund the policy once approved

Note: Underwriting reserves the right to order any requirement at its discretion. • Time limits for requirements are measured from the date the requirement is completed to the date underwriting approval is given. • If the date of underwriting approval is at or near the end of the time limit, the underwriting approval time may be limited to less than 60 days or a statement of good health may be requested.

Q: The applicant has a condition that is not listed on the ineligible impairments listing. Does this mean they'll automatically be approved for the policy/contract?
A: No. The ineligible impairments listing is a guideline and the list isn't all-inclusive. Please make use of the PUI process if the condition is not listed.

Q: Can the applicant have existing coverage and qualify for a new Asset Care policy through the fluidless process?
A: Yes, subject to these three guidelines:

- The total amount to underwrite for any inforce Asset Care coverage and applied-for Asset Care coverage cannot exceed the maximum guidelines as outlined on page 13.
- The total amount to underwrite inforce with all OneAmerica Financial companies (AUL, PML and SL), plus the applied-for Asset Care amount, cannot exceed $1,000,000.
- The most recent AUL and/or PML inforce policy must have been fully underwritten and issued within the last five years.

Tele-interview/Stand-Alone EMST

Q: How soon can the interview be scheduled with illumifin?
A: Optimally, applicants should be able to have their interview within two to three business days. If applicants can be flexible in their interview times, they should ask illumifin for the soonest available appointment.

Q: What email address does the illumifin online scheduling email come from?
A: noreply@illumifin.com

Q: What if the illumifin interviewer doesn't call right at the scheduled interview time?
A: illumifin schedules interviews in one-hour blocks, allowing a 30-minute window at the scheduled time in case the interview is delayed or there are connection issues. (For example, an interview scheduled at 9 a.m. might not begin until the interviewer calls at 9:30 a.m.) We ask that you prepare the applicant for a possible delay (no more than 30 minutes) in receiving the call. If the illumifin interviewer doesn't call at the original, scheduled time (9 a.m. in the example above), they will ask the applicant when they do call (9:30 a.m. in the example above) if they're still able to complete the interview or if they would prefer to reschedule.

Q: Joint applicants scheduled their interviews back-to-back. Can one applicant just hand the phone to the second applicant when the interview is completed?
A: For applicants who have back-to-back joint interviews, illumifin will hang up with the first applicant and then call the second applicant as scheduled. This helps ensure proper quality monitoring and recording for each interview.

Q: Can the applicant reference any paperwork or write down questions or answers during the interview?
A: The applicant may not record questions or answers asked by the interviewer. This would be viewed as needing assistance, which negatively impacts the cognitive score. During the interview, the applicant can refer to the Pre-Interview Worksheet and other medical and health history documentation.

Q: Is it possible that the applicant might be asked the same information more than once in the interview?
A: Yes. The applicant may perceive being asked similar questions in the interview. For example, a condition may be discussed in the medical history portion and in the medication portion of the interview. This isn't meant to trick the applicant, but simply to ensure that information is properly documented in each section.

Note: OneAmerica Financial® is the marketing name for the companies of OneAmerica Financial. Product underwritten by The State Life Insurance Company® (State Life), a OneAmerica Financial company that offers the Care Solutions product suite. Asset Care form numbers: ICC18 L302, ICC18 L302 JT, ICC18 L302 SP, ICC18 L302 SP JT, ICC18 R532, ICC18 R533, ICC18 R539, ICC18 SA39, ICC18 R540, ICC24 R545, ICC24 R546, ICC24 R547, L302, L302 JT, L302 SP, L302 SP JT, R532, R533, R539, SA39, R540, R545, R546, R547. Not available in all states or may vary by state. • All examples are hypothetical and were used for explanatory purposes only. • Guarantees are subject to the claims paying ability of State Life. • Provided content is for overview and informational purposes only and is not intended as tax, legal, fiduciary, or investment advice. • Important Note: For annuities funding life insurance, the annuity values and the ability of the annuity to pay the premiums on the life insurance policy may be affected by, but not limited to, federal/state tax withholding, withdrawals, distributions, such as required minimum distributions, and other reductions of the annuity values. **• NOT A DEPOSIT • NOT FDIC OR NCUA INSURED • NOT BANK OR CREDIT UNION GUARANTEED • NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY • MAY LOSE VALUE**

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