



ENSURED LEGACY FINAL EXPENSE AGENT TRAINING GUIDE

- Simplified Issue Whole Life, Form Series 211311 • Graded Death Benefit, Form Series 211312
- Guaranteed Issue, Form Series 221309

FOR AGENT USE ONLY



230 16th Street • Rock Island, Illinois 61201
(309) 788-4561, Option 1, Option 5
agent.royalneighbors.org



INSURING LIVES
SUPPORTING WOMEN
SERVING COMMUNITIES™





Unlocking the Power of Ensured Legacy Final Expense

In this comprehensive guide, we will dive into one of our most significant and impactful products: **Ensured Legacy Final Expense**. This product has been crafted to meet the evolving needs of today's clients, providing them with a reliable and compassionate solution to address the challenges associated with end-of-life expenses.

This guide will empower you with the knowledge, tools, and resources to effectively communicate the value of Ensured Legacy Final Expense to your clients. With your dedication and expertise, you can guide your clients toward making informed decisions that will leave a lasting legacy for their loved ones, ensuring their financial security in life's most challenging moments.

Instantaneous Underwriting Decisions

By leveraging the power of our Ensured Legacy Final Expense e-App, you can streamline the underwriting journey, ensuring that your clients receive the coverage they require promptly and efficiently.

Guaranteed Level Premiums

With guaranteed premiums, certificateholders pay a consistent premium amount throughout the life of the certificate. This predictability makes it easier for individuals to budget and plan for their insurance expenses, knowing that their premiums won't increase over time.

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Product Details

Insurance Details

Issue Ages (age last birthday)

- **SIWL:** ages 50–85 (Standard) and 50–75 (Preferred)
- **GDB:** ages 50–85
- **GI:** ages 50–80

Owner/Membership

- As shown in the application
- Owner can be different than the insured (must have an insurable interest in the insured)
- The insured is a beneficial member of Royal Neighbors of America

Financial Details

Face Amounts

- **SIWL:** \$5,000–\$40,000 (Standard) and \$25,000–\$40,000 (Preferred)
- **GDB:** \$5,000–\$20,000
- **GI:** \$3,000–\$10,000

Free-look period

- 30 days (or longer if required by state)

Certificate fee

- \$50 per year (commissionable)

Premium period

- Premiums payable for life of insured (or until insured reaches 121 years of age)

Dividends

- Participating, not expected to be paid and not guaranteed

Premiums in Default

- Insurance expires at end of grace period unless there is a cash value
- If there is a cash value, the following will happen:
 - Automatic premium loan followed by nonforfeiture option elected; or
 - If automatic premium loan is not in effect, nonforfeiture option chosen by Owner

Mode of payment

- Premiums can be paid by monthly, quarterly, or annual Electronic Funds Transfer (EFT). Premiums can also be billed on quarterly or annual basis.



Death benefit

If certificate is in grace period, past due premiums through the month of death will be deducted from the face amount before payment is made; any outstanding liens (with accrued interest) and loans (with accrued interest) will also be deducted.

- **SIWL:** Level death benefit, guaranteed level premium, whole life insurance product maturing at age 121
- **GDB:** Death benefit is 30% of face amount in first certificate year, 70% in the second certificate year, and 100% thereafter. 100% of the face amount is given if it is an accidental death within the first two years.
- **GI:** Limited Graded Benefit if the cause of death is by natural causes – 110% of earned Premiums Paid (Excluding rider premiums, if any) during Certificate Years 1 and 2. 100% of face amount will be paid in Certificate Year 3 and thereafter. 100% of the face amount is given if it is an accidental death within the first two years.

Loans

- Owners may borrow against the cash value of the certificate^{#1}
- Loans are available up to the cash value
- 8% interest rate in arrears; 6% in Montana
- Automatic Premium Loan option (APL) is available

Health and Risk Classes

Health/medical requirements

- Yes or no, with reflexive medical questions when necessary.
- No paramed required.

Risk classes

- Female/Male
- Tobacco/Non-Tobacco
 - SIWL Preferred
 - SIWL Standard
 - GDB
- No Tobacco Class
 - GI (If applying for the Guaranteed Issue plan, medical questions will be bypassed.)



Quoting

Run SIWL quotes using the Quick Quotes Calculator:

- **Web Based** – Located at rnaquickquote.org
- **Mobile** – Download the **Royal Neighbors Agent Access Mobile App** directly from the [Apple iOS App Store](https://apps.apple.com) or [Google Play Store](https://play.google.com)



^{#1} Loans taken against a certificate can have adverse effects if not managed properly. An outstanding loan could potentially terminate the certificate if the principal, plus accrued interest, equals or exceeds the cash value of the certificate. Outstanding loan balances will be charged interest at the rate stated in the certificate. Accrued interest on the loan is payable at the end of each certificate year. Certificate loans, including any accrued interest, must be repaid in cash or from the certificate values upon termination of the certificate or the death of the insured. Repayment of loans from certificate values (other than death proceeds) can potentially trigger a tax liability. Owners should consult with their tax advisor about the potential impact of any loan.



Certificate Termination Details

Termination

- Certificate will terminate/mature the earliest of:
 - A nonforfeiture option (CS, RPU, ETI) goes into effect (whether chosen or default, because of nonpayment of premium)
 - Cash value is transferred (1035) to another product
 - Certificate expires without value when the outstanding loan (including accrued interest) exceeds the cash value, or the outstanding lien (including accrued interest) plus the outstanding loan (including accrued interest) exceed the face amount
 - Insured dies
 - Insured reaches age 121
 - Lapse due to non-payment of premium

Nonforfeiture Option

- Participating reduced paid-up insurance
- Non-participating extended term insurance (default)
- Cash surrender

Reinstatement

- May be reinstated within three years after the Grace Period has expired with evidence of insurability
- 6% interest on all past due premiums
- Certificate cannot be reinstated if certificate is surrendered for its cash surrender value

Available Riders (Please see Rider Brochure for rider details)

Accelerated Death Benefit – Terminal Condition and Permanent Confinement^{#2} (Form Series 221203)

- The Accelerated Death Benefit Rider^{#3} provides a one-time lump sum payment of a portion of Certificate's death benefit to the Owner of the Certificate if the insured is diagnosed with a qualifying terminal illness or condition
- With a qualifying event, the Owner can accelerate part of the death benefit:
 - A terminal condition resulting in a life expectancy of 12 months or less from the date of the certification by the Physician of the terminal condition.
 - The insured's continuous confinement to a qualified nursing home, beginning after the date coverage begins, from a date at least 90 days prior to the request for acceleration, with the confinement expected to continue until the Insured's death, as certified in a Physicians' statement.
- The maximum accelerated benefit is the lesser of 75% of the certificate's death benefit, or \$100,000. Minimum Accelerated Benefit is \$5,000 and the Maximum Administrative Fee is \$100.
- Issue age availability is the same as the base.
- Available when the face amount is \$7,000 or greater.
- Only one acceleration for an insured is allowed.

^{#2} Accelerated death benefit riders are not health, disability or long-term care insurance nor are they intended to replace health disability or long-term health insurance. Not available on all products or in all states.

^{#3} Receipt of acceleration of life insurance death benefits may be taxable and may affect the eligibility for public assistance for the Owner, the Owner's spouse's, or the Owner's family. Consult your tax professional or social services agency for details. Not available on Guaranteed Issue (Form Series 221309), the benefits are not assignable.



- No premium charged, but a lien against the certificate will be made with a reduction to death benefits, cash values, and loan values. Interest will be charged on the accelerated benefit payment from the date of payment.
- Available on SIWL and GDB. Not available on GI.
- Rider available only at issue.
- Rider eligible for reinstatement.
- No additional premium required.

Accidental Death Benefit Rider^{#4} (Form Series 222140)

- Provides the full rider face amount if the insured's death is within 180 days of the Accidental Bodily Injury as defined in the rider
- Available for an additional premium
- Adding the Accidental Death Benefit Rider gives your clients' families an additional death benefit, should they pass away due to an accident as defined in the rider
- Issue ages 50–70
- Expires on the first certificate anniversary on or after age 80
- Flexible face amount:
 - **SIWL:** \$5,000–\$40,000
 - **GDB:** \$5,000–\$20,000
 - **GI:** \$3,000–\$10,000
- Rider can be issued on any certificate, and rider will always be available as standard rating
- Rider available only at issue
- Rider eligible for reinstatement



Charitable Giving Rider (Form Series 221113)

- Provides an additional Charitable Benefit Amount, to be paid in a single lump sum amount will be the lesser of 1% of the face amount at the time of the insured's death or \$1,000
- By selecting our Charitable Giving Rider, your clients can take comfort knowing they are not only financially helping their loved ones when they pass, but a charity that is important to them
- Issue ages 50–85
- Rider must be elected (from a pre-defined list) and charity must be designated at the time of application. Charity can be updated during the life of the certificate. If charity is no longer in existence at the time of death, the benefit would be donated to the *Lift Women's Foundation*, 501(c)(3)
- Available on all products
- Rider eligible for reinstatement
- No premium is charged for rider
- A lien against the policy due to an acceleration of the death benefit will not affect the 1% of certificate paid out to a charity
- Owner has the right to change the charity until the death of the insured. On assignment, the designation becomes irrevocable.
- Only payable on death, not maturity
- Rider will terminate if the base certificate goes into extended term insurance (ETI)

^{#4} This rider expires on the anniversary in which the insured reaches age 80. The rider must be added prior to issuance of the base certificate or at the time of reinstatement. An additional premium is required for this rider.



Grandchild Rider^{#5} (Form Series 221081)

- Your clients can give all their grandchildren \$5,000 of life insurance coverage when they select our Grandchild Rider
- \$60 annually and covers any number of eligible grandchildren as defined in the rider
- Issue ages 50–85
- Minimum age of 90 days and maximum through age 17 (unless enrolled in accredited education institution and has not reached age 25)
- Beneficiary of the rider is the insured of the life certificate or the estate of the insured under the rider
- Must be living with a parent or grandparent at the time of death, unless enrolled in accredited education institution
- Rider terminates when base contract is terminated
- Coverage terminates upon request of insured
- Conversion allowed to permanent product (Jet WL today) through age 17 (unless enrolled in accredited education institution and has not reached age 25)
- For conversions, the face amount ranges for which the new life insurance certificate may be issued will be:
 - Ages 90 days to 9: \$5,000
 - Ages 10 to 14: \$5,000–\$10,000
 - Ages 15 to 19: \$5,000–\$15,000
 - Age 20–24, but not more than 31 days prior to the 25th birthday: \$5,000–\$20,000
 - Within 31 days of 25th birthday: \$5,000–\$25,000
- Can convert any time before base expires, at the time of expiration, or at the time of death of the insured (within 90 days of the notice of date of death, but no longer than 6 months from the actual date of death)
- Rider will terminate on absolute assignment. We will allow a conversion within 90 days from absolute assignment.
- Covers all grandchildren in a family (step, natural or legally adopted)
- Does not cover great-grandchildren
- Rider only available at issue
- Rider eligible for reinstatement
- Rider can be issued on any certificate and rider will always be issued as standard rating
- Owner can terminate the rider at any time
- Claims amounts may be “stackable” if more than one grandparent owns a policy and a rider



^{#5} The Beneficiary of this rider is the insured of the life certificate to which the rider is attached. This rider terminates either upon the request of the insured or when the base certificate terminates or is paid. The rider must be added prior to issuance of the base certificate or at the time of reinstatement. Rider may be converted to permanent coverage for the Grandchild at any time before the base certificate expires, is terminated, or before the death of the insured. An additional premium is required for this rider.






Underwriting Process and Guidelines

Available writing options to meet your client's needs:

1. **e-Application** – In-Person and Remote Point-of-Sale Electronic Application with e-Signature and Voice options
2. **Phone Application** – Point-of-Sale Phone Application process
3. **Paper Application** – Submit a completed paper application for Underwriting review

Choose the application that best suits your scenario, and proceed with the steps on pages 10–12.

Details	e-Application (remote and in person) 	Phone Application 	Paper Application 
Hours Available	24/7	Monday – Friday, 8 am – 9 pm CST, Saturday 8 am – 3 pm CST, Sunday closed	24/7
State Limitations	Not available in CT	Not available in CT	No limitations
Immediate Decision	Yes	Yes	No
Applicant requires Interpreter	Not available	Not available	OK – note this on the application
Face-to-Face required?	No	No	Preferred, but can be done by mail
Allows Remote Signature?	Yes	Yes	Yes – via mail
Type of Signature	Dual signature options	Voice only	Ink Pen signature only
Electronic Replacement Forms	All states	NAIC states only ^{#6}	Not applicable
Owner	Allows different Owner ^{#7}	Must be Insured	Allows different Owner ^{#7}
Payor	Allows different Payor	Must be Insured	Allows different Payor
Initial Payment Method	EFT	EFT	EFT, Direct Bill
Payment Modes	Monthly, quarterly, or annual	Monthly, quarterly, or annual	Monthly, quarterly, or annual
Electronic Disclosures Delivered?	Yes	Yes	No

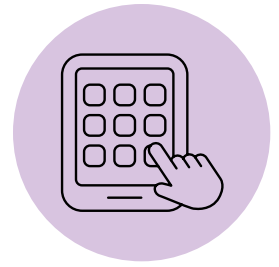
Connecticut Applications: Unfortunately, we cannot offer our electronic or phone application processes in the state of Connecticut. You can still submit a paper application.

^{#6} For NAIC states, forms can be voice signed during the Phone Application. For non-NAIC states, you will need to submit all signed replacement forms to Home Office using one of the document submission methods listed on page 12 of this training guide.

^{#7} See pages 15–17 for acceptable owner relationships.



e-Application



Available In Person or Remotely.

Insured, Owner and Payor can be different individuals, and are not required to be in the same location.

See pages 15–17 for acceptable Ownership relationships.

Step 1 – Pre-qualify the applicant, the Proposed Insured

Step 2 – Access the e-Application via the Agent Website

- Quick Link at the top of the Agent Website or
- Application Submission Tools: <https://agent.royalneighbors.org/secure/tools/application-submission-tools->

Insured:

- Insured identity validation is incorporated into the e-App which means less data entry and reduces data entry errors.
- Height and weight will be presented, but only required for preferred rating. Note: Min face is \$25,000 and ages 50–75.
- Allows for “Trusted Contact Person” and/or “Second Addressee” if you wish to designate someone to receive past due notices.
- Allows different Owner if other than Proposed Insured. There must be an insurable interest between the insured, Owner, and beneficiary. (See acceptable Ownership relationships on pages 15–17)
- Insured/Owner/Payor email address required
- Ability to apply for Guaranteed Issue without being presented with medical questions.

Existing Insurance/Replacement Information: Information Regarding Insurance Existing/Applied For insurance with Royal Neighbors or any other Company. Note: Maximum SIWL with Royal Neighbors is \$40,000 and \$20,000 for GDB, \$10,000 for GI

Plan Information:

- Ability to launch the quoting tool
- Ability to apply for all plans, face amounts and riders to reduce A&S overhead
- Plan selections, premiums shown for each product

Beneficiary: See pages 15–17 of this guide for allowable beneficiaries

Payment:

- Ability to chose a different payor
- Round Up Options (As long as the maximum face amount is not chosen)
- Same Day payment option available
- Premium can coincide with payors social security benefits

Save Age Options: To Save Age, you are able to go back to the Payment Page to select a draft date prior to the Applicants upcoming birthday to keep the lower premium.

Agent Report:

- Indicate if you are physically with the Proposed Insured, Owner and Payor.
- If not in person, ability to sign via email, SMS text or voice signature.

Disclosures:

- Choose Electronic or Voice signature for each Individual.
- Indicate the Signed at City and State

E-Signature

- All voice signatures will be completed first.
- Electronic Signing process can be re-initiated if necessary
- After all signatures are complete, click Next to “Underwrite Case”
 - Underwrite Case: After all e-signatures have been completed move forward and click “Underwrite Case” to receive a decision.



Phone Application



VOICE Step 1 – Pre-qualify the applicant, the Proposed Insured

All applications must be pre-qualified.

1. Use our POS Agent Worksheet (Form 2416-A) to ensure your phone interview is completed as efficiently as possible.
2. Review the Medical Questions on paper application
3. If in person, provide the applicant a copy of the Information Release Notice Form 231115-INFO (State-specific versions for Florida), and other required documents and disclosures (Replacement and ADBR Forms)

VOICE Step 2 – Conduct the interview by calling (866) 281-9228

Interviewers are available:

- 8 a.m.–9 p.m. Central Time, Monday–Friday
- 8 a.m.–3 p.m. Central Time, Saturday
- CLOSED on Sunday

What the AGENT can expect during the interview

The interviewer will:

1. Ask your name and Royal Neighbors of America® agent number (always required).
2. Ask if you and the client are together in the same location.
3. Verify you have provided the applicant the Important Information Form, or will ask your client how they would like to receive it (if the form has not been provided).
 - a. **REMOTE:** If the phone interview is being conducted remotely, you don't need to worry about the delivery of the Information Release Notice Form 231115-INFO (State-specific version for Florida 231115-INFO-FL) and other required documents and disclosures (NAIC-Replacement and ADBR Forms) to your client. During the call, your client will be asked to choose how they want to receive these forms through a link sent by email or text message, or read aloud. If read aloud, cases that include a replacement and/or ADBR will require you to submit the appropriate signed disclosures to the home office after the interview.
 - b. **IN PERSON:** If the phone interview is being conducted in person, you should provide the applicant a copy of the Information Release Notice Form 231115-INFO (State-specific version for Florida 231115-INFO-FL) and other required documents and disclosures (Replacement and ADBR Forms).
4. Ask you to provide the information you gathered on the POS Agent Worksheet (Form 2416-A).
5. Ask if you agree with Voice Signature, and collect your Voice Signature.

What the APPLICANT can expect during the interview

The interviewer will:

1. Advise the applicant that the call is being recorded.
2. Ask to choose how they want to receive the required documents and disclosures; link sent by email, text message, or read aloud.
3. Verify her/his name, address, Social Security number, and date of birth.
4. Obtain voice signature authorization to order the prescription authorization and other information.
5. Ask the medical questions.

The interviewer will advise you if the application is approved, declined, or needs to be referred to the Home Office for additional review. If approved, the certificate will be issued on the draft date selected.

For NAIC states, forms can be voice signed during the Phone Application. For non-NAIC states, you will need to submit all signed replacement forms to Home Office using one of the document submission methods listed on pages 10–12 of this training guide.



Paper Application

- **Provide Release Notice Form 231115-INFO** (State-specific version for Florida 231115-INFO-FL) .
- **Paper Application Form 231115** (with ICC and state specific versions)
- **Agent Report** – Form 231115-AGT
- **EFT** – Form 231115-EFT (If electronically drafting premium)



Submit the paper application:

1. **Via secure email** (Outlook, Google, etc.) – Email a scanned copy of the completed and signed paper application to the Royal Neighbors Underwriting department to secureapps@royalneighbors.org.
2. **Via the Agent Web Portal (AWP)** — after logging in, select the “Send a Secure Email” Option in the lower left corner of the Agent Web Portal.
3. **Agent Access Mobile App** – Download Royal Neighbors’ mobile app, Agent Access directly from the [Apple App Store](#) or [Google Play Store](#). This app contains functionality that lets you scan and send paper applications to the Royal Neighbors secure mailbox.
4. **Fax paper application** to Home Office at [\(866\) 787-1450](tel:8667871450). No cover sheet needed; additional info should follow app pages.
5. **Mail paper application** to the Royal Neighbors home office address at 230 16th Street, Rock Island, IL 61201.



- Royal Neighbors will complete the final review of all information and determine whether the certificate can be issued. You will be notified if the certificate cannot be issued.
- Please ensure that bank account information is correct. Certificates will not be issued if account information cannot be verified.
- Use of electronically signed applications is prohibited.

Check application status

You can check the status of your client’s application in two ways:

- Via Agent Portal on the My Business/Pending/Recent Action page: agent.royalneighbors.org/secure/pending-recent-action
- Or by downloading the Agent Access Mobile App, and selecting the Pending Business section once you have created an account.





Guidelines

Pre-qualify the Applicant/Proposed Insured – All applications must be pre-qualified.

1. Verify identity by viewing a photo ID such as a current driver's license, state ID card, or passport. If you are unable to verify the applicant's identity, this will be noted in the Agent's Report during the application interview.
2. Individuals who are not eligible to apply for Simplified Issue Whole Life (SIWL), Graded Death Benefit Whole Life (GDB) or Guaranteed Issue Whole Life (GI) products:
 - Anyone without a Social Security number
 - Anyone who is not a U.S. citizen or Permanent Resident (Green Card holder)
 - Anyone mentally incompetent or otherwise unable to make a valid contract
 - Insured and/or Owners with a felony will not be accepted, regardless of the face amount of the Certificate.
 - Anyone who already has \$40,000 SIWL, \$20,000 GDB or \$10,000 GI with Royal Neighbors
 - Anyone who has three or more lapsed certificates with Royal Neighbors
3. Use our POS Agent Worksheet (Form 2416-A) to ensure your phone interview is completed as efficiently as possible.
4. Review medical questions on the paper application under section 6 (Form 231115 with ICC and state specific versions), and Risk Assessment Guide on page 18.
5. If in person, provide the applicant a copy of the Information Release Notice Form 231115-INFO (State-specific version for Florida 231115-INFO-FL), and other required documents and disclosures (Replacement and ADBR Forms)

If you have any questions regarding medications, or any of the items in the pre-qualification checklist above, please call Underwriting at (309) 788-4561, Option 1, Option 1, Option 1.

Certificate delivery: All certificates will be mailed directly to the certificate Owner.

Reinstatement: Requires payment of all past-due premiums necessary to bring the certificate current. Requirements and procedures are set forth in the Insurance Certificate.

Re-date: A re-date brings the effective date of the original certificate number forward to a current date, and premium payments begin with the new effective date. We will allow one re-date per certificate within the first 60 days of issue. Requests should be submitted to the Underwriting Department at (309) 788-4561, Option 1, Option 1, Option 1.



Frequently Asked Questions



Can the customer change their payment method or frequency after the certificate is issued?

Yes, the customer can contact Member Services to request changes to their payment method, mode and/or withdrawal date.

Can payments be made using direct express, debit or credit card?

Not for the first initial payment. However, subsequent payments can be made from these accounts.

Is the ADBR available in all states?

Yes, the Accelerated Death Benefit Rider is allowed in all states RNA does business.

What forms do I need to provide in the event my client chooses the "read aloud"/recording option of the Information Release Notice Form 231115-INFO?

If the applicant chooses the read aloud option, the agent will be responsible for providing copies of the replacement and ADBR disclosures, if applicable.

Who do I call if I have questions?

Eligibility questions or pending apps: Underwriting (309) 788-4561, Option 1, Option 1, Option 1.



Acceptable Ownership and Primary Beneficiary Designations

Relationship to Applicant	Acceptable Owner	Acceptable Beneficiary?#8	e-Application Prompts	Note to agent	What is needed for Underwriting
Aunt	No	Maybe	Please explain why an aunt would like to be the beneficiary on this policy.	This relationship does not typically have a presumed insurable interest.	The e-application allows you to provide an explanation of why an aunt would be the appropriate beneficiary. Your response will be reviewed by Underwriting to determine whether there's an insurable interest.
Bank	No	Yes	You must provide a contingent beneficiary.		The e-application will prompt you for a contingent beneficiary name. This scenario does not need to be reviewed by Underwriting.
Brother	No	Yes	N/A	N/A	N/A
Business	Maybe	Maybe	N/A	Insurance must be for the benefit of the member or their dependents. Only Family-owned businesses are allowed.	An authorized representative of the business must sign as the owner if the business is to be the owner of the policy. All cases will refer to Underwriting for review. Additional information may be requested.
Charity	No	Yes	N/A	A charity may receive a maximum 20% of the death benefit. Owner of the certificate must be the insured. Charity must be a registered 501(c)(3).	N/A
Child (adult)	Yes	Yes	N/A	N/A	N/A
Common law spouse	Yes	Yes	N/A	N/A	N/A
Cousin	No	Maybe	Please explain why a cousin would like to be the beneficiary on this policy.	This relationship does not typically have a presumed insurable interest.	The e-application allows you to provide an explanation of why a cousin would be the appropriate beneficiary. Your response will be reviewed by Underwriting to determine whether there's an insurable interest
Domestic Partner	Yes	Yes	N/A	N/A	N/A
Estate	No	Yes	N/A	N/A	N/A
Ex-spouse	Maybe	Maybe	N/A	A copy of the Court Order requiring insurance will need to be collected and sent to the Home Office.	You will be contacted by Underwriting to provide a copy of the court order. If you want to send it to us as you are taking the application, you may use the App Loader feature of the Mobile App, or upload a copy through the agent portal. Please make sure to provide the certificate number so that we can match the document to the application.

Owner: preferred Owner is the Proposed Insured.

#8 State laws supersede any requirements outlined in this guide.



Acceptable Ownership and Primary Beneficiary Designations, continued					
Relationship to Applicant	Acceptable Owner	Acceptable Beneficiary? ^{#8}	e-Application Prompts	Note to agent	What is needed for Underwriting
Fiance	Maybe	Yes	Does the Owner have reciprocal coverage of an equal to or greater amount with the Proposed Insured listed as Owner?	N/A	This is a Yes/No question on the application when you select Fiance as the relationship. The application will be reviewed by Underwriting to determine whether there's an insurable interest.
Funeral Home	Maybe	Yes	N/A	Funeral home is not viewed as an acceptable owner in following states: Idaho, Illinois, Michigan, and Nevada. The e-application will not allow you to select this option in states where it is not available.	An authorized Person will need to sign for the funeral home as Owner.
Grandchild	No	Yes	N/A	N/A	N/A
In-Laws	No	Yes	N/A	N/A	N/A
Lender	No	Yes	Contingent Beneficiary is required for this designation.	N/A	The e-application will prompt you for a contingent beneficiary name. This scenario does not need to be reviewed by Underwriting.
Nephew	No	Maybe	Please explain why a nephew would like to be the beneficiary on this policy.	This relationship does not typically have a presumed insurable interest.	The e-application allows you to provide an explanation of why a nephew would be the appropriate beneficiary. Your response will be reviewed by Underwriting to determine whether there's an insurable interest.
Niece	No	Maybe	Please explain why a niece would like to be the beneficiary on this policy.	This relationship does not typically have a presumed insurable interest.	The e-application allows you to provide an explanation of why an aunt would be the appropriate beneficiary. Your response will be reviewed by Underwriting to determine whether there's an insurable interest.
Parent	Maybe	Yes	Please explain why a parent would like to be the owner on this policy.	A parent or step-parent is not typically expected to outlive the insured. We recommend against this ownership arrangement unless there is a special need.	The e-application allows you to provide an explanation of why a parent would need to be owner of the policy. Your response will be reviewed by Underwriting to determine acceptability.
Sister	No	Yes	N/A	N/A	N/A
Spouse	Yes	Yes	N/A	N/A	N/A
Step child	No	Yes	N/A	N/A	N/A
Step parent	Maybe	Yes	Please explain why a step parent would like to be the owner on this policy.	A parent or step-parent is not typically expected to outlive the insured. We recommend against this ownership arrangement unless there is a special need.	The e-application allows you to provide an explanation of why a step parent would need to be owner of the policy. Your response will be reviewed by Underwriting to determine acceptability.

Owner: preferred Owner is the Proposed Insured.

^{#8} State laws supersede any requirements outlined in this guide.

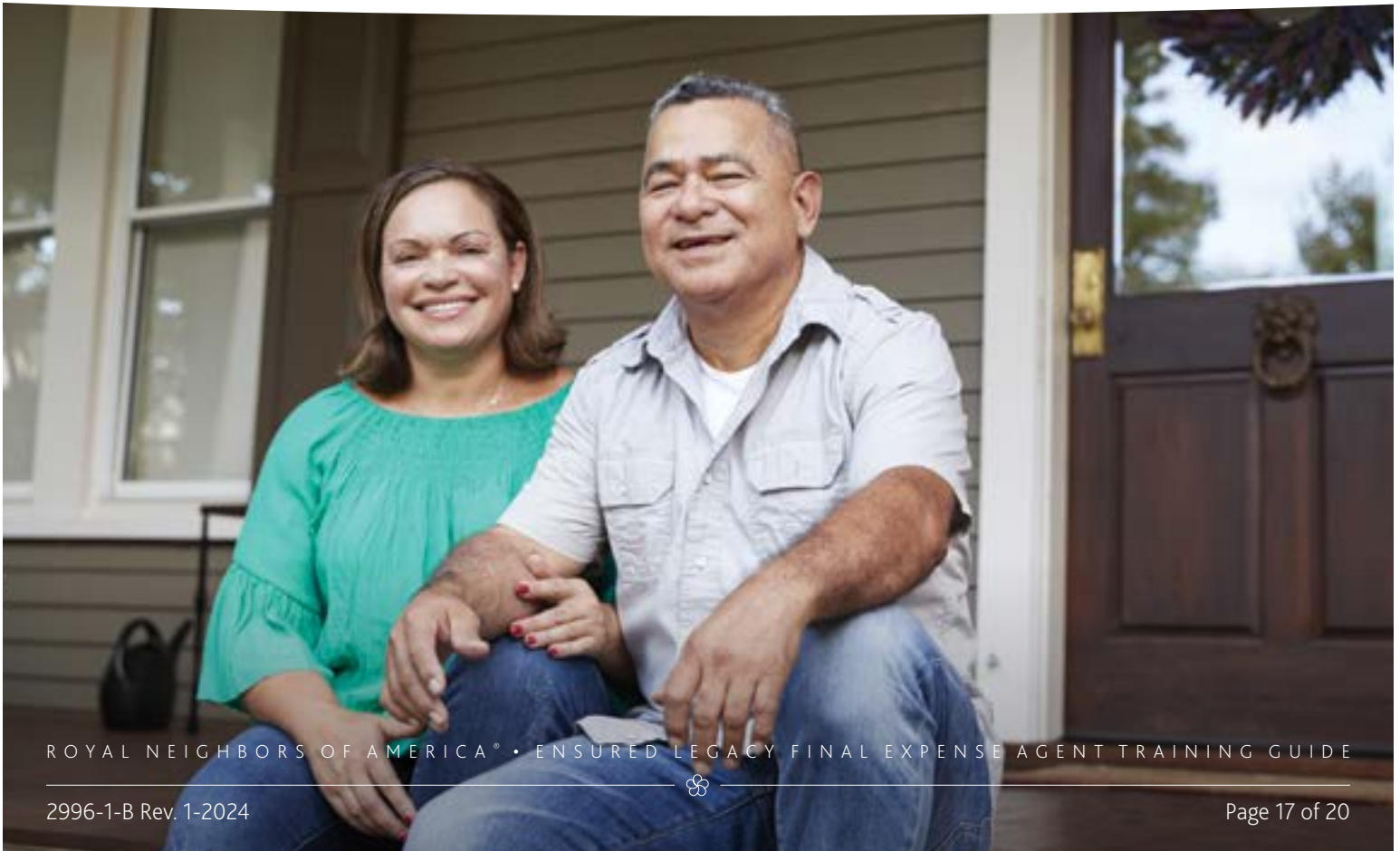


Acceptable Ownership and Primary Beneficiary Designations, continued

Relationship to Applicant	Acceptable Owner	Acceptable Beneficiary?#8	e-Application Prompts	Note to agent	What is needed for Underwriting
Trust	Maybe	Maybe	N/A	The trust must benefit the proposed insured's family. A copy of the Trust will need to be collected and sent to the Home Office. Trustee must sign application as "Owner" if the trust is to own the certificate.	You will be contacted by Underwriting to provide a copy of the trust document. If you want to send it to us as you are taking the application, you may use the App Loader feature of the Mobile App, or upload a copy through the agent portal. Please make sure to provide the certificate number so that we can match the document to the application.
Uncle	No	Maybe	Please explain why an uncle would like to be the beneficiary on this policy.	This relationship does not typically have a presumed insurable interest.	The e-application allows you to provide an explanation of why a parent would be the appropriate beneficiary. Your response will be reviewed by Underwriting to determine whether there's an insurable interest.

Owner: preferred Owner is the Proposed Insured.

#8 State laws supersede any requirements outlined in this guide.



Risk Assessment Guide

A indicates Rate Class may be available. N/A indicates Rate Class not available.

Condition	Preferred	Standard	GDB	GI
ADL's (activities of daily living) – Needs assistance with ADL's	N/A	N/A	N/A	A
AIDS	N/A	N/A	N/A	A
Alcohol Drug Treatment >3 years ago, no current use	N/A	A	A	A
Alcohol Drug Treatment within last 3 years, no current use	N/A	N/A	A	A
ALS – Lou Gehrig's Disease	N/A	N/A	N/A	A
Alzheimer's, Dementia or Memory Loss	N/A	N/A	N/A	A
Amputation due to disease	N/A	N/A	A	A
Aneurysm > 1 year ago	N/A	A	A	A
Aneurysm within last year	N/A	N/A	A	A
Anxiety	A	A	A	A
Arthritis	A	A	A	A
Asthma	N/A	A	A	A
Basal Cell Skin Cancer	N/A	A	A	A
Bipolar diagnosed < 1 year ago	N/A	N/A	A	A
Bipolar diagnosed >1 year ago	N/A	A	A	A
Cancer more than one occurrence	N/A	N/A	N/A	A
Cancer treatment completed in last 2 years	N/A	N/A	N/A	A
Cancer treatment completed 2-5 years ago	N/A	N/A	A	A
Cancer treatment completed more than 5 years ago	N/A	A	A	A
Cardiomyopathy diagnosed >2 years ago	N/A	A	A	A
Cardiomyopathy diagnosed in last 2 years	N/A	N/A	A	A
Cholesterol Treatment	A	A	A	A
Chronic Bronchitis	N/A	A	A	A
Chronic Kidney Disease (CKD) on dialysis	N/A	N/A	N/A	A
Chronic Kidney Disease diagnosed <1 year	N/A	N/A	N/A	A
Chronic Kidney Disease diagnosed >1 year ago	N/A	N/A	A	A
Cirrhosis	N/A	N/A	N/A	A
Congestive Heart Failure	N/A	N/A	N/A	A
COPD	N/A	A	A	A
Coronary Artery Disease diagnosed >2 years ago	N/A	A	A	A
Coronary Artery Disease diagnosed in last 2 years	N/A	N/A	A	A
Currently Hospitalized	N/A	N/A	N/A	A
Currently undergoing (or been recommended to have) testing or further evaluation for a condition that has not been diagnosed	N/A	N/A	N/A	A

Condition	Preferred	Standard	GDB	GI
Defibrillator	N/A	N/A	N/A	A
Depression	A	A	A	A
Diabetes no insulin	A	A	A	A
Diabetes with Insulin – no complications	N/A	A	A	A
Diabetes with insulin along with kidney disease, neuropathy, or other complication	N/A	N/A	A	A
Emphysema	N/A	A	A	A
Heart Attack in last 2 years	N/A	N/A	A	A
Heart Attack more than 2 years ago	N/A	A	A	A
Heart Surgery diagnosed >2 years ago	N/A	A	A	A
Heart Surgery diagnosed in last 2 years	N/A	N/A	A	A
Hepatitis B and C	N/A	A	A	A
HIV/AIDS virus only	N/A	N/A	A	A
Hospitalized more than 2 weeks in last year	N/A	N/A	A	A
Hypertension	A	A	A	A
In hospice, nursing home, long term or memory care	N/A	N/A	N/A	A
Kidney failure diagnosed <1 year	N/A	N/A	N/A	A
Kidney failure diagnosed > 1 year ago	N/A	N/A	A	A
Multiple Sclerosis	N/A	A	A	A
Organ Transplant	N/A	N/A	N/A	A
Oxygen – any use of oxygen	N/A	N/A	N/A	A
Pacemaker placed in last year	N/A	N/A	A	A
Pacemaker placed more than 1 year ago	N/A	A	A	A
Parkinson's	N/A	A	A	A
Regular use of wheelchair or electric scooter	N/A	N/A	N/A	A
Schizophrenia diagnosed <1 year ago	N/A	N/A	A	A
Schizophrenia diagnosed >1 year ago	N/A	A	A	A
Sickle Cell Anemia	N/A	N/A	N/A	A
Stroke or TIA >1 year ago	N/A	A	A	A
Stroke or TIA within last year	N/A	N/A	A	A
Systemic Lupus	N/A	N/A	N/A	A
Terminal Illness	N/A	N/A	N/A	A
Wheelchair use temporary due to injury	A	A	A	A



Build Chart

Height	Maximum Weight for Preferred
4'8"	175
4'9"	181
4'10"	194
4'11"	194
5'0"	200
5'1"	207
5'2"	214
5'3"	221
5'4"	228
5'5"	235
5'6"	243
5'7"	250
5'8"	258
5'9"	265
5'10"	273
5'11"	281
6'0"	289
6'1"	297
6'2"	305
6'3"	314
6'4"	322
6'5"	330
6'6"	339
6'7"	348
6'8"	357
6'9"	366
6'10"	375
6'11"	384

Qualification for Preferred class considers overall mortality. The build chart is intended as a general guide, it is only one of the factors and is not a guarantee of qualifying.

Contact Us

Web: agent.royalneighbors.org

- Download forms and applications
- Obtain status of pending business/Certificates
- Obtain commissions
- Run illustrations/quotes
- Training
- Get latest Royal Neighbors news
- Order supplies

Email: UW_mailbox@royalneighbors.org

Fax: New applications: (866) 787-1450

Sales Support: (309) 788-4561, Option 1, Option 5

Underwriting: (309) 788-4561, Option 1, Option 1, Option 1

Mail: Royal Neighbors of America®, 230 16th Street, Rock Island, IL 61201-8645

Phone: (309) 788-4561, option 1 (for agent), then:

- Pending applications Option 1
- Certificate changes Option 1
- Risk assessment Option 1
- Commissions or 1099s Option 2
- Contracting and licensing Option 3
- In-force certification info Option 4
- Illustrations/Quotes Option 5
- Annuity Underwriting Option 6
- Member Savings Option 7
- Chapter information Option 8
- Inquiries Option 5

We appreciate your business!





ENSURED LEGACY FINAL EXPENSE AGENT TRAINING GUIDE

- Simplified Issue Whole Life, Form Series 211311 • Graded Death Benefit, Form Series 211312
- Guaranteed Issue, Form Series 221309

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