

Life Insurance

Underwriting Guide



Effective Date: January 2023

www.gpmlife.com

Questions?

New Business (800) 938-4765, ext. 6003

Risk Assessment: Email: uwrisk@gpmlife.com

Application Kits & Forms

Online via Agent Access: www.gpmagent.com

Need Assistance? (800) 938-4765, ext. 4000

Submit Applications

Online via Agent Access: www.gpmagent.com

Fax: (888) 701-3869

Policies Underwritten by:

Government Personnel Mutual Life Insurance Company • GPM Life

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This Life Insurance Underwriting Guide is intended to be a reference while providing GPM Life's typical requirements for underwriting. GPM Life reserves the right to request information other than as stated in this Life Insurance Underwriting Guide. Underwriting will make its decision based on the entirety of the information provided to and received by GPM Life, which may result in a decision that is more or less favorable than the underwriting guide dictates.

EXAMS

If the applicant has applied to GPM Life in the past six months, GPM Life reserves the right to require a current exam with screening tests depending on medical findings and history. When applying for additional GPM Life insurance, a GPM Life paramed exam or physical measurements exam including screening tests may be updated by completion of a current non-medical application for up to six months after the exam date.

BLOOD TESTING

Various states require special authorization for blood testing. Please submit a signed authorization form with the application when required.

Forms are available on www.gpmagent.com

TIME FRAME: MEDICAL EXAMS and OTHER STUDIES

In the absence of significant medical history, blood and urine tests by an approved paramedical vendor completed for GPM Life prior to the application date, generally are acceptable, if within the time limits stated below. GPM Life reserves the right to order current studies.

BLOOD and URINE TESTS: 6 months

INSPECTION REPORTS

- Ordered on life insurance policy amounts of \$500,000, issued and applied for, and greater.
- Please advise the Proposed Insured(s) they will be contacted for this report.
- GPM Life may order a report on a discretionary basis, regardless of amount.

MOTOR VEHICLE REPORTS

- Ordered on all Proposed Insureds ages 18 and over.
- Ordered on life insurance policy amounts of \$100,000, issued and applied for, and greater.
- Please be sure to enter the correct driver’s license number and state on the application.
- GPM Life may order a report on a discretionary basis, regardless of amount.

CONTROLLED / FAMILY BUSINESS

Proposed Insured is self, spouse, parent, grandparent, child, grandchild, (adopted, half, step), sibling, contracted or previously contracted agents.

▲ NOTE: Underwriting will order medical records and conduct underwriting requirements that apply to the product for all applicants who meet the definition of “Controlled Business”.

REPLACEMENT BUSINESS

If the state has adopted the NAIC Model Replacement Regulation, the Important Notice: Replacement of Life Insurance or Annuities replacement form must be completed if there is any insurance in force. The Proposed Insured and Agent must list all policies to be replaced on the replacement form and indicate the type of replacement involved. The entire replacement form must either be read in its entirety to the applicant, or the block at the bottom of the first page must be initialed by the applicant indicating they do not want the notice read aloud to them.

For all other states, submit a state replacement form, if any, and the GPM Life Understanding of Policy Replacement form 01.56.

Find replacement forms on Agent Access: www.gpmagent.com.

MILITARY APPLICATION LIMITS

To determine the military insurance limit from the following table, include

1. The total initial amount of life insurance applied for.
2. The current amount (exclusive of paid-up additions) of any life insurance already in force with GPM Life.
3. The amount of one option under any GIO or GBI riders(s) in force or applied for.

GENERAL LIMITS ON ACTIVE DUTY MILITARY PERSONNEL:

Paygrade	Limits
E1, E2, E3	\$50,000
E4	\$100,000
E4 - 2nd enlistment	\$250,000
E5, E6	\$250,000
E7	\$500,000
E8, E9	\$500,000
O1, O2, W1, W2	\$250,000
W3, W4, W5	\$500,000
O3 and up	\$500,000

▲ Please Note: Military personnel currently serving in the Special Forces, Rangers, SEALs, Airborne, Recons, other elite or commando forces, and pilots and crew members of A, B, F, H, R, and T type aircraft: Individual consideration - submit application with Military Questionnaire and Aviation Questionnaire if a pilot or crew member.

JUVENILE GUIDELINES for APPLICATIONS

⚠ Note: Before considering insurance coverage on children, please make sure there is adequate insurance on the proposed insured child's parents. Any reference to parents means custodial parent.

1. **Exceptions to Juvenile Underwriting Guidelines:** Written approval is needed from an Assistant VP or VP of Underwriting prior to taking an application.
2. **Declined for Insurance:** A proposed insured child should not have any previous declines for an individual policy or a rider.
3. **Insurable Interest:** This is generally a blood relationship, legal adoption or financial interest in the continued life of the insured, between the proposed insured, policy owner and policy beneficiary.
4. **Stepparents - MAY NOT insure stepchildren without the WRITTEN CONSENT of custodial parent. This applies to both the amount of coverage and the designated beneficiary.**
5. **Foster Parents - DO NOT have an insurable interest in the life of a foster child and should not apply for coverage.**
6. **When there is an application on a child, but there is no coverage on the child's parents:** Please provide an outline for the purpose of insurance and the reason why there is no coverage on parents. If parents have existing insurance, either individual or group, please provide name of insurer, how much coverage, and length of time insurance has been in force for each parent.
7. **Siblings and Coverage:** Siblings should have similar amounts of coverage. Explain why one child might have a greater amount of coverage than any other sibling. Do not leave a conditional receipt in such cases.
8. **Greater than 50%:** Insurance on a child should not be greater than 50% on the least amount of coverage in force on an individual parent.
9. **Visual Observation:** Soliciting agents must actually see the proposed insured child when taking an application and note any observable physical and/or mental impairment in the Agent's Report.
10. **Family Relations:** Explain familial relationships when a child's last name is not the same as the applicant's and/or the beneficiaries'.
11. **Medical History:** Provide medical history for any child being insured, such as wellness exam results, immunizations, office visits, the doctor's name and address and the date of the child's last check-up.

12. **State Guidelines:** Many states have specific guidelines for insuring juveniles with which we must comply but that are not specifically listed above.

Please direct questions to the Underwriting Department (800) 938-4765, ext. 6003

SIGNATURE GUIDELINES for JUVENILE APPLICATIONS - ICC16 LA17

When using the new ICC16 LA17 application for your state, and the Primary Proposed Insured is a minor aged 15-17:

- The minor must sign the application on the "Signature of the Primary Proposed Insured" signature line. Cross out the material below that signature line, like this - "(if minor, ~~parent, or legal guardian~~)."
 - The Proposed Owner (parent, grandparent, or guardian) of such minor must also sign on the "Signature of Proposed Owner" signature line.
 - If a grandparent will be the owner, the minor's parent must sign on any of the four "Signature of Other Proposed Insured" signature line; modify the material below the signature line, like this: "Signature of Other Proposed Insured" Parent (if age 15 or over)." Notice that you must add "Parent."

Any minor aged 15-17 must also sign the HIPAA form number 01.23 on the "Signature of Proposed Insured/ Patient or Personal Representative" signature line, and his/her parent must sign the "Description of Personal Representative's Authority or Relationship to Patient" line, followed by the word "Parent."

These guidelines will apply for most applications on minors aged 15-17 submitted to GPM Life. If a parent cannot sign, please write an explanation to accompany the application. Some states allow minors to apply for insurance on their own lives without a parent's signature, but those situations are limited. You are encouraged to become familiar with the regulations applicable to minors for the state(s) in which you write.

GENERAL UNDERWRITING GUIDELINES

Example - Signature Guidelines

Minor Aged 15 - 17

Signature of Primary Proposed Insured
(if minor, parent or legal guardian)

Signature of Spouse, if a Proposed Insured

xx / xx / xxxx

*** Date Signed ***

Custodial Parent or Grandparent

Signature of Proposed Owner
(if not Primary Proposed Insured)

Custodial Parent

Signature of Other Proposed Insured
(if age 15 or over)

Signature of Other Proposed Insured
(if age 15 or over)

Signature of Other Proposed Insured
(if age 15 or over)

Signature of Other Proposed Insured
(if age 15 or over)

GENERAL FINANCIAL REQUIREMENTS

RISK AMOUNT	REQUIREMENTS
1. ALL	Complete Agent's Report
2. \$1,000,001 - \$2,000,000	Complete Agent's Report and cover letter, plus have Financial Statement
3. \$2,000,001 - \$10,000,000	Meet requirements 1 and 2 and provide: <ul style="list-style-type: none"> a. Balance Sheet / income for at least one (1) year. b. Income Statement (if business) for at least one (1) year. (K1 schedule)
4. \$10,000,001 and up	Meet requirements 1, 2, and 3 and provide: <ul style="list-style-type: none"> a. Balance Sheet for at least Three (3) years. b. Income Statement for at least Three (3) years.

In addition, provide an explanation (cover letter) whenever the amount of personal insurance in force and applied for exceeds the amount obtained by multiplying the appropriate factor, from the chart below, for the insured's age by the insured's annual income.

AGE	FACTOR	AGE	FACTOR	AGE	FACTOR	AGE	FACTOR
0 - 20	IC*	31 - 40	25	51 - 60	15	66 - 70	7
21 - 30	25	41 - 50	20	61 - 65	10	71 - 75	4

* Individual Consideration

PENDING POLICIES

Common causes that may delay policy issue:

- Missing EFT Forms
- Issue Instructions are needed from the agent
- Required amendments have not been signed and received

We will notify you of pending requirements in three ways:
1) Phone Call 2) Email 3) Agent Access

▲ NOTE: An application will be withdrawn and the applicant will be notified when the application has been in Underwriting Approved status with outstanding non-risk related requirements¹ for 15 business days. In the event the outstanding requirements are satisfied within 30 calendar days we will re-open the application and the policy may be issued. After 30 days a new application may be required.

Please contact the New Business staff with questions:
(800) 938-4765, ext. 6003

¹This excludes applications which are Underwriter Approved and pending premium from an allotment. These applications are placed in an “Issued Not Paid” status.

LAB TESTING & EXAM - POLICIES & PROCEDURES

Blood Testing

Blood testing is required with all paramedical and medical exams. Testing is done by Clinical Reference Labs. An 8-12 hour fast prior to the blood draw is recommended.

Home Office Urine Specimen (HOS)

An HOS is required with all paramedical and medical exams. Testing is done by Clinical Reference Labs.

Authorized Paramedical Companies

The companies listed below are authorized to perform paramedical and medical exams on our behalf.

- Examination Management Services, Inc. (EMSI)
- ExamOne, Inc.
- American Para Professional Systems, Inc. (APPS)

Medical Exams (MD)

Medical exams may be arranged through an authorized paramedical company. Board certified medical exams are not required. Examinations by physicians not arranged by a paramedical company, such as Proposed Insured’s personal physician, should not be used without prior approval from Underwriting.

Senior Screening (SS)

Proposed insureds ages 71 and older will need to complete a senior screening test (SS) which screens for cognitive deficits.

EXAM	UP to AGE 70	AGE 71 & OLDER
Oral Fluid (OF)	Good for 1 year	N/A
Blood	Good for 1 year	Good for 6 months
Home office Urine Specimen (HOS)	Good for 1 year	Good for 6 months
Paramed / MD Exams	Good for 1 year	Good for 6 months
Motor Vehicle Report (MVR)	Good for 6 months	Good for 6 months
Senior Screening (SS)	N/A	Good for 6 months

MEDICAL IMPAIRMENTS & QUESTIONNAIRES

ALCOHOL & DRUG ABUSE

A history of substance abuse (alcohol, illegal drugs, or street drugs) poses multiple concerns for life insurance. Substance abuse puts a client at a higher risk for accidents, homicide, suicide, and overdose. Long-term substance abuse can lead to serious health problems involving the brain, heart, liver, GI tract, circulatory system and major infections (i.e. hepatitis and HIV).

Any current substance abuse makes the Proposed Insured uninsurable. In most cases, the Proposed Insured must be two years out from last use before we can consider them for life insurance, and they must have complete abstinence. Some factors that are more favorable when considering Proposed Insured for life insurance include participation in a support group (AA, NA, etc.), family and job stability, and favorable MVR. Factors that would have a negative impact on underwriting these individuals would be a history of multi-substance abuse (for example, drugs and alcohol), mental illness in addition to substance abuse, history of relapse, and participation in hazardous avocations.

Occasional marijuana use (1-2 times a month) may be considered at standard tobacco rates. Heavier marijuana use could lead to sub-standard ratings or possibly decline.

Please complete an Alcohol Usage and/or Drug Usage Questionnaire.

CEREBROVASCULAR DISEASE (STROKE/TIA)

A stroke or CVA (cerebrovascular accident) occurs when there is not enough oxygen reaching the brain. This can be caused by a clot that blocks an artery or a rupture of an artery (aneurysm) in the brain. A major stroke can lead to irreversible brain damage or death. A Transient Ischemic Attack (TIA) is a brief disruption of blood flow to the brain and the symptoms are usually reversible. A TIA can be a precursor to a full-blown stroke, so close monitoring is necessary.

Risk factors for stroke include:

- Uncontrolled high blood pressure/hypertension
- Tobacco use
- Diabetes
- Other vascular disease (i.e. heart disease, peripheral vascular disease)

A combination of any of the above risk factors and a history of stroke/TIA will usually result in a decline.

Please complete a Stroke/Transient Ischemic Attack (TIA) Questionnaire.

CHRONIC RESPIRATORY CONDITIONS (ASTHMA, COPD, EMPHYSEMA, CHRONIC BRONCHITIS)

Asthma is a reversible obstruction of the airways in the lungs. Common symptoms are shortness of breath,

wheezing and coughing. Lung function between attacks is usually normal. Treatment focuses on prevention of attacks. Oral and inhaled medications may be used.

Risk classification is determined by factors such as frequency and severity of attacks, lung function, type of treatment required and tobacco use status.

Chronic Obstructive Pulmonary Disease (COPD) is a general term used to describe a variety of diseases that cause chronic airway obstruction. Two of the most common forms of COPD are chronic bronchitis and emphysema. The symptoms vary and include difficulty breathing, fatigue, chronic cough, weight loss, and diminished levels of oxygen in the blood. The development of COPD is most often associated with smoking. Treatment may include oral or inhaled medications. In severe cases the use of oxygen may be required.

Risk classification is determined by factors such as degree of respiratory impairment, lung function, continued use of tobacco, and type of treatment required. The current use of oxygen would result in a decline.

Please complete a Respiratory Questionnaire.

DIABETES

Diabetes mellitus is a disease in which there are high levels of glucose in the blood stream. This results from the body being unable to produce a sufficient amount of insulin or being unable to use the insulin that is produced.

Type I (insulin-dependent diabetes), also known as Juvenile Onset Diabetes, requires regular insulin injections to control blood sugars. It typically develops in childhood or adolescence (prior to age 30).

Type II (non-insulin-dependent diabetes), also known as Adult Onset Diabetes, is usually diagnosed later in life and can be controlled with close diet monitoring and/or oral medication. In some cases, a Type II diabetic may also require insulin injections to control their diabetes. Obesity and family history of diabetes are common risk factors for the development of this type of diabetes.

Uncontrolled diabetes can lead to a variety of complications. Some of the common problems include vision problems, kidney failure, circulatory problems, neuropathy, and diabetic coma. Diabetes is also a major risk factor for heart disease and stroke.

Routine follow-ups with a physician, close monitoring of blood sugars, and modification of diet are key factors in the successful control of diabetes. Hemoglobin A1C is a test commonly used to determine long term control blood sugars. The type of diabetes, age of onset, degree of control, and the presence (or absence) of any complications are useful in determining the underwriting rate class.

Please complete a Diabetic Questionnaire.

MEDICAL IMPAIRMENTS & QUESTIONNAIRES

HEART DISEASE

Heart Attack, Angina/Chest Pain, Angioplasty/Stent Placement, Bypass Surgery.

Heart disease occurs when the arteries that supply blood and oxygen to the heart become blocked and the heart is not able to pump normally.

Heart disease can be caused by:

- Progressive build up of plaque that causes narrowing of the arteries; or
- Clotting caused by the rupture of plaque in the artery; or
- Vasospasm of the artery.

Angina/cardiac chest pain occurs when the heart does not receive enough oxygen.

A heart attack or myocardial infarction occurs when there is a significant lack of oxygen to the heart muscle, which can lead to tissue death.

Heart disease is typically a progressive condition that can be treated but not cured. The most common ways to treat heart disease are the use of medications, modification of risk factors, angioplasty/stent placement, and bypass surgery. Risk factors for heart disease include:

- Family history of early heart disease
- Elevated cholesterol
- Diabetes
- Tobacco use
- Obesity
- High blood pressure/Hypertension

A combination of heart disease and the following conditions will usually result in a decline:

- Continued tobacco use
- Stroke or Transient Ischemic Attack (TIA)
- Diabetes
- Peripheral Vascular Disease (PVD)
- Age at onset under 40

Please complete a Chest Pain Questionnaire.

HIGH BLOOD PRESSURE / HYPERTENSION

High blood pressure or hypertension is a persistent elevation in blood pressure readings above what is considered normal for age and gender. Untreated high blood pressure can lead to complications such as heart enlargement and kidney damage. This also causes an increased risk of stroke and heart disease. The usual treatment for high blood pressure is medication and diet modification.

When individuals are compliant with treatment and blood pressure readings are within the normal range, they can usually be considered for a standard rating.

Please complete a Hypertension Questionnaire.

TUMOR / CANCER

Cancer or malignant tumors are characterized by abnormal cell growth that invades healthy tissue and causes breakdown of normal tissue function. Once a tumor invades the surrounding tissue, it can then move into the blood and lymph system. If it spreads to other organs in the body the cancer is said to have metastasized.

Major risk factors for cancer are family history of cancer, tobacco use, excessive exposure to sunlight, exposure to environmental toxins, and inflammatory conditions (i.e. ulcerative colitis, hepatitis).

The prognosis for cancer is highly variable with Underwriting risk classification focusing on type/location of cancer, size of tumor, stage of cancer, extent of invasion and length of time since treatment was completed.

Please complete a Cysts (Tumor) Cancer Questionnaire.

ADDITIONAL QUESTIONNAIRES:

1. Aviation Questionnaire – complete if there is any participation in aviation activities.
2. Back/Neck Pain Questionnaire – complete if there is a history of chronic back or neck pain.
3. Confidential Financial Statement – complete upon Underwriting request.
4. Epilepsy/Seizure Disorder Questionnaire – complete if there is a history of epilepsy, seizures or fainting spells.
5. Foreign Travel Questionnaire – complete for any applicant who has traveled to a foreign country within the past two years or intends to travel to a foreign country in the next two years.
6. Mental/Nervous Disorder Questionnaire – complete if there is a history of, or current treatment for, depression, anxiety, or any other mental or nervous disorder.
7. Military Questionnaire – complete if applicant is a member of the military.
8. Scuba Diving Questionnaire – complete if there is any participation in any scuba diving activities.
9. Tobacco Questionnaire – complete if applicant admits to using any form of tobacco in the last five years.

RISK - UNINSURABLE - HIGHLY SUBSTANDARD

Below are some common impairments that normally cause a case to be rated highly substandard or a decline. This is not meant to be a comprehensive listing. All cases are subject to underwriting review.

IMPAIRMENT	PROBABLE ACTION
AIDS/HIV	Decline.
Alcoholism	Current abuse, or within two years of treatment: Decline.
	Treatment within two to five years: minimum Substandard.
	Treatment over five years ago: Standard.
ALS (Lou Gehrig's Disease)	Decline.
Alzheimer's Disease	Decline.
Anemia	Rating is dependent upon underlying cause.
	Iron deficiency anemia: Standard unless anemia is severe which would be Substandard.
Aneurysm (Cerebral)	Within three years of surgical correction: Substandard.
	Over three years since surgical correction: Standard.
Aneurysm (Thoracic/abdominal)	Surgically repaired: Standard.
	No treatment: Standard to Decline.
Angina pectoris	Unstable angina or not fully investigated with cardiac catheterization: Decline.
	Stable angina treated with medication: Standard Tables F and up.
Anxiety	Within two years of last symptoms: Substandard.
	Over two years since last symptoms: Standard.
Aortic murmur	Mild or Moderate murmur with no symptoms: Substandard.
	Severe murmur with cardiac symptoms: Substandard to Decline.
Atrial Fibrillation (Chronic)	With no underlying heart disease or cardiac symptoms: Substandard.
	With underlying heart disease: Decline.
Atrial Fibrillation (Intermittent)	Standard to Decline.
Arthritis (osteo)	Mild or Moderate with little impact on daily activities: Standard.
	Severe with persistent pain, limited range of activities, regular use of aids to locomotion: Substandard.
Arthritis (rheumatoid)	Mild to Moderate with little impact on activities of daily living and no continuous steroid use: Substandard.
	Severe with persistent pain, impact on activities of daily living and/or continuous steroid use: Standard Tables F to Decline.
Asthma	Mild to Moderate with up to daily symptoms with little impact on lung capacity: Standard.
	Severe with continuous use of steroids and/or impact on lung capacity: Substandard.
Breast Cancer	Stages 1 & 2 (early breast cancer) minimum five years post treatment: Standard.
	Stage 3 & 4 (Locally advanced and metastatic cancer): Decline.
Cancer (internal)	Call Underwriting Department for quote. We will need following information: Tumor Stage, Grade, location, time since treatment and type of treatment.
Cancer (melanoma)	Stage 1: Decline for one year following last treatment. One year post treatment up to five years: Standard with temporary flat extra. Call Underwriting for quote. Standard after five years post treatment.
	Stage 2: Decline for at least two years post treatment. Two years post treatment up to five years: Standard with temporary flat extra. Call Underwriting for quote. Standard after seven years post treatment.
	Stage 3 & 4: Decline.

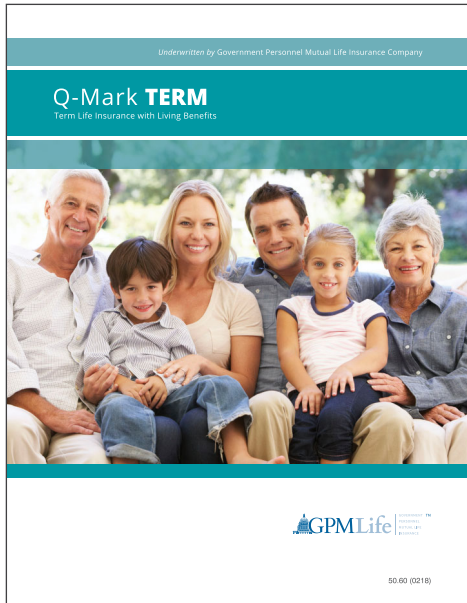
IMPAIRMENT	PROBABLE ACTION
Cancer (skin-other than melanoma)	Rating dependent upon type of skin tumor. Call Underwriting with name of tumor, staging information, treatment, and length of time since completion of treatment.
Cardiomyopathy	Currently present, or within three years of full recovery: Decline.
	Over three years since full recovery: Substandard to Decline.
Cerebral Palsy	Under age 8: Decline.
	Over age 8, mild case with good motor skills and no intellectual disability: Standard
	Over age 8, mild/moderate intellectual disability: Substandard.
	Over age 8, requiring wheelchair, major intellectual disability, unable to perform ADL's/IADL's: Decline.
Chronic fatigue syndrome	After one year since onset of symptoms with full recovery: Standard.
	Current without full recovery: Substandard.
COPD (chronic obstructive pulmonary disease)	Less than age 45 and non-smoker, Mild case: Substandard.
	Less than age 45 and smoker, Mild case: Substandard to Decline.
	Less than age 45, Moderate/Severe case: Decline.
	Over age 45 and non-smoker, Mild/Moderate case: Substandard.
	Over age 45 and smoker, Mild/Moderate case: Substandard to Decline.
Over age 45, Severe case: Decline.	
Cirrhosis (liver)	Decline.
Colitis, spastic (Irritable bowel syndrome)	Standard.
Colitis, ulcerative	Substandard.
CHF (Congestive Heart Failure)	Current: Decline.
	One year post full recovery: Standard Table F to Decline.
Coronary angioplasty/stenting	Call Underwriting Department for quote. We will need following information: number of vessels involved, location of the lesions within the vessels, severity of these lesions, treatment given and current cardiac status.
Coronary artery disease	Call Underwriting Department for quote. We will need following information: number of vessels involved, location of the lesions within the vessels, severity of these lesions, treatment given and current cardiac status.
CABG (coronary artery bypass graft)	Call Underwriting Department for quote. We will need following information: number of vessels involved, location of the lesions within the vessels, severity of these lesions, treatment given and current cardiac status.
Crohn's disease	Standard to Decline.
CVA (stroke)	Substandard to Decline.
Defibrillator	Substandard to Decline.
Dementia	Acute toxic dementia with full recovery: Standard.
	All other forms of dementia: Decline
Depression	Standard to Decline.
Diabetes mellitus	Type 1 Diabetes: Substandard to Decline.
	Type 2 Diabetes: Standard to Substandard.
Diverticulitis	Standard to Substandard
Drug abuse	Current or within five years of past use: Decline.
	Five years since last use: Standard to Decline.
Emphysema	Substandard to Decline.
	With ongoing oxygen use and/or smoking: Decline.

IMPAIRMENT	PROBABLE ACTION
Endocarditis	Current: Decline.
	Over one year since diagnosis, no IV drug use, no cardiac or stroke history, normal heart valves: Standard
Epilepsy	Absence or petit mal seizures, last seizure over two years ago: Standard.
	Grand Mal seizures, last seizure over two years ago: Standard to Substandard.
Fibromyalgia	Current, Mild (Currently at work, active lifestyle, intermittent use of medications at low dosages): Standard.
	Current, Moderate (minimal functional impairment, currently at work, active lifestyle, moderate dosages of medication): Substandard.
	Current, Severe (Disabled, limited activities, associated with moderate to severe depression, multiple medications at high dosages or frequent changes in medication): Decline.
Gastroenteritis	Fully recovered: Standard.
Gout	Mild/Moderate (infrequent, acute attacks, no joint deformities): Standard.
	Severe (chronic, frequent attacks with joint deformities): Substandard.
Headache (migraine)	Mild (infrequent attacks without underlying cause identified): Standard.
	Severe, frequent attacks or increasing frequency: Decline.
Heart Attack	Substandard to Decline.
Heart Valve replacement/repair	Substandard to Decline.
Hepatitis	Hep B, resolved: Standard
	Hep C, resolved: Substandard to Decline.
High blood pressure (hypertension)	Well controlled (with or without medication): Standard.
Hodgkin's disease	Stage 1: One year post treatment to five years, Standard with a temporary extra. Five years post treatment, Standard.
	Stage 2: Three years post treatment to eight years, Standard with a temporary extra. Eight years post treatment, Standard.
	Stage 3 or 4: Decline.
Kidney failure	Acute episode, fully recovered: Standard.
	Chronic disease: Substandard to Decline.
	Currently treated with dialysis: Decline.
Lupus (discoid)	Standard.
Lupus (systemic)	Substandard to Decline.
Mitral valve murmur	Substandard to Decline.
	Mitral Valve prolapse: Standard.
MS (multiple sclerosis)	Not progressive or relapsing-remitting: Substandard to Decline.
	Progressive: Decline.
Myasthenia gravis	Ocular form: Within five years of onset: Substandard. Over five years since onset: Standard.
	Generalized form: Substandard.
Myocarditis	Acute viral, single attack: Two years since resolution, Standard.
	More than single attack: Decline.
Muscular dystrophy	Substandard to Decline.
Non-Hodgkin's lymphoma	Stage 1: Within three years of last treatment, Standard with temporary flat extra. Over three years since last treatment, Standard.

IMPAIRMENT	PROBABLE ACTION
Non-Hodgkin's lymphoma (<i>continued</i>)	Stage 2: Within five years of last treatment, Standard with temporary flat extra. Over five years since last treatment, Standard.
	Stage 3: Within seven years of last treatment, Standard with temporary flat extra. Over seven years since last treatment, Standard.
	Stage 4: Decline.
Pacemaker	Substandard to Decline.
Pancreatitis	Acute, over one year since recovery: Standard.
	Chronic disease: Substandard to Decline.
Paraplegia	Substandard to Decline.
Parkinson's disease	Substandard to Decline.
Pericarditis	Acute, fully recovered: Standard.
Peripheral vascular disease	Mild or moderate: Substandard.
	Severe: Decline.
Phlebitis	Single episode with full recovery: Standard.
	Multiple episodes: Substandard to Decline.
Prostate cancer	Call Underwriting Department for quote. We will need following information: Tumor Stage, Grade, time since treatment and type of treatment.
Prostatitis	Acute, Fully recovered: Standard.
Psychosis (schizophrenia)	Substandard to Decline.
Quadriplegia	Substandard to Decline.
Raynaud's disease	Fully recovered: Standard.
	Otherwise: Substandard to Decline.
Rheumatic fever	Fully recovered with no heart valve damage: Standard.
	With heart valve damage: Substandard to Decline.
Sarcoidosis	Rating depends on organs involved: if eyes, skin, joints, Standard.
	Liver, heart, kidneys, nervous system involvement: Substandard to Decline.
Sleep apnea	Mild with consistent use of CPAP: Standard.
	More severe and/or inconsistent use of CPAP: Substandard.
Stroke (CVA)	Substandard to Decline.
Suicide attempt	Single attempt, over one year since attempt: Standard with temporary flat extra.
	Multiple attempts, over two years since last attempt: Standard Table F with temporary flat extra to Decline.
Thyroid disorder (non-cancerous)	Standard.
TIA (transient ischemic attack)	Single attack, within four years: Substandard.
	Single attack, over four years: Standard.
	Multiple attacks, within five years of last attack: Substandard to Decline.
	Multiple attacks, over five years since last attack: Substandard.
Transplants (heart, liver, lung)	Decline.
Transplants (kidney)	Contact Underwriting Department.
Ulcer	Standard to Substandard.
Varicose veins	Standard.

List is not all-inclusive. "Probable Action" meant to provide agent with general parameters of risk classification and should not be interpreted as quotes in any way. All cases are subject to full underwriting review. Please contact the Underwriting Department with any questions or for impairments not listed.

Q-Mark **TERM**



Q-Mark TERM
TERM LIFE INSURANCE with Living Benefits

PRODUCER RATE GUIDE

10, 15, 20, and 30 Year Level Term Periods
Living Benefit Rider¹
Immediacy of Approval
Convertible²
To Permanent Life Insurance

PRODUCER FACTS Q-Mark TERM with Living Benefits
TERM Life Insurance

KEY FEATURES

- Guaranteed fixed premiums during the level premium period, annually renewable thereafter, through age 100.
- Includes an Accelerated Living Benefit Rider without additional premium, where approved in the state of issue. Not available for Underwriting Table 2 and 3 rates.
- Non-medical underwriting, through issue age 65. For face amounts \$25,000 - \$250,000, see underwriting Guide for details.

MINIMUM FACE AMOUNT / UNDERWRITING CLASS	FACE AMOUNT BANDS ³
\$25,000 Standard Non-Tobacco	BAND 1 \$25,000 to \$50,000
\$25,000 Standard Tobacco	BAND 2 \$100,000 to \$250,000
\$25,000 Preferred Non-Tobacco Issue ages 18-40	BAND 3 \$100,000 to \$400,000
\$100,000 Preferred Non-Tobacco Issue ages 41-65	BAND 4 \$100,000 to \$500,000
	BAND 5 \$1,000,000 to \$1,000,000

³ Call for Active Day Withdrawal Limits

MODAL PREMIUM - MINIMUM	MODAL FACTORS	POLICY FEE - ANNUAL
Monthly \$1.58	Monthly 0.0000%	Band 1 \$80
Monthly \$2	Monthly 0.0075	Band 2-5 \$30
Quarterly \$75	Quarterly 0.2600	
Semi-Annually \$150	Semi-Annually 0.5100	
Annually \$300	Annually 1.0000	

UNDERWRITING RATE CLASSES

Rate Class	Underwriting
10-15	Preferred Non-Tobacco
15-20	Preferred Non-Tobacco
20-25	Standard Non-Tobacco
25-30	Standard Tobacco

No tobacco in any form in the past 3 years
No tobacco in any form in the past 12 months
Have used tobacco in some form within the past 12 months

GPMLife Government Personnel Mutual Life Insurance Company

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NOT FOR PUBLIC DISTRIBUTION
See the actual policy for details.
Get the full story, see illustrations and the restrictions.

PUBLIC DISTRIBUTION
¹ Not available in all states, see available Tables 1 or 2 above.
² Convertible to a policy to term age, see illustrations and the restrictions.
80-001 (0218)

TERM Life Insurance with **LIVING BENEFITS**

Adding the opportunity to receive a portion of the death benefit from a term life insurance policy

The Q-Mark TERM product line with Living Benefits; provides Proposed Insureds with the flexibility to receive a portion of the policy's death benefit, should a serious illness qualify for such benefits.

MEDICAL REQUIREMENTS

In determining the dollar amount to use in the table below, add:

- The total initial face amount of the life insurance applied for; and
- The total life insurance and including any riders in force with GPM Life issued within the past five years.

Q-Mark TERM		18 - 40	41 - 50	51 - 60	61 - 65	66 -70	71 - 75	76 - 80
	\$25,000 to \$50,000	NM	NM	NM	NM	NM	Paramed BLD, HOS	Paramed BLD, HOS
	\$50,001 to \$99,999	NM	NM	NM	NM	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS
	\$100,000 to \$250,000	NM	NM	NM	NM	Paramed BLD, HOS	Paramed BLD, HOS, SS	Paramed BLD, HOS, SS
	\$250,001 to \$500,000*	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS, SS	Paramed BLD, HOS, SS
	\$500,001 to \$999,999*	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS,	Paramed BLD, HOS	Paramed BLD, HOS, SS, CFS	Paramed BLD, HOS, SS, CFS
	\$1,000,000 to \$3,000,000*	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, SS, CFS	Paramed BLD, HOS, SS, CFS

* Call for Active Duty Military Limits.

KEY	NOTE: ALL REQUIREMENTS ARE ORDERED BY THE AGENT UNLESS OTHERWISE NOTED
BLD	Blood Draw ► <i>(Strongly Suggest 8-12 hours of fasting prior to test)</i>
CFS	Confidential Financial Statement ► <i>(Ordered by Home Office)</i>
HOS	Urine Specimen
NM	Non-Medical ► Complete part 2 of the application ¹
Paramed	Paramed Exam ► <i>Medical History Questions, Measured Height and Weight, Pulse and Blood Pressure</i>
SS	Senior Screening ► <i>Screening for Cognitive Defects</i> ► <i>Not ordered by Home Office</i>

¹ Other requirements may be ordered at the Underwriter’s discretion.

UNDERWRITING CLASS & BUILD CHART

Preferred Non-Tobacco: Applicants in this rate class have not used tobacco in any form in the past 3 years.

Standard Non-Tobacco: Applicants in this rate class have not used tobacco in any form in the past 12 months.

Standard Tobacco: Applicants in this rate class have used tobacco in any form in the past 12 months.

Substandard Cases: Substandard ratings are available for Table A-H for the Standard Non-Tobacco and Standard Tobacco classes.

The Accelerated Living Benefit Rider is not available for Tables E and higher.

Build Table (Male and Female) Maximum Weight for each height and class

	4'10	4'11	5'0	5'1	5'2	5'3	5'4	5'5	5'6	5'7	5'8	5'9	5'10	5'11	6'0	6'1	6'2	6'3	6'4	6'5	6'6	6'7
PNT	140	145	150	155	160	165	170	175	180	185	190	195	205	210	215	220	225	230	235	240	250	260
Std	169	173	178	182	186	192	197	203	208	214	219	225	231	236	243	249	255	262	271	277	285	294

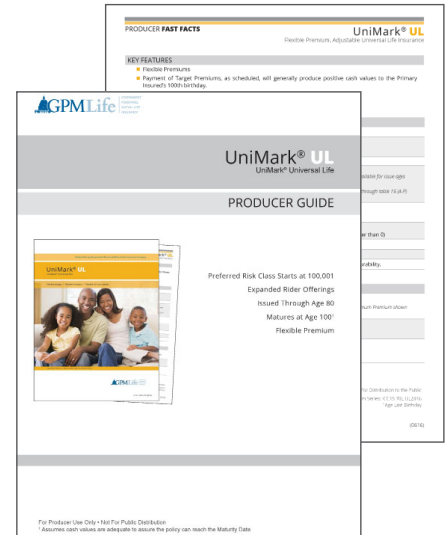
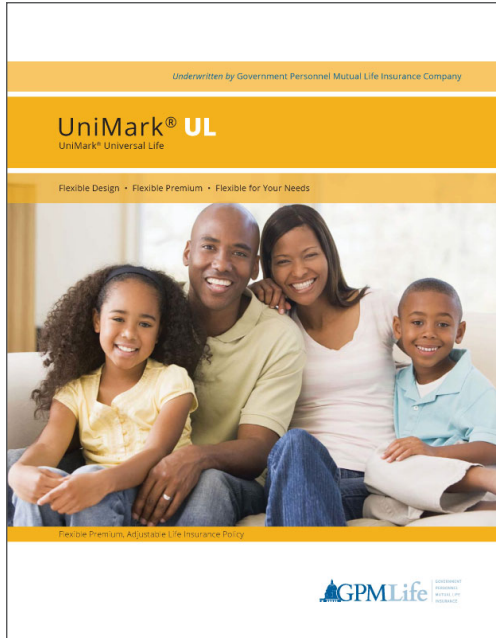
PREFERRED UNDERWRITING GUIDELINES

Preferred NON-TOBACCO

TOBACCO USAGE	
Includes tobacco or nicotine-based products	None in the past 3 years
CHOLESTEROL	
Cholesterol <=	240
Treatment	Yes
Chol./HDL Ratio <=	5.5
BLOOD PRESSURE	
Within these limits	140 / 90
Treatment	Yes
FAMILY HISTORY	
Includes coronary artery disease and the following cancers: Breast, Ovarian, Prostate, Colon, Lung, Melanoma	No deaths of either parent before age 60. Disregard if PI is age 60 as a result from these conditions. Disregard if PI is age 60 or older.
DRIVING	
Moving Violation - Major	No more than 1 in past 3 years
Moving Violation - Minor	No more than 3 in past 3 years
DUI	None in past 5 years
AVIATION	Can be offered if no rating
AVOCATION (HAZARDOUS)	None
SUBSTANCE / ALCOHOL ABUSE	None in past 10 years
US RESIDENCY	Lawful Permanent US Resident for past 3 years
CITIZENSHIP	Citizen or lawful permanent residency status
TRAVEL (UNSAFE - ex. on US travel advisory list)	None

Requirements listed above are not all-inclusive and other factors could prevent qualification for a class. Final decision will be made by GPM Life's Underwriting Department.

UniMark UL



FLEXIBLE Design FLEXIBLE Premiums FLEXIBLE for Your Needs

Universal Life (UL) is a permanent life insurance policy with flexible payment options and adjustable benefits.

MEDICAL REQUIREMENTS

In determining the dollar amount to use in the table below, add:

- The total initial face amount of the life insurance applied for; and
- The total life insurance and including any riders in force with GPM Life issued within the past five years.

UniMark UL		18 - 40	41 - 50	51 - 60	61 - 65	66 -70	71 - 75	76 - 80
	\$25,000 to \$50,000	Non-Medical: 18 - 49		Not Available: 50 - 80				
	\$50,001 to \$99,999	NM	NM	NM	NM	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS
	\$100,000 to \$250,000	NM	NM	NM	NM	Paramed BLD, HOS	Paramed BLD, HOS, SS	Paramed BLD, HOS, SS
	\$250,001 to \$500,000*	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS, SS	Paramed BLD, HOS, SS
	\$500,001 to \$999,999*	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS,	Paramed BLD, HOS	Paramed BLD, HOS, SS, CFS	Paramed BLD, HOS, SS, CFS
	\$1,000,000 to \$3,000,000*	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, SS, CFS	Paramed BLD, HOS, SS, CFS

* Call for Active Duty Military Limits.

KEY	NOTE: ALL REQUIREMENTS ARE ORDERED BY THE AGENT UNLESS OTHERWISE NOTED
BLD	Blood Draw ► <i>(Strongly Suggest 8-12 hours of fasting prior to test)</i>
CFS	Confidential Financial Statement ► <i>(Ordered by Home Office)</i>
HOS	Urine Specimen
N/A	Not Available
NM	Non-Medical ► Complete part 2 of the application ¹
Paramed	Paramed Exam ► <i>Medical History Questions, Measured Height and Weight, Pulse and Blood Pressure</i>
SS	Senior Screening ► <i>Screening for Cognitive Defects</i>

¹ Other requirements may be ordered at the Underwriter’s discretion.

Build Table (Male and Female) - Maximum weight for each height and class

	4'10	4'11	5'0	5'1	5'2	5'3	5'4	5'5	5'6	5'7	5'8	5'9	5'10	5'11	6'0	6'1	6'2	6'3	6'4	6'5	6'6	6'7
P+	130	135	140	145	150	155	160	165	170	175	180	185	190	195	200	205	210	215	220	230	235	240
PNT	140	145	150	155	160	165	170	175	180	185	190	195	205	210	215	220	225	230	235	240	250	260
PT	140	145	150	155	160	165	170	175	180	185	190	195	205	210	215	220	225	230	235	240	250	260
Std	169	173	178	182	186	192	197	203	208	214	219	225	231	236	243	249	255	262	271	277	285	294

Risk Classification Rules

No-Tobacco (NT) • Tobacco (T)

	PREFERRED PLUS (NT)	PREFERRED (NT)	PREFERRED (T)	STANDARD (T) or (NT)	
TOBACCO USE Includes tobacco and nicotine-based products	MUST NOT EXCEED	None in the past 5 years	None in the past 3 years	Yes	(T) - Yes (NT)-None in the past 2 years
CHOLESTEROL		220	250	250	(T) - 300 (NT) - 250
CHOLESTEROL TREATMENT		◆	◆	◆	◆
CHOLESTEROL - HDL Ratio		4.5	5.5	5.5	7.0
BLOOD PRESSURE NO TREATMENT		135 / 80	140 / 90	140 / 90	150/90 through 45 (age) 155/95 46 - 65 (age) 160/95 66 and up (age)
BLOOD PRESSURE TREATMENT		No	140 / 90	No	Yes
FAMILY HISTORY Coronary Artery Disease -or- Cancer	NO Occurrences Prior to age 60	NO Occurrences Prior to age 60	NO Occurrences Prior to age 60	Individual Consideration	
ALCOHOL SUBSTANCE ABUSE	No History	No History	No History	Individual Consideration	
AVIATION (Does NOT including commercial flight)	No	No	No	Allowed with appropriate rating, if applicable	
AVOCATION (Hazardous)	No	Individual Consideration	Individual Consideration	Allowed with appropriate rating, if applicable	
DRIVING Moving Violations	No more than 1 in the past 3 years	No more than 2 in the past 3 years	No more than 2 in the past 3 years	No more than 3 in the past 3 years	
DRIVING DUI / Reckless	None in the past 5 years				
U.S. RESIDENCY	Lawful Permanent U.S. Resident for past 3 years				
CITIZENSHIP	U.S. Citizen or Lawful Permanent U.S. Resident or Have Permanent Visa / Green Card				
TRAVEL (unsafe)	Individual Consideration Travel to areas currently under a U.S. State Department Travel Warning, or areas experiencing military or terrorist activity will not be accepted, if applicable law permits.				
MILITARY	Not Available	Individual Consideration (E-4 and above) ¹	Individual Consideration (E-4 and above) ¹	Refer to Military Issue Limits	

To be considered for any of the preferred classifications, the insured must pass a paramedical exam or physical measurements exam including screening tests, and must not be substandard for any reason except for flat extras (PNT and PT only) for aviation, occupation or avocation.

Other factors not addressed by these guidelines could prevent a Proposed Insured from qualifying for Preferred Plus, Preferred or Standard as determined by the underwriter.

To determine the final risk classification, a combination of the following cardiovascular risk factors will be taken into consideration: cholesterol, family history, and build.


◆ If pre-treatment and post-treatment cholesterol readings do not exceed limits for the class, it is acceptable to issue that class.

¹ Individual Consideration: Military service in hazardous areas or those alerted to serve in hazardous areas will not be accepted.

Traditional **WHOLE LIFE**

Underwritten by Government Personnel Mutual Life Insurance Company

Traditional **WHOLE LIFE**
Lifetime Pay • 20 Pay Life • Estate Builder



GPMLife
GUARANTEED PREMIUMS
GUARANTEED DEATH BENEFIT

51.03 (0117)

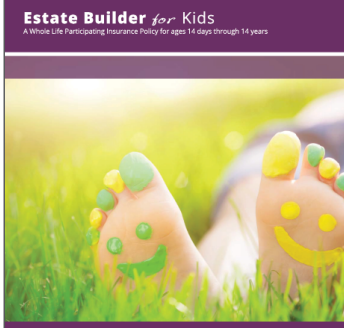
Traditional Whole Life **LIFETIME PAY** and **20 PAY LIFE** PRODUCER RAST FAC 15

KEY FEATURES:

- Accelerated Living Benefit Riders
- Policy Loan Availability
- Guaranteed Level Death Benefit - Remains level during the life of the policy*
- Guaranteed Level Premiums - Premiums will not increase
- Rider and supplemental Benefit options available

Underwritten by Government Personnel Mutual Life Insurance Company

Estate Builder for Kids
A Whole Life Participating Insurance Policy for ages 14 days through 14 years



Guaranteed Insurability Option included (GIO)
Face Amount Doubles at age 18

GPMLife
GUARANTEED PREMIUMS
GUARANTEED DEATH BENEFIT

GPMLife


Traditional **WHOLE LIFE**
Lifetime Pay • 20 Pay Life • Estate Builder

PRODUCER GUIDE

Lifetime Pay • 20 Pay Life
Guaranteed Cash Values*
Guaranteed Death Benefit†
Guaranteed Level Premiums†

Estate Builder
Automatic Dividend Option
Face Amount Doubles at age 18
Guaranteed Insurability Option

PAID-UP ADDITIONS RIDER (PUAR)
CUSTOMIZATION & FLEXIBILITY



51.03 (0117)

Add a **Level** of **SECURITY** to long-term **INSURANCE PLANNING**

Traditional Whole Life Insurance from GPM Life is a form of life insurance that is designed to pay a Death Benefit on the insured and builds cash value over time.

MEDICAL REQUIREMENTS

In determining the dollar amount to use in the table below, add:

- The total initial face amount of the life insurance applied for; and
- The total life insurance and including any riders in force with GPM Life issued within the past five years.

Traditional WHOLE LIFE		18 - 40	41 - 50	51 - 60	61 - 65	66 -70	71 - 75	76 - 80
	\$25,000 to \$50,000	Non-Medical: 18 - 49		Not Available: 50 - 80				
	\$50,001 to \$99,999	NM	NM	NM	NM	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS
	\$100,000 to \$250,000	NM	NM	NM	NM	Paramed BLD, HOS	Paramed BLD, HOS, SS	Paramed BLD, HOS, SS
	\$250,001 to \$500,000*	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS, SS	Paramed BLD, HOS, SS
	\$500,001 to \$999,999*	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS	Paramed BLD, HOS,	Paramed BLD, HOS	Paramed BLD, HOS, SS, CFS	Paramed BLD, HOS, SS, CFS
	\$1,000,000 to \$3,000,000*	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, CFS	Paramed BLD, HOS, SS, CFS	Paramed BLD, HOS, SS, CFS

* Call for Active Duty Military Limits.

KEY	NOTE: ALL REQUIREMENTS ARE ORDERED BY THE AGENT UNLESS OTHERWISE NOTED
BLD	Blood Draw ► <i>(Strongly Suggest 8-12 hours of fasting prior to test)</i>
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HOS	Urine Specimen
N/A	Not Available
NM	Non-Medical ► Complete part 2 of the application ¹
Paramed	Paramed Exam ► <i>Medical History Questions, Measured Height and Weight, Pulse and Blood Pressure</i>
SS	Senior Screening ► <i>Screening for Cognitive Defects</i>

¹ Other requirements may be ordered at the Underwriter’s discretion.

Build Table (Male and Female) - Maximum weight for each height and class

	4'10	4'11	5'0	5'1	5'2	5'3	5'4	5'5	5'6	5'7	5'8	5'9	5'10	5'11	6'0	6'1	6'2	6'3	6'4	6'5	6'6	6'7
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Std	175	180	190	195	200	205	210	215	220	225	230	235	240	250	255	265	270	280	285	290	300	320

Risk Classification Rules

No-Tobacco (NT) • Tobacco (T)

	PREFERRED PLUS (NT)	PREFERRED (NT)	PREFERRED (T)	STANDARD (T) or (NT)	
TOBACCO USE Includes tobacco and nicotine-based products	None in the past 5 years	None in the past 3 years	Yes	(T) - Yes	(NT)-None in the past 2 years
CHOLESTEROL	220	250	250	(T) - 300	(NT) - 250
CHOLESTEROL TREATMENT	◆	◆	◆	◆	
CHOLESTEROL - HDL Ratio	4.5	5.5	5.5	7.0	
BLOOD PRESSURE NO TREATMENT	135 / 80	140 / 90	140 / 90	150/90 through 45 (age) 155/95 46 - 65 (age) 160/95 66 and up (age)	
BLOOD PRESSURE TREATMENT	No	140 / 90	No	Yes	
FAMILY HISTORY Coronary Artery Disease -or- Cancer	NO Occurrences Prior to age 60	NO Occurrences Prior to age 60	NO Occurrences Prior to age 60	Individual Consideration	
ALCOHOL SUBSTANCE ABUSE	No History	No History	No History	Individual Consideration	
AVIATION (Does NOT including commercial flight)	No	No	No	Allowed with appropriate rating, if applicable	
AVOCATION (Hazardous)	No	Individual Consideration	Individual Consideration	Allowed with appropriate rating, if applicable	
DRIVING Moving Violations	No more than 1 in the past 3 years	No more than 2 in the past 3 years	No more than 2 in the past 3 years	No more than 3 in the past 3 years	
DRIVING DUI / Reckless	None in the past 5 years				
U.S. RESIDENCY	Lawful Permanent U.S. Resident for past 3 years				
CITIZENSHIP	U.S. Citizen or Lawful Permanent U.S. Resident or Have Permanent Visa / Green Card				
TRAVEL (unsafe)	Individual Consideration Travel to areas currently under a U.S. State Department Travel Warning, or areas experiencing military or terrorist activity will not be accepted, if applicable law permits.				
MILITARY	Not Available	Individual Consideration (E-4 and above) ¹	Individual Consideration (E-4 and above) ¹	Refer to Military Issue Limits	

To be considered for any of the preferred classifications, the insured must pass a paramedical exam or physical measurements exam including screening tests, and must not be substandard for any reason except for flat extras (PNT and PT only) for aviation, occupation or avocation.

Other factors not addressed by these guidelines could prevent a Proposed Insured from qualifying for Preferred Plus, Preferred or Standard as determined by the underwriter.

To determine the final risk classification, a combination of the following cardiovascular risk factors will be taken into consideration: cholesterol, family history, and build.

◆ If pre-treatment and post-treatment cholesterol readings do not exceed limits for the class, it is acceptable to issue that class.

¹ Individual Consideration: Military service in hazardous areas or those alerted to serve in hazardous areas will not be accepted.



Government Personnel Mutual Life Insurance Company (GPM Life) • (800) 938-4765 • Fax: (888) 701-3869
2211 N. E. Loop 410, San Antonio, TX 78217 • PO Box 659567, San Antonio, TX 78265 • www.gpmlife.com

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