

New Unified Life Application in Massachusetts

Available August 14, 2023

Starting August 14, 2023, the latest unified life insurance application package will be available for use in Massachusetts (MA). We are excited to finally offer this application in MA, following the nationwide launch in 2022. With this new application comes two firsts for MA: Real-Time Offer opportunities for eligible clients, and the ability to sell *Lincoln WealthAccelerate*[®] IUL!

This updated application package was designed based on feedback from our partners and consumers to enhance the user experience, improve clarity and readability of the forms, and reduce overall turnaround times by increasing efficiencies within case processing and underwriting. Please review our <u>Overview of Key Changes</u> <u>document</u>, which provides a comprehensive overview of each form and the changes made throughout the application.

What you need to know

Many of the application supplements used with the unified application are now MA state-specific versions. For the new MA unified application, all application supplements used with it must be MA state application supplements; the use of old ICC-Compact application supplements will not be permitted.

The MA unified application package will be available for:

- All Term, Indexed UL (IUL) and Variable UL (VUL) products
 - Including *Lincoln WealthAccelerate*[®] IUL, which is being offered for the first time in MA
 - Not for use with *Lincoln MoneyGuard*[®] products
- All ages and all face amounts
- All submission methods (electronic applications (eApp), electronic tickets (eTicket), paper applications and paper tickets)

The application package will automatically update on the Lincoln Forms Tool, or wherever you access Lincoln's forms. eApp and eTicket submissions as well as client eInterview will automatically update to the new application questions.

| ſ | Financial Group* | | Lincoln National Life I O Box 21008, Greensb (hereinafter referred) | oro, NC 27420-10 |
|---------|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------|
| Antinfo | y person who knowingly presents a false or frac ormation in an application for insurance is guilty of | udulent claim for payment of a f a crime and may be subject to | loss or benefit or know fines and confinement | vingly presents fai in prison. |
| Pr | oposed Insured | | | |
| 1. | // | Vidale) | | / |
| | | widdle) | (Last) | (Suffix, |
| | Sex: All Male Female Date of Birth (mm/dd/yyyy):// | and a second | 1 | |
| | | (If age 70 or over, comp | lete the Defined Age Su | (pplement.) |
| | Social Security Number (SSN): | | | |
| | Place of Birth (State/Country): / | | | |
| 6, | Citizenship (check one): I am a citizen of the United States. I am a valid green card holder and my country of citizenship is | | | |
| | | card holder and my country of our valid green card.) | citizenship is | |
| | Neither, and my co (Attach a copy of y | ountry of citizenship is | | |
| 7. | Driver's License Number (provide even if suspended/revoked): State: | | | |
| | If no current license, check here and advise reason: | | | |
| 8. | Physical Home Address (Street): | | Apt. or Su | ite: |
| | (City/State/ZIP): | | | |
| | Check here if Mailing Address is same as Ph | vsical Home Address. | | |
| 9. | Mailing Address (If different): | | Apt. or Su | ite: |
| | (City/State/ZIP): | | 1 1 | |
| 10. | Primary Phone: (C | heck one) 🗌 Cell 🔲 Landlin | 9 | |
| 11. | Secondary Phone (If applicable): | - (Check one) | Cell Landline | |
| 12 | Email: | | | |
| 13. | | 14. Occupation: | | |
| 15. | Business Address (Street): | | Su | iite: |
| | (City/State/ZIP): | | 1 1 | |
| 16. | Individual Annual Earned Income: \$ | | | |
| 17. | a. Total Assets (Retirement Accounts, Properties | s, etc.): \$ | _ | |
| | b. Total Liabilities (Mortgages, Loans/Debts, etc. | J: S | | |
| 18 | Do you have any other sources of recurring inco | me? IY IN | | |
| | If "Yes," a. Source(s) of Income: | (If the source | is "disability." provide d | letails in Number 5 |
| | b. Annual amount(s) received: \$ | | | |
| | coln Financial Group is the marketing name for Lincoln Nation F12218-26 | al Corporation and its affiliates. | | Page 1 c |

Transition Guidelines

Electronic Submissions

- Beginning August 14, 2023, the new application packet will be automatically available on electronic submission platforms
- For eApps and eTickets that have been started but not yet submitted, these must be completed and sent out for eSignatures by close of business on August 11, 2023. Failure to do so may result in needing to create a new eApp or eTicket. No action is needed on pending cases that are already out for eSignature. eSignatures must be captured within 60 days.

Paper LincXpress® Ticket Submissions

- Effective on or after August 14, 2023, only the new ticket will be accepted.
- If an old *LincXpress* ticket is submitted on or after August 14, 2023, the agent will be contacted for any missing information required for the new ticket.

Paper Full Application Submissions

• There will be a 60-day transition period beginning August 14, 2023, in which Lincoln will accept either the current application or the new application.

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