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**Chapter 13 - General Information Pertaining To Underwriting Action**

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**13.01 PAYMENT OF PREMIUMS**

Section removed as all parts have been moved to other appropriate chapters.

**13.02 APPLICATIONS**

1. Name of Applicant. The spelling and/or arrangement of the applicant's name in the body of the application must agree with the signature. If they do not completely agree, but it is reasonably certain that both apply to one and the same person, the name as formatted in the VA system of records will be utilized. If there is a major variance, the discrepancy will be clarified with the applicant.
2. Medical Applications. An application which requires information from the insured’s medical records will be referred to as a medical application. This may include both VA and private treatment records.
3. Nonmedical Applications. An application which requires any statement(s) as to health, excluding information from the insured’s medical records, will be referred to as a Nonmedical application. This may include both VA and private treatment records.
4. Supplemental Applications
5. The following periods of time from the date of VA's development letter will be allowed for submission of supplemental applications, medical data, and/or certifications of health.
6. 31 days - if applicant is residing within the continental limits of the United States.
7. 60 days - if applicant is residing outside the continental limits of the United States.
8. When requesting a health certification, the date(s) which is a pertinent part of the certification will be inserted on the application or letter.
9. If the supplemental data is submitted within the prescribed period of time, the information will be considered as being available at time the original application was submitted.
10. If the supplemental data is not submitted within the prescribed period of time but is available before the final action is taken, such as a refund of premiums, etc., the information will be considered as timely submitted.

**NOTE:** If the applicant requests additional time to submit the necessary data, the Assistant Director, Insurance Operations or designee may allow an additional period for forwarding such evidence.

1. Delayed Applications
2. If a medical application, accompanied or preceded by the required remittance, is mailed or otherwise delivered to the VA within 31 days after VA requests additional medical information not available from VA systems, it will be processed without regard to such delay.
3. If a medical application, accompanied or preceded by the required remittance, is mailed or otherwise delivered to the VA more than 31 days after VA requests additional medical information not available from VA systems, the application will be disapproved. The applicant will be advised of the necessary requirements for submitting a new application. However, when there is not sufficient time remaining under the law for the applicant to reapply, such application will be held pending and private treatment records will be requested. If found acceptable, the report will be used to supplement the original application.
4. If a non-medical application, accompanied or preceded by the required remittance, is mailed or otherwise delivered to the VA more than 31 days after the date of signature, it will be disapproved and new requirements will be furnished the applicant.
5. When all the S-DVI application requirements are met (valid application and premium payment, or request for deduction/allotment), the S-DVI policy will be issued on the basis of the original application’s postmark or signature date (if postmark not available). If all requirements are not met, the effective date is the date VA receives the final evidence to meet such requirements.
6. Applications Unsigned, Undated or Postdated
7. All applications should be signed and properly dated by the applicant or appointed fiduciary, legal guardian, or POA.
8. If a date has been altered in any part, where the applicant or appointed fiduciary, legal guardian, or POA signs the application, or in any part, where the physician signs the form, the date must be clarified or a new application submitted.
9. When any part of a medical application is unsigned by the applicant or appointed fiduciary, legal guardian, or POA the signature will be requested before processing the application.
10. When any part of the physician’s portion of a medical application is unsigned, undated or postdated, and medical information required to process the application is not available in VA systems, the date and/or signature of the examining physician will be obtained.
11. When a non-medical application is unsigned, undated or postdated, the application will be held pending unless the non-medical application is processed by phone (e.g. reinstatement). The applicant will be asked to furnish a supplemental comparative health statement showing that he or she was in as good health on the date the application was postmarked or otherwise delivered to VA as on the date the application was completed.
12. When an unsigned application for conversion, change of plan to a higher reserve or for issue of replacement Ordinary Life when the insured is 65 or 70 years old and has the Modified Life plan of insurance is received, the requested action may be taken. However, a beneficiary designation may not be accepted from an unsigned application.
13. Remittance Sent After Date of Private Treatment Records
14. If the required remittance is mailed or otherwise delivered to VA within 31 days after the date of the private treatment records, the application may be processed without regard to such delay.
15. If more than 31 days have elapsed, and medical evidence is not available in VA systems, the application will be disapproved. The applicant will be furnished the necessary requirements to reapply. If insufficient time remains under the law for reapplication, the application will be held pending. The applicant will be asked to furnish supplemental medical treatment records. If found acceptable, the records will be used to supplement the original application.
16. Remittance Sent After Date of Signature. If the required remittance is mailed or otherwise delivered to the VA within 31 days after the date of signature on a Nonmedical application, the application may be processed without regard to such delay.
17. Granting Additional Time to Meet Monetary or Medical Requirements. When it is necessary to obtain either additional information or money from an applicant, and a delay in processing is caused by VA which resulted in the prescribed period having expired or insufficient time remaining, the applicant will be allowed 15 days from the date of the letter (31 days outside the United States) to meet the requirements.
18. Applications Submitted Without Required Private Treatment Records. If an application is submitted without the necessary private treatment records, it will be disapproved except as provided for in paragraph 13.02e(2).
19. Signature by Mark or by a Blind Person. When an applicant signs the application by mark (X), it must be witnessed by two disinterested persons and they must furnish their addresses. If the applicant is physically unable to sign the application by name or mark, a statement signed by two disinterested persons stating that the applicant desired the submission of the application, is required. The witnesses must furnish their addresses. If there is any doubt as to the authenticity of the signatures of the witnesses in either circumstance, the insured will be asked to complete a new designation with different witnesses. Whenever practical, the form should be witnessed by a VA representative.
20. Filing Applications and Other Material in Electronic Folders. All correspondence, including copies of outgoing letters, will be filed in the electronic folder in chronological order. All forms, including applications, will also be filed in the electronic folder in chronological order. Disposal material will not be filed in the insurance electronic folder.
21. Receipt of Applications by VA. The received date by VA will be determined by (1) postmark date, if mailed, or (2) earliest received date indicated by stamp if delivered to VA or (3) date application placed in military channels (if Veteran returns to duty), (4) electronic imaged date stamp or (5) fax received date stamp, or (6) email date.
22. Acknowledgment of Applications
23. When a new policy number is assigned for RH insurance:
24. Local indexing of such assignment should be completed.
25. VA Form 29-5885b, Information About Your Insurance and/or Application, is a system-generated form and is used to acknowledge a remittance bearing application. The message YOUR APPLICATION IS RECEIVING ATTENTION is printed thereon.
26. Time Limits for Filing Applications. If the last day specified for filing an application falls on a Saturday, Sunday or legal holiday, the application will be considered as having been filed timely if it is submitted on the following workday. When a holiday occurs on Saturday, the preceding Friday is a legal holiday for Federal employees. When a holiday occurs on Sunday, the following Monday is a legal holiday for Federal employees. These holidays will be considered in determining the last day of a specified period for filing of applications or for payment of insurance premiums. The effective date will be the date the application is submitted, unless the applicant requests any other acceptable date.
27. Defacing and Obliterating Applications and Other Official Documents. Unauthorized markings and notations will not be made on insurance applications and other official documents. Unnecessary notations and observations concerning certain evidence can destroy the usefulness of the documents in the case of a claim or in the process of finding fraud. This is especially true regarding photocopies of such official documents. When it is necessary to comment on the entries in an application or other official document, such comment should be by a separate memo, reference slip, or recognized electronic system record.
28. Withdrawal of Application. If the applicant requests withdrawal of the application for insurance, the rules are:
29. When the applicant has submitted a timely application for insurance, together with the remittance covering the initial premium, the application meets all requirements, and the request for withdrawal is delivered to VA on or after the effective date of change, the request will not be granted, and the application will be approved. If forwarded by mail, properly addressed, the postmark date will be taken as the date of delivery. If forwarded through military (Veteran returned to duty) or VA channels, the date the request is placed in channels will be taken as the date of delivery.
30. When additional evidence or other requirements must be furnished by the applicant before determination of acceptability can be made, the application may be withdrawn, provided the request is delivered to VA or bears a postmark date prior to the date of submission of the additional requirements.
31. The application may also be withdrawn if the request is delivered to VA or bears a postmark date prior to the effective date of change.

**13.03 POLICY NUMBERS AND RECORDS**

1. Assignment of Policy Numbers. Blocks of numbers are assigned as follows:
2. Philadelphia

 a) For all NSLI policies except those with an "N" prefix:

 1 through 999,999

 16,000,000 through 17,999,999

 b) For NSLI policies with an "N" prefix:

 22,005,000 through 22,005,999

c) For USGLI policies:

 1,200,000 through 1,299,999

 d) For clerically assigned policy numbers for Supplemental “RH:

 40,000,000 through 40,999,999

1. St. Paul (St. Paul Office was consolidated to Philadelphia and no longer issues policies.)

 a) For all NSLI policies except those with an "N" prefix:

 19,000,000 through 19,999,999

 b) For NSLI policies with an "N" prefix:

 22,004,000 through 22,004,999

 c) For clerically assigned policy numbers for Supplemental “RH:

 41,000,000 through 41,999,999

1. Philadelphia and St. Paul Offices

 a) For REPL policies with a “V, H, RH, or W” prefix:

 27,000,000 through 29,999,999

 b) For REPL policies with a “J and JR” prefix:

 88,000,000 through 89,999,999

1. The range of policy numbers issued for Supplemental “RH” insurance

through the INSR screen:

 45,000,000 through 45,999,999

d) The range of file and policy numbers issued for new “RH” insurance through the INSR screen:

 50,000,000 through 50,300,000

1. Regardless of the insurance programs involved, an insured may not have two policy numbers with identical figures in the last three digits in the low order position.

1. Correction of Duplicate Numbers. When an insurance number has been duplicated, correction will be made by deletion of the duplicated number from the records of one of the insurance contracts involved. The records will be assembled and examined to determine from which record the duplicate number is to be deleted. The insured will be notified of the new policy number.
2. Combining of Electronic Insurance Records. When an application is approved and there is a record of other active insurance, the records will be combined. The order of precedence is V (including RS, RH or H), J and K. If an RH policy is approved and there is an active J and/or K policy, the folders will be combined under the RH number. It will be necessary to delete the J and/or K records and reinsert them under the RH file number.

**13.04 ISSUANCE OF POLICIES AND TDIP RIDERS**

1. Form Numbers of Policies and Riders
2. For insurance assigned "K" numbers

9-341 Special Endowment at Age 96

9-735 5-Year Level Premium Term

9-741 Ordinary Life

9-745 5-Year Convertible Term

9-747 20-Payment Life

9-748 30-Payment Life

9-749 20-Year Endowment

9-750 30-Year Endowment

9-751 Endowment at age 62

9-753 Total Disability Provision

9-1667a Total Permanent Disability Provision

Form 753 Total Disability Provision

1. For insurance assigned "V" numbers

9-1667 Total Disability Income Provision [($5-60)]

29-1660 5-Year Level Premium Term

29-1661 Ordinary Life, 20-Payment Life, 30-Payment Life

29-1664 Endowment Policy

29-1667 Total Disability Income Provision ($10-65)

29-1667b Total Disability Income Provision ($10-60)

29-8161 Modified Life-Age 65

29-8175 Special Ordinary Life at Age 65

29-8177 Modified Life-Age 70

29-8181 Special Ordinary Life at Age 70

1. For insurance assigned "H" numbers

29-8162 H Modified Life -Age 65

29-8176 H Ordinary Life at Age 65

29-8289 H Modified Life-Age 70

29-8682 H Ordinary Life at Age 70

29-8683

1. For insurance assigned "RS" numbers

9-4400 5-Year Level Premium Renewable Non-Convertible Term

29-1667 Total Disability Income Provision ($10-65)

29-1667b Total Disability Income Provision ($10-60)

29-8374 Waiver of Premiums Provision, to be attached to VA Form 9-4400

1. For insurance assigned "RH" numbers

29-4401 5-Year Level Premium Term

29-4402 Ordinary Life, 20-Payment Life, 30-Payment Life

29-4405 Endowment Plans

29-8163 Modified Life-Age 65

29-8180 Modified Life-Age 70

1. For insurance assigned "W" numbers

29-4408 Limited Convertible 5-Year Level Premium Term

29-4409 Life Plans

29-4410 Endowment Plans

29-8164 Modified Life-Age 65

29-8179 Modified Life-Age 70

29-1667 Total Disability Income Provision ($10-65)

29-1667b Total Disability Income Provision ($10-60)

29-8374 Waiver of Premiums Provision, to be attached to VA Forms 29-4409 and 29-4410

1. For insurance assigned "J" numbers

29-8165 Modified Life-Age 65

29-8178 Modified Life-Age 70

29-8168 Ordinary Life, 20-Payment Life, 30-Payment Life

29-8171 Endowment Plans

29-487 Total Disability Income Provision

1. For insurance assigned JR numbers

29-8166 Modified Life-Age 65

29-8291 Modified Life-Age 70

29-8169 Ordinary Life, 20-Payment Life, 30-Payment Life

29-8172 Endowment Plans

29-487 Total Disability Income Provision

1. For insurance assigned JS numbers

29-8167 Modified Life-Age 65

29-8291 Modified Life-Age 70

29-8170 Ordinary Life, 20-Payment Life, 30-Payment Life

29-8173 Endowment Plans

29-8174 1-Year Endowment

29-487 Total Disability Income Provision

1. Preparation of Policy and/or Rider. Generally, policies and/or riders for NSLI are generated by the computer at the time of issue or change. When the policy and/or rider is not generated by the computer, clerical preparation is necessary and should be requested by sending a request to the Chief, Policyholders Service Division.

**13.05 PLANS OF INSURANCE (CODES)**

Codes for NSLI

1-Ordinary Life

2-20-Payment Life

3-30-Payment Life

4-20-Year Endowment

5-Endowment At Age 60

6-Endowment At Age 65

7-5-Year Level Term or 5-Year Limited Convertible Term

8-Modified Life-Age 65

-8 (X8 or M)-Modified Life-Age 70

9-Reduced Modified Life-Age 65

-9 (X9 or M) -Reduced Modified Life-Age 70

0-Replacement Ordinary Life V, W, H, RH or J-Ages 65 and 70.

**13.06 POLICY LOANS**

1. Authority for granting policy loans on NSLI is included in 38 U.S.C. 1906 and 38 CFR 8.13.
2. A policy loan may be granted on any inforce policy issued on a permanent plan or term with the paid-up additions attached. This includes policies surrendered for reduced paid-up insurance, but does not include policies furnishing protection under the extended term provision.

**13.07 USE OF DIVIDENDS IN UNDERWRITING ACTIONS**

 Section removed as information moved to M29-1, Part 1, Chapter 5 - Dividends.

**13.08 AGE OF INSURED**

1. The age of the applicant for insurance purposes is his or her age on his or her birthday anniversary nearest to the effective date of the policy. Make the calculation to determine the insurance age by subtracting the date of birth from the effective date of insurance.

**Example 1:**

**Effective date                                                                                     July 1,2018
Date of birth                                                                             January 18, 1975**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Year** | **Month (Number)** | **Day Number** |
| **Effective Date** | **2018** | **7** | **1** |
| **Date of Birth** | **1975** | **1** | **18** |
| **Difference** | **43** | **6** | **-17** |

**The insurance age is 43 as the insured is 43 years, 5 months, and 13 days old.**

**Example 2:**

**Effective date                                                                                       July**, **2018
Date of birth**                                                                       **November 10,** **1974**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Year** | **Month (Number)** | **Day Number** |
| **Effective Date** | **2018** | **7** | **1** |
| **Date of Birth** | **1974** | **11** | **10** |
| **Difference** | **44** | **-4** | **-9** |

1. When the insurance effective date is exactly halfway between two birthdays, the age calculation will result in an even 6 months. In such instances, determine insurance age as follows:

1. Where the day of birth and effective day are the same, the insurance age is the younger age.

**Example 3:**

**Effective date                                                                     November 25, 2018
Date of birth                                                                                 May 25, 1975**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Year** | **Month (Number)** | **Day Number** |
| **Effective Date** | **2018** | **11** | **25** |
| **Date of Birth** | **1975** | **5** | **25** |
| **Difference** | **43** | **-6** | **0** |

**The insurance age is 43 as the insured is 43 years and 6 months old.**

1. Where the day of birth and effective day are not the same, the insurance age is the older age. The month rather than the day determines the insurance age.

**Example 4:**

**Effective date                                                                        December 1, 2018
Date of birth**                                                                              **May 31,** **1975**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Year** | **Month (Number)** | **Day Number** |
| **Effective Date** | **2018** | **12** | **31** |
| **Date of Birth** | **1975** | **5** | **1** |
| **Difference** | **43** | **-7** | **-1** |

**The insurance age is 44 as the insured is 43 years, 6 months, and one day old.**

1. If VA records disclose different dates of birth that affect the insurance age, the discrepancy will be clarified. If proof is not furnished the date of birth resulting in the older age will be used.
2. After the insurance is inforce under certain conditions it is necessary to determine the attained age of the insured. This is done by subtracting the effective date of the policy from the premium due date of the attained age that is needed and then adding the issue age of the insured on the effective date of the insurance. The attained age is determined in years and months. The following is an example of the calculation:

**Attained Age**

**Amount of Coverage:  $10,000**

**Plan:  Ordinary Life**

**Effective Date:  September 9, 2000**

**Issue Age:  32**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Year** | **Month (Number)** | **Day Number** |
| **Premium Due Date at Attained Age** | **2018** | **1** | **1** |
| **Effective Date** | **2000** | **9** | **9** |
| **Difference** | **18** | **-8** | **-8** |

The difference between the premium due attained age and the effective date is:  17 years, 4 months, and 22 days. Then add the issue age of 32 for 49 years, 4 months, and 22 days.

**Attained age as of January 1, 2018 is 49.**

**13.09 DEATH OF APPLICANT BEFORE DELIVERY OF APPLICATION FOR INSURANCE**

 **TO VA**

The date an application is delivered to VA must be before the date of death of the applicant. Otherwise, the application will be disapproved.

**13.10 POWERS OF ATTORNEY**

Section removed as all content moved to M29-1, Part 1, Chapter 35 - Third Party Requests.