

**\*\*\*2018/19/20\*\*\* GTL Advantage Plus/Indemnity Plus Order Form - 7-15-2020**

Guarantee Trust Life Insurance Company  
 EMAIL: [agency@gtlic.com](mailto:agency@gtlic.com)  
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Phone: (800) 323-6907  
 All forms can also be accessed & **ORDERED**  
 24/7 on our Website: [www.gtlic.com](http://www.gtlic.com), through  
**GTLINK.**

\_\_\_\_\_  
 (Print Agent's Code Number)

\_\_\_\_\_  
 (Print Street Address)

\_\_\_\_\_  
 (Print Agent's Name)

\_\_\_\_\_  
 (Print City, State, Zip)

\_\_\_\_\_  
 (Phone Number)

\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
 (Order Date)

**BROCHURES**

Description	Stock Number	Max Order	Quantity Ordered
<b>2018/19/20 Advantage Plus Brochure With Riders (Rev. 10_18): AL, AZ, AR, DE, GA, HI, IL, IA, KY, LA, ME, MI, MS, MT, NE, NV, NC, ND, OK, SD, TN, WV, WI, WY</b>	15B473	20	
<b>INFOGRAPHIC FLYER – For: AL, AZ, AR, CT, DE, GA, HI, IL, IA, KY, LA, ME, MD, MI, MS, MO, MT, NE, NV, NM, NC, ND, OH, OK, OR, PA, SC, SD, TN, TX, UT, WA, WV, WI, WY (NOTE does not reflect product/state variances)</b>	15B475	20	
Advantage Plus Brochure – <b>Connecticut</b> (Riders: Short Stay/AMB/SNF Only; No 21 Day)	15B477	20	
Advantage Plus Brochure - <b>Maryland</b> (No D/V; No 21 Day)	15B432	20	
Advantage Plus Brochure – <b>Missouri</b> (No D/V; No 21 Day)	15B516	20	
Advantage Plus Brochure – <b>Ohio</b> (No 21 Day; No Option 2, \$120/day SNF)	15B488	20	
Advantage Plus Brochure – <b>Oregon</b> (No D/V; No 21 Day)	15B486	20	
Advantage Plus Brochure – <b>Pennsylvania</b> (Special 31-Day/\$10 Base Benefit; No 21 Day)	15B476	20	
Advantage Plus Brochure – <b>New Mexico</b> (No D/V)	15B482	20	
Advantage Plus Brochure – <b>South Carolina</b> (No 21 Day)	15B513	20	
Advantage Plus Brochure – <b>Texas</b> (Special 31-Day/\$15 Base Benefit; No 21 Day)	15B481	20	
Advantage Plus Brochure – <b>Utah (Rev. 1_20)</b> (10 & 21 Day only; OSR ages 64-85)	15B491	20	
Advantage Plus Brochure - <b>Washington</b> (Special 31-Day/\$10 Base Benefit; No D/V/Cancer/21 Day/CA/\$120/day SNF)	15B521	20	
Advantage Plus Small <b>Quad-Fold</b> Brochure with Riders: <b>AL, AZ, AR, DE, GA, HI, IL, IA, KY, LA, ME, MI, MS, MT, NE, NV, NM, NC, ND, OK, SD, TN, UT, WV, WI, WY</b>	15B474	20	
Advantage Plus Small <b>Quad-Fold</b> Brochure with Riders Rv 7_19 (no 21-Day): <b>MD, MO, OH, OR, PA, SC, TX, WA</b>	15B494	20	
Advantage Plus <b>Small Tri-Fold</b> Brochure: <b>Connecticut</b> (Riders: Short Stay/AMB/SNF/Crit Accident Only)	15B478	20	
<b>FLORIDA–INDEMNITY PLUS</b> Brochure w/Riders/SBSA Association (Special 31-Day/\$15 Base Benefit; No 21-Day)	15B484	20	
<b>FLORIDA – INDMENITY PLUS - INFOGRAPHIC FLYER</b>	15B483	20	
<b>FLORIDA – INDEMNITY PLUS Small Quad-Fold</b> Brochure with Riders-w/SBSA Association	15B485	20	
<b>Dental/Vision RIDER</b> Brochure (Rv 9/17): <b>AL, AZ, AR, DE, HI, IL, IN, IA, KY, LA, ME, MI, MS, MT, NE, NV, NC, OH, OK, PA, SC, SD, TX, UT, WV, WI, WY</b>	GTLINK	N/A	
Dental/Vision Benefit Rider - Add to Existing Advantage Plus Policy – Addition Request Form (Rv 6/16)	15T354	20	
Dental/Vision <b>POLICY</b> Brochure (Rv 1/17): <b>CT &amp; KS</b>	15B408	20	
Advantage Plus Brochure With Riders (Rv 11/17): <b>IN</b>	15B337	20	
<b>Advantage Plus “Access to Mayo Clinic Online” INSERT SHEET(Rv 11/19) FOR: CO, ID, IN, KS, MA, MN, NJ, RI, VA</b>	15B471	20	
<b>INFOGRAPHIC FLYER –FOR: CO, ID, IN, KS, MA, MN, RI, VA</b> (NOTE does not reflect product/state variances)	15B442	20	
Advantage Plus Brochure (Rv 8/17) - <b>Kansas</b> (Riders: Short Stay/AMB/Lump Sum Hospital only)	15B339	20	
Advantage Plus <b>Quad-Fold</b> Brochure w_ Mayo Clinic (Rv 6/18): <b>Indiana</b>	15B399	20	
Advantage Plus Brochure W/Lump Sum Cancer RIDER (Rv 2/18): <b>ID, VA</b> (No Cancer)	15B979	20	
Advantage Plus Tri-Fold Brochure W/Lump Sum Cancer Rider & Mayo Clinic (Rev. 6/18): <b>ID, VA</b>	15B983	20	
Advantage Plus Brochure with Original AMB/SNF Riders (Rv 10/17): <b>CO, MA, MN, RI</b>	15B988	20	
Adv Plus Brochure 31 Day Benefit ( <b>Rates Included</b> ) (Rv 10/19)-Daily benefit amounts \$40-\$250): <b>New Jersey</b>	15B418	20	
Advantage Plus Tri-Fold Brochure & Mayo Clinic (Rv 6/18): <b>CO, MA, MN, RI</b>	15B992	20	

## RATES (With UNDERWRITING GUIDES)

<b>Advantage Plus Rate Sheets_UW Guide</b> (Basic 50% Loss Ratio) Rv 7_20: <b>AL, AR</b> (No Fee), <b>HI, IL, IA</b> (No OSR), <b>LA</b> (No Option 2, \$120/day SNF), <b>MS</b> (\$6.00 Fee/No SNF's), <b>MT, NE, NV, NM</b> (No D/V), <b>NC, OK, TN</b> (No D/V), <b>WV</b>	15D803	10	
Rate Sheet_UW Guide (50%): <b>CONNECTICUT</b> (Riders: Short Stay/AMB/SNF/Crit Accident Only)	15D804	10	
Rate Sheet_UW Guide (50%) (Own OSR Rates): <b>DELAWARE</b>	15D809	10	
Rate Sheet_UW Guide— <b>Indemnity Plus</b> (50%): <b>FLORIDA</b> w/SBSA Assoc Fee(No 21 Day; Own Mode Factors)	15D813	10	
Rate Sheet_UW Guide (50%): <b>GEORGIA</b> (No D/V; No Cancer Recurrence)	15D802	10	
Rate Sheet_UW Guide (55%): <b>ARIZONA</b> (No Outpatient Surgical); <b>KENTUCKY</b> (No Option 1 SNF; No Fee); <b>MICHIGAN; NORTH DAKOTA</b> (No D/V)	15D806	10	
Rate Sheet_UW Guide (50%): <b>MAINE</b>	15D812	10	
Rate Sheet_UW Guide (55%): <b>MARYLAND</b> (No D/V; No 21 Day)	15D731	10	
Rate Sheet_UW Guide (50%): <b>MISSOURI</b> (No D/V; No 21 Day)	15D871	10	
Rate Sheet_UW Guide (55%): <b>OHIO</b> (No 21 Day; No Option 2, \$120/Day SNF)	15D818	10	
Rate Sheet_UW Guide (50%): <b>OREGON</b> (No D/V; No 21 Day)	15D814	10	
Rate Sheet_UW Guide (50%): <b>PENNSYLVANIA</b> (No 21 Day)	15D808	10	
Rate Sheet_UW Guide Rv 9_20 (55%): <b>SOUTH CAROLINA</b> (No 21 Day)	15D690	10	
Rate Sheet_UW Guide (60%): <b>SOUTH DAKOTA</b> (No Short Stay)	15D807	10	
Rate Sheet_UW Guide (50%): <b>TEXAS</b> (No 21 Day)	15D811	10	
Rate Sheet_UW Guide RV 1_20 (50%/55% AMB & OSR): <b>UTAH</b> (10 & 21 day Only; OSR Ages 64-85)	15D827	10	
Rate Sheet_UW Guide (60%): <b>WASHINGTON</b> (No Cancer/ D/V / 21-Day / CA / Option 2,\$120/day NF)	15D888	10	
Rate Sheet_UW Guide (50%): <b>WISCONSIN</b> (Age 0-85; No SNF Age 65+)	15D805	10	
Rate Sheet_UW Guide Rv 3_20 (50%; Cancer Rider-60%): <b>WYOMING</b> (No Critical Accident Rider)	15D810	10	
Dental/Vision <b>POLICY</b> Rate Sheet: <b>CONNECTICUT</b>	15D678	10	

Rate Sheet With Riders (55%): <b>INDIANA</b> (No Fee)	15D647	10	
Rate Sheet With Riders (50%): <b>KANSAS</b> (Riders: Short Stay/AMB/Lump Sum Hospital only)	15D671	10	
Dental/Vision <b>POLICY</b> Rate Sheet: <b>KANSAS</b>	15D678	10	
Rate Sheets RV (60% - Ages 64.5-85): <b>COLORADO</b>	15D623	10	
Rate Sheets RV (50% + Cancer Rider – Ages 64.5-85): <b>IDAHO</b>	15D613	10	
Rate Sheets RV (55% - Ages 64.5-85/No LSH/No Cancer/\$500 Max Daily Benefit Amount): <b>MASSACHUSETTS</b>	15D625	10	
Rate Sheets – Original AMB/SNF Riders RV (65%): <b>MINNESOTA</b>	15D627	10	
Rate Sheets – Original AMB/SNF Riders RV (50% - Ages 64.5-85): <b>RHODE ISLAND</b>	15D620	10	
Rate Sheets – Original AMB/SNF Riders RV (55% - No Cancer): <b>VIRGINIA</b>	15D640	10	
New Business Envelope	15V002	10	

## FORMS PACKS\* AND APPLICATIONS

\* **APPLICANT INFORMATION FORMS PACK INCLUDES REQUIRED FORMS TO BE LEFT BEHIND WITH APPLICANT:** OUTLINE OF COVERAGE, MEDDUP-5 Medicare Duplication Notice, HIPAA Notice of Privacy Practices, Electronic Delivery & Communications Disclosure/Consent

State	FORMS PACK* Stock #	Quantity Ordered	Application	Stock #	Quantity Ordered
AL	15A0037		APPH4-18-AL + AL Form	15A0033	
AZ	15A0053		APPH4-18-AZ	15A0052	
AR	15A0016		APPH4-18-AR	15A0010	
CO	15A783 Rv 12_18		APPH13-14-CO RV	15A0262	
CT	15A0019		APPH4-18-CT	15A0012	
CT D/V POLICY	15A268		APPH6-15-CT	15A609	
DE	15A0038		APPH4-18-DE	15A0036	
FL	15A0060		GAPPH4-18-FL+SBSAForm	15A0061	
GA	15A0017		APPH4-18-GA	15A007	
HI	15A0024		APPH4-18	15A0020	
ID	15A789		APPH8-14-ID	15A473	
IL	15A0047		APPH4-18-IL	15A0046	
IN	15A791		APPH1-15-IN	15A523	
IA	15A0015 Rv 7_19		APPH4-18-IA	15A0013	
KS	15A793		APPH1-15-KS	15A572	
KS D/V POLICY	15A269		APPH6-15-KS	15A610	
KY	15A0055		APPH4-18-KY	15A0054	
LA	15A0045		APPH4-18-LA	15A0044	
ME	15A0059		APPH4-18-ME	15A0058	
MD	15A0068		APPH4-18-MD	15A696	
MA	15A798		APPH10-14-MA (Rv 6_18)	15A462	
MI	15A0063		APPH4-18-MI	15A0062	
MN	15A800		APPH10-14-MN	15A463	
MS	15A0049		APPH4-18-MS	15A0048	
MO	15A0169		APPH4-18-MO	15A0168	
MT	15A0030		APPH4-18-MT	15A0029	
NE	15A0034		APPH4-18-NE	15A0035	
NV	15A0025		APPH4-18	15A0020	
NJ	15A806		APPH10-14-NJ Rv 4_16	15A624	
NM	15A0050		APPH4-18-NM (RV 3_20)	15A0281	
NC	15A0027		APPH4-18-NC	15A0026	
ND	15A0014		APPH4-18-ND	15A006	
OH	15A0072		APPH4-18-OH	15A0071	
OK	15A0022		APPH4-18-OK	15A0028	
OR	15A0065		APPH4-18-OR + NOT-17-OR Form	15A0064	
PA	15A0032		APPH4-18-PA (Rv 5_19)	15A0031	
RI	15A814		APPH10-14-RI	15A465	
SC	15A0159		APPH4-18-SC + DUP-19-SC	15A611	
SD	15A0023		APPH4-18-SD	15A0021	
TN	15A0040		APPH4-18-TN	15A0039	
TX	15A0057		APPH4-18-TX	15A0056	
UT	15A0116		APPH4-18-UT (R-19) REV.	15A0235	
VA	15A820		APPH9-14-VA + VA Form	15A482	
WA	15A0237		APPH4-18-WA	15A0236	
WV	15A0042		APPH4-18-WV	15A0041	
WI	15A0018		APPH4-18-WI	15A0011	
WY	15A0043 RV 3_20		APPH4-18 (WY) RV 3_20	15A0280	

## SUPPORTING FORMS\*\*

\*\* ONLY IF ORDERING SEPARATELY, OTHERWISE INCLUDED IN THE FORMS PACKS

Description	Stock Number	Max Order	Quantity Ordered
<b>HIPAA** Notice of Health Plan Privacy Practices (ALL STATES)</b>	01T003	20	
Notice to Applicant ** (ALL STATES)	15T305	20	
<b>Medicare Duplication Notice ** (Meddup-5):</b> AR, AL, AZ, CT, DE, GA, HI, ID, IL, KS, KY, ME, MD, MA, MI, MN, NE, NV, NJ, NM, NC, ND, OH, OK, RI, SD, TN, UT, WA, WV, WY	15T168	20	
Meddup-5-FL** - FLORIDA	15T316	20	
Meddup-5-CS** - Indiana, Louisiana, Mississippi, Oregon	15T325	20	
Meddup-5-CO** - COLORADO (New)	15T381	20	
Meddup-5-IA** - IOWA (New)	15T387	20	
Meddup-5-MO** - MISSOURI	15T322	20	
Meddup-5-MT** - MONTANA	15T362	20	
Meddup-5-PA** - PENNSYLVANIA	15T364	20	
Meddup-5-SC** - SOUTH CAROLINA	15T324	20	
Meddup-5-TX** - TEXAS	15T317	20	
Meddup-5-VA** - VIRGINIA	15T318	20	
Meddup-5-WI** - WISCONSIN	15T320	20	
<b>Meddup-2**:</b> For DENTAL/VISION POLICY - CT & KS	15T330	20	
HRF-8 <b>Health Replacement Form (HRF)</b> Needed only if replacing coverage: AR, CT, DE, ID, IA, OK, RI, TX, UT, WV, WA	15T119	20	
HRF-18-CO (CO) - COLORADO	15T342	20	
HRF-3 (FL) - FLORIDA	15T009	20	
HRF-14-IL - ILLINOIS	15T344	20	
HRF-3.1 (KY) - KENTUCKY	15T003	20	
NOT-18-LA(A) – LOUISIANA HRF	15T383	20	
HRF-4.5 (MA) - MASSACHUSETTS	15T006	20	
HRF-14-ME (ME) – MAINE	15T351	20	
HRF-8.1 (PA) - PENNSYLVANIA	15Z017	20	
HRF (SC) AHREPL-SC – SOUTH CAROLINA	15T213	20	
<b>South Carolina Comparison Form – G99CMPR-SC - also For Replacement Only</b>	15T214	20	
HRF-5 (VA) - VIRGINIA	15T007	20	
HRF-4.1 (WI) - WISCONSIN	15T004	20	
<b>ALABAMA</b> Arbitration Form (now also <b>Included in the APP</b> )	16T336	20	
<b>COLORADO Producer Comp Disclosure – Agent Use Only</b>	GTLINK	N/A	
<b>NEW JERSEY Produce Comp Disclosure – Agent Use Only</b>	GTLINK	N/A	
<b>MASSACHUSETTS</b> Buyer’s Guide Supplement ( <b>65+ Only</b> )	15Z046	5	
<b>VIRGINIA</b> Limited Benefit Disclosure Form NOT-06-VA (now also <b>Included in the APP</b> )	15T309	20	
<b>Wisconsin</b> Buyer’s Guide ( <b>For 65+ only</b> )	15Z007	5	
Buyer’s Guide ( <b>For 65+ only</b> ) <b>All STATES</b> (except WI)	15Z008	5	

## OUTLINES OF COVERAGE\*\*

\*\* ONLY IF ORDERING SEPARATELY, OTHERWISE INCLUDED IN THE FORMS PACKS

State	Outline of Coverage**	Stock #	Quantity Ordered
AL	OCG0553(R-18)	15O217	
AZ	OCG0553(R-18)-AZ	15O225	
AR	OCG0553(R-18)-AR	15O203	
CO	OCG0553-CO	15C352	

CT	OCG1550-CT (R18)	15O206	
CT D/V POLICY	OCG15DV-CT	15C486	
DE	OCG0553(R-18)-DE	15O216	
FL	N/A		
GA	OCG0553(R-18)-GA	15O202	
HI	OCG0553(R-18)-HI	15O211	
ID	OCG0553B (R6-13)-ID	15C335	
IL	OCG0553(R-18)-IL	15O223	
IN	OCG0553 (R3-15)-IN	15C435	
IA	OCG0553(R-18)-IA	15O204	
KS	OCG0553 (R3-15)-KS	15C488	
KS D/V POLICY	OCG15DV-KS	15C488	
KY	OCG0553 (R-18)-KY	15O226	
LA	OCG0553(R-18)-LA	15O221	
ME	OCG0553(R18)-ME	15O228	
MD	OCG1550(R18)-MD	15O096	
MA	OCG0553 (R5-07)-MA	15C354	
MI	OCG0553(R-18)-MI	15O229	
MN	OCG0553 (R5-07)-MN	15C355	
MS	OCG0553(R-18)-MS	15O222	
MO	OCG1550-A-MO	15O304	
MT	OCG0553(R-18)-MT	15O213	
NE	OCG0553(R-18)-NE	15O215	
NV	OCG0553(R-18)-NV	15O210	
NJ	OCG0553-NJ	15C275	
NM	OCG0553(R-18)-NM	15O224	
NC	OCG0553(R-18)-NC	15O212	
ND	OCG0553(R-18)-ND	15O205	
OH	OCG1550-OH	15O232	
OK	OCG0553(R-18)-OK	15O208	
OR	OCG1550(R18)-OR	15O230	
PA	OCG1550(R-18)-PA	15O214	
RI	OCG0553 (R5-07)-RI	15C362	
SC	OCG1550 (R-18)-SC	15C463	
SD	OCG0553(R-18)-SD	15O209	
TN	OCG0553(R-18)-TN	15O218	
TX	OCG1550(R-18)-TX	15O227	
UT	OCG0553(R18)-UT	15O255	
VA	OCG0553A(R12-13)-VA	15C399	
WA	OCG1550 (R18)-WA	15O344	
WV	OCG0553(R-18)-WV	15O219	
WI	OCG0553(R-18)-WI	15O207	
WY	OCG0553(R-18)-WY RV 3_20	15O201	

<b>SBSA 24 Hour Accident Brochure (Rev 9/20)/Enrollment Form for AL, AZ, AR, CA, CO, DC, GA, IA, ID, IL, KY, MI, MS, MO, ND, NE, NM, OH, OK, PA, TN, TX, VA, WI, WV, WY</b>	15B942A	20	
<b>SBSA 24 Hour Accident Brochure Enrollment Form for IN</b>	15B942	20	