

# Point of Sale Enhancement

## E-Signature Process

Underwritten by The Chesapeake Life Insurance Company<sup>®</sup>

For agent training purposes only – not for consumer use.



For more plan details, refer to the product materials. Product design and availability varies by state. The benefits described in this presentation are subject to all provisions, terms, definitions, and limitations and exclusions of the applicable policy. Supplemental plans serve a specific purpose in the insurance market. These plans are not intended as substitutes for accident and sickness health insurance and should not be construed as such.

# eSignature Basics

- ▶ On April 1<sup>st</sup> SureBridge will launch our proprietary eSignature process within the point-of-sale tool
- ▶ This enhancement will streamline the signature process and eliminate the confusion some clients experienced when digitally signing their SureBridge application
- ▶ You will no longer need to activate or maintain a DocuSign account for SureBridge enrollments
- ▶ NOTE: There are no changes to the quoting or application process
  - You will follow the same steps as before
  - Only the eSignature process has been updated

# eSignature Basics

- ▶ To help make the transition as seamless as possible, we've created this guide to show you everything that's changed inside of the tool.
- ▶ We'll look at each of our signature methods including the In Person, Email, Text, and voice options.

# In Person Signature eSignature (New Process)

# Client Verification

## Text or Phone Verification

In order to access the signature selection pages, you need to confirm your identity using your mobile device.

- Verify the phone number below and click "Send Text" to receive a text message with your authentication code or click "Send Automated Phone Call" to receive an automated phone call with your authentication code.
- Enter the authentication code below.

Authentication Signer Name: **Old InPerson**

The phone number that will receive the confirmation text or automated phone call is: **(573)**

*(Message & data rates may apply. Text HELP for assistance or STOP to cancel.)*

Resend Text

Send Automated Phone Call

**Do not share your authentication code with your agent.**

A unique code was delivered to the mobile phone number provided above. You should receive it momentarily based on the delivery method you selected.

Enter the code you received in the field below and press "Confirm Code". If you do not receive the code, please verify the mobile number above, and select to resend using the same method of delivery; or you can select a different method (Text or Automated Phone Call).

8109|

Confirm Code

The client can choose to receive a call back or a text to get their PIN in order to complete the signature process

# In Person eSignature



Apply / Signature / Status

Quote ID: b2ea2df5-cbaa-46fc-b8ee-da9f0c166bda



## Signature Status

Signers	Agent	Customer(s)
<input checked="" type="radio"/> Customer	Mike <input type="button" value="Sign"/>	Inperson <input type="button" value="Sign"/>
<input type="radio"/> Agent		

After client enters authentication code received via text or phone call, client clicks “Sign” icon next to their name to trigger new eSignature process

# In Person eSignature

## Review Documents

Your documents are ready to sign

Zoom In

Zoom Out

Client reviews documents to confirm accuracy. **They no longer need to add their signature or initials anywhere inside of the actual documents.**



### Product Selection Acknowledgement Form

#### VOLUNTARY Supplemental and/or Life Insurance Coverage Selections:

	Estimated Monthly Premium		Estimated Monthly Premium
<input type="checkbox"/> Vision Insurance	\$ 0.00	<input checked="" type="checkbox"/> Dental Insurance	\$ 19.00
<input type="checkbox"/> HospitalWise™ Hospital Indemnity Insurance	\$ 0.00	<input type="checkbox"/> CancerWise Plus™ Specified Disease Cancer Insurance	\$ 0.00
<input type="checkbox"/> Fixed Indemnity Direct Fixed Indemnity Insurance	\$ 0.00	<input type="checkbox"/> HeartWise™ Specified Disease Heart Attack & Stroke Insurance	\$ 0.00
<input type="checkbox"/> Accident Companion Accidental Injury-only Insurance	\$ 0.00	<input type="checkbox"/> Critical Accident Direct Critical Accidental Injury Insurance	\$ 0.00
<input type="checkbox"/> Metal Gap Lump Sum Fixed Indemnity Insurance	\$ 0.00	<input type="checkbox"/> Accident Disability Direct Accident-only Disability Income Insurance	\$ 0.00
<input type="checkbox"/> ProtectFit Plus Accidental Injury-only Insurance	\$ 0.00	<input type="checkbox"/> Income Protection Direct Disability Income Insurance	\$ 0.00
<input type="checkbox"/> Accident Direct Accidental Injury-only Insurance	\$ 0.00	<input type="checkbox"/> DentalWise™ Plus / Prime DVH Dental, Vision and Hearing Insurance	\$ 0.00
<input type="checkbox"/> SecureWise™ Term Life Insurance	\$ 0.00		

# In Person eSignature

## Acknowledgments

### PRODUCT SELECTION ACKNOWLEDGEMENT

I agree that I have chosen to submit an application for the SureBridge® voluntary supplemental and/ Insurance Company®, as previously indicated.

I understand that the voluntary supplemental insurance policies I have selected:

- are OPTIONAL for an additional premium;
- are NOT comprehensive health insurance plans (or Minimum Essential Coverage);
- are NOT Medicare supplement policies nor do they fully supplement any federal Medicare health insurance plan;
- are NOT required in order to purchase comprehensive health insurance from another insurance company.



This acknowledgement does not guarantee that policies will be issued, as such policies are subject to underwriting and coverage is not effective unless and until:

- you are informed in writing that your application has been processed and approved; and
- the effective date stated in your policy.

For complete details of your supplemental coverage, including but not limited to policy benefits, policy conditions, and actual premium rates, please consult the actual policy. Actual premium rates are not final until coverage is issued.

### CONFIRMATION OF BROCHURE/OUTLINE OF COVERAGE RECEIPT

I acknowledge that I have had the opportunity to review an insurance brochure(s) and/or outline(s) of coverage(s) applying.

### CONSENT FOR ELECTRONIC DELIVERY OF DOCUMENTS

I acknowledge that I have reviewed the Consent for Electronic Delivery of Documents and my election is accurate.

Client scrolls down the screen to the Acknowledgments section below the Documents. Client reads and clicks each acknowledgement box. Signature Process can not be completed until all acknowledgement boxes have been checked.

# In Person eSignature

## Sign Application

Please click below to electronically sign your name.

By clicking to sign I understand I am providing my electronic signature.

Click Here to Sign

Date Signed

Exit

Complete Signature

Client clicks the blue button and once the date populates, the green Complete Signature button will activate

Once the client clicks the green button, they have completed their portion of the signature process

# In Person eSignature

## Signature Status

<b>Signers</b> <input checked="" type="radio"/> Customer <input type="radio"/> Agent	<b>Agent</b> Mike 	<b>Customer(s)</b> 
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Once the client shows complete with the check, the agent can finalize the application with their signature

# Agent Signature eSignature

Agents should review all documents for accuracy before moving on to signing. Agents will no longer need to add their signature anywhere inside the actual documents.

## Review Documents

Your documents are ready to sign

Zoom In

Zoom Out



SureBridge®  
Underwritten by  
The Chesapeake Life Insurance Company®



# Agent Signature eSignature

The writing agent must attest by clicking the check box, then the “click here to sign” box and finally click the green Complete Signature box to submit the application

**Acknowledgments**

AGENT/PRODUCER ATTESTATION

I, the Agent/Producer, certify that each question on this Application was asked by me of the Applicant(s) named above, and all answers were accurately documented.

**Sign Application**

Please click below to electronically sign your name.

By clicking to sign I understand I am providing my electronic signature.

# Submitted Successfully eSignature

Thank you, your application has been submitted.

Plans

[View Application](#)

PPO Dental - Basic

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## Application Approved

We are pleased to inform you that your application for optional SureBridge® supplemental and/or life insurance product(s), underwritten by The Chesapeake Life Insurance Company®, **has been approved!**

If the "Change to Guarantee Issue Coverage" was selected and an applicant does not meet the underwriting standards in place for one or more of the products applied for, the Guaranteed Issue amount of such product(s) will be issued at a lower benefit than originally selected on the application.

When the agent signature is submitted successfully, they will land on the thank you page

The application has been successfully completed and either issued immediately or under review

# Email Signature eSignature (New Process)

# eSignature Email Process

Select the Email option and acknowledge by clicking the green button to continue the process

Customer signature will be obtained by directing the customer (via email or text) to an online site where the customer will acknowledge and sign all application documents and disclosures. Once you select one of the options below you will be directed to the Signature Status page.

**Email:** By selecting email, your customer will receive an email to the above email address and a text with a verification code. When they receive the email they should click on "Review Documents" and follow the instructions. PLEASE DO NOT DELETE THE EMAIL UNTIL THE APPLICATION HAS BEEN COMPLETED AND SUBMITTED.

**Text:\*** By selecting text, your customer will receive a text to the above phone number. When the customer receives the text they should click on the link and follow the instructions. PLEASE ADVISE TO NOT DELETE THE TEXT LINK(S) UNTIL THE APPLICATION HAS BEEN COMPLETED AND SUBMITTED.

If there are multiple signatures required the customer will receive an email or text for each. Please advise them to forward to the appropriate signer for completion of their required document signature.

\*Message & Data Rates May Apply. 1 message per signer. Text HELP for assistance or STOP to cancel.

I acknowledge and continue

# eSignature Email Process

## Signature Status

You should have received an email to electronically sign your insurance documents. Please locate and click on "Review Documents", then follow the instructions. If you have not received the email, please check your "spam" folder. Once all required signatures have been completed your application will be submitted. You can click the "Refresh Signature Status" and it will show the signature complete. REMEMBER: The applicant must save the email in order to access their documents. Once they close this page, they will only be able to access their documents from the email.

**Signers**

Customer

Agent

**Agent**

Qains Testing [Sign](#)

Sent to :

**Customer(s)**

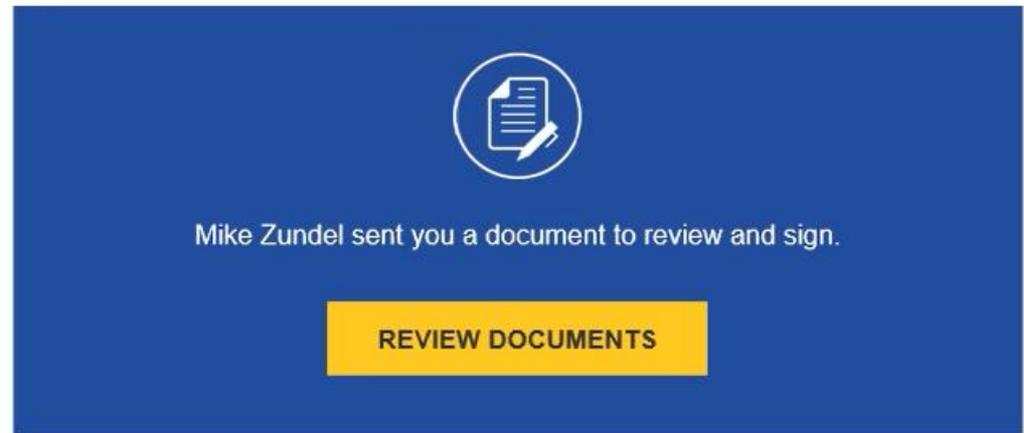
New Email [Resend](#)

Sent to

Agent will see on the Signature Status page that the documents have been sent to the client. Agent can send the email again by clicking the yellow "resend" icon.

# Client eSignature Email Process

The client clicks the “Review Documents” icon to begin the signature process



# Client Authentication eSignature Process



## MULTI-FACTOR AUTHENTICATION

We have the following number on record for you. We can send a code via SMS or phone to authenticate you. PLEASE DO NOT SHARE THE SMS CODE WITH ANYONE. It must be entered BY YOU as part of your e-signature validation. Message & data rates may apply. 1 message per signer. Text HELP for assistance or STOP to cancel.

**XXX-XXX-6193**

SEND SMS

CALL ME

CANCEL

If you do not receive an SMS message or phone call, click **CANCEL**, verify the phone number, and try again.

The client can choose to receive a call back or a text to get their PIN in order to complete the signature process

# eSignature Email Process

Clients then enter the PIN and clicks the “Confirm Code” icon to access the documents and complete their signatures



## MULTI-FACTOR AUTHENTICATION

We have the following number on record for you. We can send a code via SMS or phone to authenticate you.

XXX-XXX-1807

Enter the code you received in the SMS message in the field below and press **CONFIRM CODE**, or [send a new code](#) →

CONFIRM CODE

CANCEL

If you do not receive an SMS message or phone call, click **CANCEL**, verify the phone number, and try again.

# Document Review eSignature Email

## Review Documents

Your documents are ready to sign

Zoom In

Zoom Out

Client reviews documents to confirm accuracy. **They no longer need to add their signature or initials anywhere inside of the actual documents.**

  
Underwritten by  
The Chesapeake Life Insurance Company®

**Product Selection Acknowledgement Form**

**VOLUNTARY Supplemental and/or Life Insurance Coverage Selections:**

	Estimated Monthly Premium		Estimated Monthly Premium
<input type="checkbox"/> Vision Insurance	\$ 0.00	<input checked="" type="checkbox"/> Dental Insurance	\$ 19.00
<input type="checkbox"/> HospitalWise™ Hospital Indemnity Insurance	\$ 0.00	<input type="checkbox"/> CancerWise Plus™ Specified Disease Cancer Insurance	\$ 0.00
<input type="checkbox"/> Fixed Indemnity Direct Fixed Indemnity Insurance	\$ 0.00	<input type="checkbox"/> HeartWise™ Specified Disease Heart Attack & Stroke Insurance	\$ 0.00
<input type="checkbox"/> Accident Companion Accidental Injury-only Insurance	\$ 0.00	<input type="checkbox"/> Critical Accident Direct Critical Accidental Injury Insurance	\$ 0.00
<input type="checkbox"/> Metal Gap Lump Sum Fixed Indemnity Insurance	\$ 0.00	<input type="checkbox"/> Accident Disability Direct Accident-only Disability Income Insurance	\$ 0.00
<input type="checkbox"/> ProtectFit Plus Accidental Injury-only Insurance	\$ 0.00	<input type="checkbox"/> Income Protection Direct Disability Income Insurance	\$ 0.00
<input type="checkbox"/> Accident Direct Accidental Injury-only Insurance	\$ 0.00	<input type="checkbox"/> DentalWise™ Plus / Prime DVH Dental, Vision and Hearing Insurance	\$ 0.00
<input type="checkbox"/> SecureWise™	\$ 0.00		

# eSignature Email Acknowledgements

## Acknowledgments

### PRODUCT SELECTION ACKNOWLEDGEMENT

I agree that I have chosen to submit an application for the SureBridge® voluntary supplemental and/or life Insurance Company®, as previously indicated.

I understand that the voluntary supplemental insurance policies I have selected:

- are OPTIONAL for an additional premium;
- are NOT comprehensive health insurance plans (or Minimum Essential Coverage);
- are NOT Medicare supplement policies nor do they fully supplement any federal Medicare health insurance plan;
- are NOT required in order to purchase comprehensive health insurance from another insurance company.



This acknowledgement does not guarantee that policies will be issued, as such policies are subject to underwriting and coverage is not effective unless and until:

- you are informed in writing that your application has been processed and approved; and
- the effective date stated in your policy.

For complete details of your supplemental coverage, including but not limited to policy benefits, policy conditions, and actual premium rates, please consult the actual policy. Actual premium rates are not final until coverage is issued.

### CONFIRMATION OF BROCHURE/OUTLINE OF COVERAGE RECEIPT

- I acknowledge that I have had the opportunity to review an insurance brochure(s) and/or outline(s) of coverage(s) applying.

### CONSENT FOR ELECTRONIC DELIVERY OF DOCUMENTS

- I acknowledge that I have reviewed the Consent for Electronic Delivery of Documents and my election is as follows:

Client scrolls down the screen to the Acknowledgments section below the Documents. Client reads and clicks each acknowledgement box. Signature Process can not be completed until all acknowledgement boxes have been checked.

# eSignature Email Process

## Sign Application

Please click below to electronically sign your name.

By clicking to sign I understand I am providing my electronic signature.

Click Here to Sign

Date Signed

Exit

Complete Signature

Client clicks the blue button and once the date populates, the green Complete Signature button will activate

Once the client clicks the green button, they have completed their portion of the signature process

# eSignature Email Process

## Signature Status

You should have received an email to electronically sign your insurance documents. Please locate and click on "Review Documents", then follow the instructions. If you have not received the email, please check your "spam" folder. Once all required signatures have been completed your application will be submitted. You can click the "Refresh Signature Status" and it will show the signature complete. REMEMBER: The applicant must save the email in order to access their documents. Once they close this page, they will only be able to access their documents from the email.

**Signers**

Customer

Agent

**Agent**

✉ Qains Testing [Sign](#)

Sent to:

**Customer(s)**

✉ New Email [Resend](#)

Sent to:

[Refresh Signature Status](#)

Once the client has signed, agent clicks the "refresh signature status" icon. Agent then clicks the "sign" icon to sign and submit the application (outlined in slides 9-12).

# Text Signature eSignature (New Process)

# eSignature Text Process

Select the Text option and acknowledge by clicking the green button to continue the process

Sign via Email or Text ▼

Customer signature will be obtained by directing the customer (via email or text) to an online site where the customer will acknowledge and sign all application documents and disclosures. Once you select one of the options below you will be directed to the Signature Status page.

**Email:** By selecting email, your customer will receive an email to the above email address and a text with a verification code. When they receive the email they should click on "Review Documents" and follow the instructions. PLEASE DO NOT DELETE THE EMAIL UNTIL THE APPLICATION HAS BEEN COMPLETED AND SUBMITTED.

**Text:\*** By selecting text, your customer will receive a text to the above phone number. When the customer receives the text they should click on the link and follow the instructions. PLEASE ADVISE TO NOT DELETE THE TEXT LINK(S) UNTIL THE APPLICATION HAS BEEN COMPLETED AND SUBMITTED.

If there are multiple signatures required the customer will receive an email or text for each. Please advise them to forward to the appropriate signer for completion of their required document signature.

\*Message & Data Rates May Apply. 1 message per signer. Text HELP for assistance or STOP to cancel.

I acknowledge and continue

# eSignature Text Process

## Signature Status

You should have received a text with a URL. Please click on the URL, then follow the instructions. Once all required signatures have been completed your application will be submitted. You can click "Refresh Signature Status" and it will show the signature complete. REMEMBER: The applicant must save the text in order to access their documents. Once they close this page, they will only be able to access their documents from the text link.

### Signers

Customer

Agent

#### Agent

 Gains Testing

Sign

Sent to

#### Customer(s)

 New Text

Resend

Sent to

Once text signature is selected the client receives an SMS text

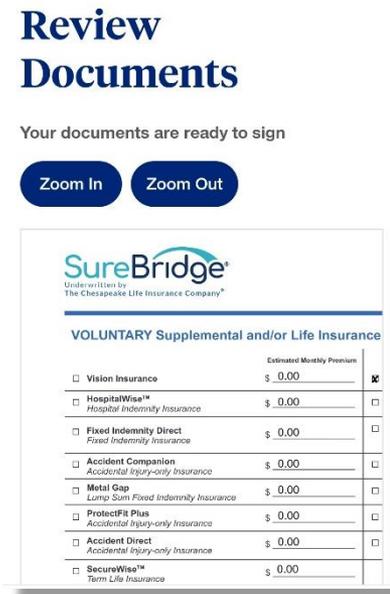
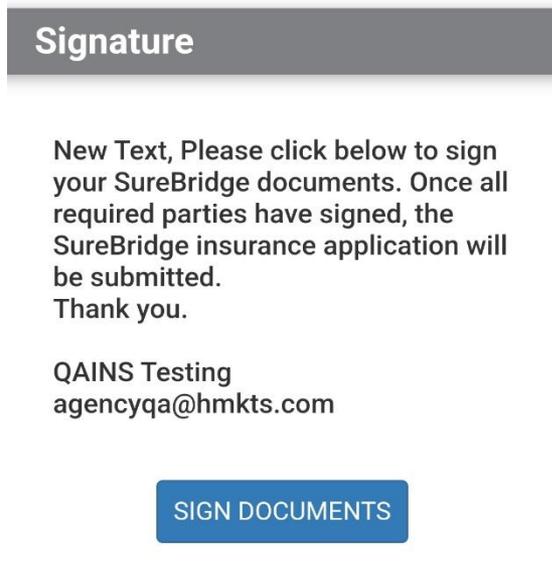
This can be resent using the yellow button

# eSignature Text Process

- ▶ Client clicks on the link in the text



Then clicks the “Sign documents” icon to launch their document review.  
**Client does not need to add their signature or initials anywhere inside of the actual documents**



# eSignature Text Process

- The client then attests by checking each box, clicks the blue button to sign and finalizes by clicking the green button
- A Thank You message will let them know the process is complete

statements or misrepresentation in the application may result in the loss of coverage. I authorize my signature for the The Chesapeake Life Insurance Company supplemental and/or life insurance application and applicable premium payment based on the payment method selected.

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## Sign Application

Please click below to electronically sign your name.

By clicking to sign I understand I am providing my electronic signature.

[Click Here to Sign](#)

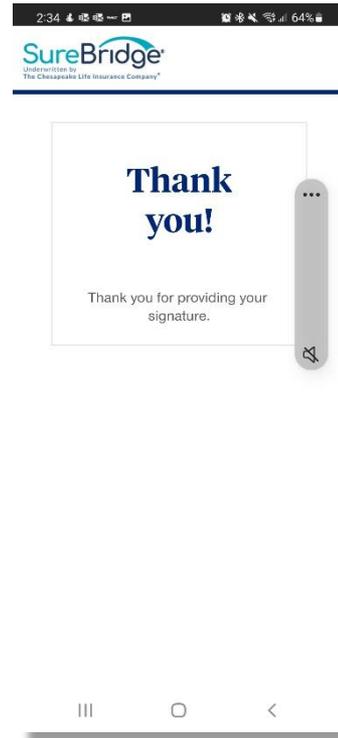
Date Signed

---

[Complete Signature](#)

[Exit](#)

⏪ ⏩



# eSignature Text Process

## Signature Status

You should have received a text with a URL. Please click on the URL, then follow the instructions. Once all required signatures have been completed your application will be submitted. You can click "Refresh Signature Status" and it will show the signature complete. REMEMBER: The applicant must save the text in order to access their documents. Once they close this page, they will only be able to access their documents from the text link.

**Signers**

Customer

Agent

**Agent**

 Qains Testing

Sent to

**Customer(s)**

New Text

Sent to

Once the client has signed, agent clicks the "refresh signature status" icon. Agent then clicks the "sign" icon to sign and submit the application (outlined in slides 9-12).

# Voice Signature

## **eSignature Process (New Process, AGENT ONLY)**

# eSignature Voice Process

## Selected Signature Method

Once you proceed you will not be able to navigate back to any prior page in the application process!

Verify the Mobile Number and the Email Address provided on the Applicant Information page is correct. You will **not** be able to change the Mobile Number or Email Address once you select "I acknowledge and continue".

Please [return to applicant information](#) if the mobile number or email address is incorrect or you prefer to use a different phone number or email address for the signing process.

**Reminder:** It is imperative the email address and mobile number entered is owned and controlled by the Applicant, or Parent/Legal Guardian. The mobile number entered **MUST** be able to receive texts.

The phone number that will receive the confirmation text message is: **(573) 424-1807**

If the mobile number cannot receive text messages from the SureBridge insurance application process because a STOP reply was previously sent to Opt Out of receiving texts, please Opt back in, by replying START, to (817) 886-7994 before proceeding.

The current email address is: **mike.zundel@surebridgeinsurance.com**

## Voice Signature

Customer signature was obtained via voice recording. The call was recorded on our secure voice line and I read aloud and verbatim all required documents and disclosures as indicated.

Go Back

I acknowledge and continue

Clients using voice signature are not impacted by the new process  
The experience will be the same from their perspective

# eSignature Voice Process



## Signature Status

<b>Signers</b>	<b>Agent</b>
➔ Agent	Qains Testing <b>Sign</b>
	Sent to

Once the voice signature and payment info is completed agent clicks the “sign” icon to sign and submit the application (outlined in slides 9-12).

# Submitted Successfully Voice Process

Thank you, your application has been submitted.

Plans

[View Application](#)

PPO Dental - Basic

## Application Approved

We are pleased to inform you that your application for optional SureBridge® supplemental and/or life insurance product(s), underwritten by The Chesapeake Life Insurance Company®, **has been approved!**

If the "Change to Guarantee Issue Coverage" was selected and an applicant does not meet the underwriting standards in place for one or more of the products applied for, the Guaranteed Issue amount of such product(s) will be issued at a lower benefit than originally selected on the application.

When the agent signature is submitted successfully, they will land on the thank you page

The application has been successfully completed and either issued immediately or is under review

# Thank You for Everything You Do!

## For More Information

See the CLICO Product and Underwriting Guide on your broker portal

Producer Support at (888) 797-4447 or  
[ProducerSupport@SureBridgeInsurance.com](mailto:ProducerSupport@SureBridgeInsurance.com)

Contact your Sales Director

Access the Agent Portal by visiting [www.suppsportal.com](http://www.suppsportal.com)