



LONG-TERM CARE
INSURANCE

Condensed Underwriting Guide





CONTENTS

	Page
I. Mission Statement	1
II. Prequalification	1
III. Preparing Your Client for the Underwriting Process	1
IV. Privacy and HIPAA	1
V. Procedures for Accepting Applications from Non-English Speaking Applicants	2
VI. Application Submission	2
VII. Understanding Our Philosophy and Approach to Cognitive Screening	3
VIII. Underwriting Requirements	4
IX. Benefit/Changes	9
X. Ratings and Benefit Reconsiderations	9
XI. Underwriting Requirements For Christian Scientists	10
XII. Underwriting Risk Classifications by Product	10
XIII. Rider Limitations	10
XIV. Underwriting Guidelines	10
XV. Underwriting Guidelines for the Double Accidents Benefit	59
XVI. Uninsurable Medications	59
XVII. Male/Female Height and Weight Table	60
XVIII. Appeal Process	61

I. Mission Statement

The mission of the Long-Term Care (LTC) Insurance Underwriting Department is to provide the highest quality of service to you and your clients. With that in mind, we have seasoned underwriters and nurses underwriting your LTC insurance applications.

In keeping with our mission, we have made the following commitments to service standards:

- We will respond to all inquiries, acknowledging a telephone call within three business hours.
- An underwriting determination will be made within three days of receipt of the “Final Medical Requirement.”

II. Prequalification

The Underwriting area can be contacted directly at 888-604-7296 (prompt 3) between 8 a.m. and 6 p.m. (EST) to prequalify an applicant for LTC insurance or to answer underwriting inquiries. You can also fax prequalification questions to 617-450-8052 using the Prequalifying Inquiry Form (LTC-1028) or email: rparkers@jhancock.com

Please note that prequalification responses are a tentative opinion based on the information provided. The more information you can provide to us about your client the more accurate our quote will be.

III. Preparing Your Client for the Underwriting Process

The Underwriting Department has developed various underwriting programs based on age, medical history, and benefits applied for.

The brochure entitled “Our Underwriting Process” (LTC-1590) is available to assist you in preparing your client for the above programs. It is essential that your client receives this brochure during the sales process, as this will set your client’s expectations and ensure favorable results. In some instances, we may request a motor vehicle report, pharmacy profile, or information from the Medical Information Bureau to further evaluate insurability.

IV. Privacy and HIPAA

John Hancock is committed to protecting the privacy of its customers, and strictly abides by the rules and regulations set forth by the Health Insurance Portability and Accountability Act (HIPAA), which obligates us under the law to maintain the privacy of our client’s medical information.

HIPAA Medical Authorization

The HIPAA compliant medical authorization form must be signed and dated by the applicant and submitted with the application. A properly completed authorization is necessary to order medical requirements and to allow the application to be reviewed by the underwriting department. Failure to submit this form in good order, will postpone the underwriting process.

Notice of Summary of Rights

This HIPAA compliant form accompanies all adverse decision letters, and informs the applicant of their rights in accessing their personal health information. An applicant can also obtain their personal health information by submitting a written request. All requests for information must be signed and dated by the applicant.

V. Procedures for Accepting Applications from Non-English Speaking Applicants

Before we may begin to underwrite an application from a non-English speaking person, we require that the following procedure is followed. This is to ensure that the applicant fully understands what he/she is buying.

In order for us to consider a non-English speaking applicant, it will be necessary that an interpreter accompany the agent when visiting the applicant and translate the questions on the application and any discussion concerning the policy in accordance with the following criteria.

An interpreter acceptable to John Hancock must be present, along with the applicant and a John Hancock appointed agent, at the time that an application is being completed. The interpreter must translate comments of the agent, as well as key information contained in all advertising promotional materials. The interpreter will be expected to relate to the applicant all questions, statements and agreement language that appear on the application and other forms which contain key disclosure information and/or which the applicant must sign. The interpreter must then instruct the agent to fill in all the blanks on the application form in English reflecting the answers provided by the applicant as interpreted by the interpreter. The agent, through the interpreter, will also ask the applicant to sign all forms where required after agent, while the interpreter explains all language that appears above signature lines.

An interpreter will only be acceptable to John Hancock if that person is not a relation of the applicant, has no financial or personal investment in the obtaining of the insurance, and the applicant is willing to sign an appropriate certification to this effect.

It will be the responsibility of the applicant to arrange for the availability of an interpreter acceptable to John Hancock at the time that the application be completed, as well as to have the interpreter available at all times during the course of the underwriting process, when John Hancock may need additional information to complete the evaluation of the application. If the applicant fails to make such an interpreter available during the application process, and as a result, John Hancock is unable to obtain the necessary information to evaluate the application, John Hancock will reject the application.

All communications from John Hancock, whether oral (in person or on the telephone) or in writing, will be in English and John Hancock will be under no obligation to render such communication in any other language.

VI. Application Submission

To ensure that your application is processed promptly, please be sure to:

- Submit the correct state/edition application
- Complete the application in its entirety, including complete details of any question answered "yes" in the medical section
- Submit all state-required forms
- Submit applications with an advance payment equivalent to one month's premium
- Submit application to John Hancock within 30 days from the date of sale

The Underwriting Department will not process an application if the:

- HIPAA Medical Authorization Form has not been submitted
- Advance payment check, equivalent to one month's premium, has not been submitted
- Application is not received at John Hancock within 30 days from the date of sale

VII. Understanding Our Philosophy and Approach to Cognitive Screening

As a pioneer and a leader in the LTC insurance industry, John Hancock continues to research and refine our underwriting requirements and guidelines in order to sustain our excellent claims reputation.

While John Hancock's overall portfolio experience continues to be excellent, claims related to cognitive impairment continue to be a significant challenge for the LTC insurance industry. Estimates indicate that cognitive claims account for up to 40% of claims volume. Cognitive claims are typically the most costly, as the insured requires a high level of care for a longer benefit period.

Identifying applicants with a cognitive impairment continues to be one of the leading dilemmas presented to LTC insurance underwriters, since fewer than 25% of medical records mention a cognitive impairment when it exists. Studies indicate there is a stigma related with persons who have a cognitive impairment, which often leads applicants and their families to deny the early warning signs. Additionally, a person in the early stages of cognitive impairment may appear "sharp" one day and confused the next.

While Alzheimer's disease is the foremost cause of cognitive impairment in old age, affecting 1 out of every 10 adults over 65 and almost half of those over 85, as reported by the Alzheimer's Association*, it is not the only condition or diagnosis that results in a cognitive claim. Stroke, diabetes, cardiovascular disease, mental illness, and neurological diseases such as Parkinson's are just a few of the many disorders that can lead to cognitive impairment.

As a result, we began screening in 1991 for cognitive impairment among applicants in the older ages. In 1999, we began utilizing the Minnesota Cognitive Acuity Screen (MCAS) telephonically for applicants ages 69 and younger based on medical triggers. More recently, based on superior results, we expanded its use to all applicants ages 65 and older.

Our strong confidence in the MCAS lies in the fact that it was developed and statistically validated by scientists and geriatric physicians for Nation's CareLink and is used extensively in the LTC insurance industry. By using the MCAS screen, the accuracy of underwriting is significantly improved. 25–50% of applicants with cognitive impairments are not detected by memory testing alone. The MCAS does in-depth testing in a variety of areas of cognition including judgment, short-term memory, reasoning/orientation, and comprehension. This 15-minute, non-threatening screen correctly identifies cognitively impaired and unimpaired subjects with 98.1% accuracy. Other tests have error rates of 10% or more. The MCAS is flexible; it can be administered telephonically or face to face, with minimal false positives or false negatives. This not only improves our risk selection, but also allows us to potentially accept more applicants who may be falsely classified under less sophisticated exams. The scoring is composed of nine subsections, which are weighted according to statistical importance that they demonstrated in the research and are compiled into the composite MCAS score.

Milliman USA, a leading actuarial firm, performed an independent study indicating: "The MCAS shows improved expected LTC insurance profitability compared to any other cognitive screen on the basis of claims savings and increased premiums alone." This information was provided by Milliman and Robinson Inc., "Impact of Cognitive Testing on Long-Term Care Insurance Profitability," September 1999.

VIII. Underwriting Requirements

The Underwriting Department has developed criteria that fall within four programs to evaluate an applicant's insurability for LTC insurance. The criteria and program descriptions are as follows:

Criteria

- Age (preserved younger age within 30 days of the application date)
- Date last consulted with their primary care physician
- Medical history
- Benefits applied for

Programs

RN Assessment

For applicants ages 69 and younger that have not consulted with their primary care physician will require this face to face assessment that is scheduled with a Nation's CareLink nurse. The assessment includes a review of the applicant's medical history, medications, symptoms, name of their doctors, lifestyle, and daily activities such as meal preparation, transportation, bathing, and toileting. The nurse will also perform a blood pressure reading, height and weight measurement, and a urine specimen. Applicants ages 65 and older will be asked to participate in a brief memory exercise.

A nurse will contact the applicant to arrange an appointment at a time that is convenient for them. The assessment will take place in the applicant's home, where they are most comfortable, and usually lasts 45 minutes, depending upon the extent of their medical history. The applicant must have some form of identification, such as a driver's license or Social Security card. If the applicant wears glasses or a hearing aid, they will want to have those with them during the assessment. The nurse will present identification to the applicant upon arrival. Family members and friends can be present, but they must be in a separate room during the assessment. After the applicant completes the interview, they may receive a customer satisfaction survey allowing John Hancock to evaluate the quality of their experience.

Telephonic Interview

This is a phone conversation between a Nation's CareLink nurse and the applicant consisting of standardized medical questions. The questions focus on their medical history, medications, symptoms they may have, lifestyle, and daily activities such as meal preparation, transportation, bathing, and toileting. We'll ask the applicant the names of their doctors, and we'll also ask them to participate in a brief memory exercise if they are 65 or older, or if certain medical conditions exist. A nurse from Nation's CareLink will call the applicant to conduct the interview. If the applicant receives the call at a time that's inconvenient for them, the nurse will reschedule the interview. It's important that the applicant chooses a quiet time and place for their interview to ensure more favorable results. The interview usually takes 30 minutes, depending on the extent of their medical history.

After the applicant completes the interview, they may receive a customer satisfaction survey allowing John Hancock to evaluate the quality of their experience.

Underwriting Requirements (continued)

Medical Records

John Hancock will request copies of the applicant's medical records from their primary care physician (PCP) at our own expense.

Personal Interview (On-site)

This is a face-to-face conversation between a Nation's CareLink nurse and the applicant. The interview consists of a series of standardized medical questions. The questions focus on their medical history, medications, symptoms, lifestyle, and daily activities such as meal preparation, transportation, bathing, and toileting. We'll ask the applicant names of their doctors, and we'll ask them to participate in a brief memory exercise. A nurse will contact the applicant to arrange an appointment at a time that's convenient for them. The interview will take place at the applicant's home, in the room where they are most comfortable. The applicant must have some form of identification, such as a driver's license or social security card. If the applicant wears glasses or a hearing aid, they will want to have those with them during the interview. Every nurse carries identification and will present it to the applicant upon arrival. The interview usually lasts 45 minutes, depending on the extent of their medical history. The nurse will take their blood pressure, as well as height and weight readings. However, no blood work or urinalysis is needed, nor will the applicant have to undress. Family and friends can be present, but they must be in a separate room during the interview. After the applicant completes the interview, they may receive a customer satisfaction survey allowing John Hancock to evaluate the quality of their experience.

Medical Information Bureau (MIB)

In most instances, an inquiry to the Medical Information Bureau will be made allowing the underwriter to make the most informed decision regarding the applicant's insurability. The current authorization contained in the "Application for Insurance" authorizes retrieval of this information; therefore no intervention on the applicant's behalf is required.

Prescription Profiles

For applicants ages 69 and younger, a prescription profile will be retrieved allowing the underwriter to make the most informed decision regarding the applicant's insurability. The current authorization contained in the "Application for Insurance" authorizes retrieval of this information; therefore no intervention on the applicant's behalf is required.

Underwriting Requirements (continued)

Florida Underwriting Requirements

AGES 64 and YOUNGER

Criteria	RN Assessment w/Urinalysis	Telephone Interview	Personal Interview	Medical Records
• Has consulted PCP within 18 months		✓		✓
• Has consulted PCP within 18 months • Hearing Impaired			✓	✓
• Has not consulted PCP within 18 months	✓			
• Has not consulted PCP within 18 months • History of significant medical condition as stated below*	Applicant must have undergone a complete physical exam prior to application submission.			

AGES 65–69

Criteria	RN Assessment w/Urinalysis & MCAS	MCAS Telephone Interview	Personal Interview	Medical Records
• Has consulted PCP within 18 months		✓		✓
• Has consulted PCP within 18 months • Hearing Impaired			✓	✓
• Has not consulted PCP within 18 months	✓			
• Has not consulted PCP within 18 months • History of significant medical condition as stated below*	Applicant must have undergone a complete physical exam prior to application submission.			

AGES 70+

Criteria	RN Assessment w/Urinalysis & MCAS	Personal Interview	Medical Records
• Has consulted PCP within 18 months		✓	✓
• Has not consulted PCP within 18 months • Hearing impaired		✓	✓
• Has not consulted PCP for 3+ years	✓		

*Blood Disorders excluding Compensated Anemia, Cancer within 3 yrs., Cardiomyopathy, Chronic Obstructive Pulmonary Disease, Diabetes, Discoid Lupus, Emphysema, Liver Disorders, Lymphomas, Organ Transplant, Osteoporosis, Rheumatoid/Psoriatic Arthritis, TIA.

Underwriting Requirements (continued)

AGES 64 and YOUNGER

Criteria	RN Assessment w/Urinalysis	Telephone Interview	Personal Interview	Medical Records
<ul style="list-style-type: none"> Has consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ 		✓		
<ul style="list-style-type: none"> Has consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ 		✓		✓
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ 	✓			
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ 	✓			
<ul style="list-style-type: none"> Has consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ History of a significant medical condition as stated below² 				✓
<ul style="list-style-type: none"> Has consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ History of a significant medical condition as stated below² 		✓		✓
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ History of a significant medical condition as stated below² 	Applicant must have undergone a complete physical exam prior to application submission.			
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ History of a significant medical condition as stated below² 	Applicant must have undergone a complete physical exam prior to application submission.			
<ul style="list-style-type: none"> Has consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ Hearing Impaired 				✓
<ul style="list-style-type: none"> Has consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ Hearing Impaired 				✓

1. Also applies to the \$1 Million B.P. in Florida and 15 Year B.P. in Connecticut.

2. Blood Disorders excluding Compensated Anemia, Cancer within 3 yrs., Cardiomyopathy, Chronic Obstructive Pulmonary Disease, Diabetes, Discoid Lupus, Emphysema, Liver Disorders, Lymphomas, Organ Transplant, Osteoporosis, Rheumatoid/Psoriatic Arthritis, TIA.

Underwriting Requirements (continued)

AGES 65–69

Criteria	RN Assessment w/Urinalysis & MCAS	MCAS Telephone Interview	Personal Interview	Medical Records
<ul style="list-style-type: none"> Has consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ 		✓		
<ul style="list-style-type: none"> Has consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ 		✓		✓
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ 	✓			
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ 	✓			
<ul style="list-style-type: none"> Has consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ History of a significant medical condition as stated below² 		✓		✓
<ul style="list-style-type: none"> Has consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ History of a significant medical condition as stated below² 		✓		✓
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ History of a significant medical condition as stated below² 	Applicant must have undergone a complete physical exam prior to application submission.			
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ History of a significant medical condition as stated below² 	Applicant must have undergone a complete physical exam prior to application submission.			
<ul style="list-style-type: none"> Has consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ Hearing Impaired 			✓	✓
<ul style="list-style-type: none"> Has consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ Hearing Impaired 			✓	✓
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ Hearing Impaired 	✓			
<ul style="list-style-type: none"> Has not consulted PCP within 18 months Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹ Hearing Impaired 	✓			

1. Also applies to the \$1 Million B.P. in FL and 15 Year B.P. in CT.

2. Blood Disorders excluding Compensated Anemia, Cancer within 3 yrs., Cardiomyopathy, Chronic Obstructive Pulmonary Disease, Diabetes, Discoid Lupus, Emphysema, Liver Disorders, Lymphomas, Organ Transplant, Osteoporosis, Rheumatoid/Psoriatic Arthritis, TIA.

Underwriting Requirements (continued)

AGES 70+

Criteria	RN Assessment w/Urinalysis & MCAS	Personal Interview	Medical Records
• Has consulted PCP within 18 months		✓	✓
• Has consulted PCP within 18 months		✓	✓
• Has not consulted PCP for 3+ years	✓		

IX. Benefit/Changes

Within the first six months of policy issuance

The New Business department processes benefit changes on newly issued policies upon receipt of the New Business Coverage Change Form (LTC-1064). Requests for a benefit increase will require underwriting approval. Additionally, all approved increases will be subject to a statement of health.

After six months of policy issuance

The Policyholder Services department processes requests for benefit decreases on policies issued more than 6 months ago, upon receipt of the LTCI Policyholders Service Coverage Change (Reduction) Form (LTC PHS 04-05 JH). Requests to increase benefits after six months of issue will require a new application and full underwriting review at attained age.

X. Ratings and Benefit Reconsiderations

Requests for a rate reduction or benefit reconsideration on a modified policy may be considered if an adverse decision letter was sent at time of issue specifying a re-evaluation date. If the adverse decision letter does not indicate a re-evaluation date, then the decision is permanent.

The policyholder should submit a written request for re-evaluation to the Underwriting department and include a currently dated HIPAA Medical Authorization. Full underwriting will be performed, as the policyholder must meet current eligibility standards for consideration of an improved risk classification or an increase to the original benefit that was applied for at time of application.

Polices issued at the Select rate are permanent decisions, and requests for a preferred rate will require a new application and full underwriting review at the new attained age.

XI. Underwriting Requirements For Christian Scientist

Christian Science practitioners, for the most part, perform their healing arts “in the absence” of the individual, usually over the phone. This practice consists of prayer and meditation for the individual. In most cases, the individual and practitioner have never met in person.

Please remember that because Christian Science practitioners are not recognized by us as physicians, if the applicant has not had a complete physical examination in the past 18 months, our underwriting department will require that a complete physical examination be performed by a physician selected by John Hancock and submitted for review. The physician will examine the heart, nervous, and respiratory systems, in addition to a blood pressure reading, a pulse check, height and weight readings, and submission of a urine specimen.

XII. Underwriting Risk Classifications By Product

Custom Care II Enhanced, FamilyCare II Benefit, Leading Edge, Custom Care II and Custom Care Preferred

Select

Class 1 (25% increase)

Class 2 (50% increase)

We remain committed to offering policies to as many applicants as possible. As a result, in addition to utilizing our various risk classifications, we have further flexibility in modifying coverage with a 180- or 365-day Elimination Period in most states.

XIII. Rider Limitations

Waiver of Home Care Elimination Period or Zero Day Home Care Elimination Period

Not available to applicants with health conditions in which the guideline states a 90 day E.P. is required.

SharedCare

Substandard risk classifications are only eligible for the SharedCare rider with a Benefit Period of 2–3 years.

Except in AZ and NH where substandard risk classes can have SharedCare with a 4-year Benefit Period.

XIV. Underwriting Guidelines

Following is a comprehensive list of the most common medical conditions seen in the LTC insurance market. The underwriting decisions listed on the following pages are based on the primary condition. If an individual has multiple medical conditions, the long-term care risk for the primary disease may be compounded, therefore increasing the risk of using long-term care services.

If multiple medical conditions are present, please contact the Underwriting Department at 888-604-7296 (prompt 3) to prequalify the applicant. The final underwriting determination will be based on the underwriting tools required for your applicant. In addition, the quality of recovery, proper control, and level of stability are significant factors in our overall determination.

CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
	Acoustic Neuroma: A benign tumor of the auditory nerve	
	<i>Has the neuroma been removed? Date(s)</i>	
	<i>Is applicant taking any medication or receiving physical therapy? Name(s)</i>	
	<i>Has the applicant had any problems with balance or falls? Details</i>	
	<i>Has there been any seizure activity? Date of last seizure</i>	
	<i>Has the applicant undergone physical therapy? Date(s) and results</i>	
	Surgically removed, complete recovery, no seizures or residuals other than hearing loss	Preferred
	Present neuroma, current seizure activity, balance disturbance or falls, or inoperable tumor	Decline
	Acromegaly: A chronic metabolic disorder that results in gradual enlargement of body tissues including the bones of the face, jaw, hands, feet, and skull	Decline
	Actinic Keratosis: A pre-malignant lesion of the skin	Preferred
♥	Adams-Stokes: A transient condition caused by a heart rhythm disorder in which there is a slow or absent pulse resulting in syncope (fainting), with or without convulsions	
	Treated with medication or a pacemaker implant successfully per follow-up visit	Select
	Symptomatic with episodes of shortness of breath, fainting, syncope, convulsions, or an ejection fraction <40%	Decline
	Addison's Disease: An endocrine or hormone disorder which occurs when the adrenal glands do not produce enough of the hormone cortisol or aldosterone	
	Stable, well controlled, no complications, under treatment with ≤40mg hydrocortisone, >12 months	Select
	Adult Day Care Services: Current	Decline
	AIDS: A disease of the immune system that fails to fight infection	Decline
*	Alcoholism: A chronic illness marked by consumption of alcohol at a level that interferes with physical or mental health, social, family, or occupational responsibilities	
	<i>How long has the applicant been abstinent?</i>	
	<i>Has applicant ever had a relapse? Date(s)</i>	
	<i>Has the applicant ever received any inpatient treatment? Date(s)</i>	
	<i>Is the applicant attending any outpatient therapy or belong to a support group?</i>	
	<i>Has the applicant ever had any liver problems (cirrhosis, fatty liver, abnormal liver functions)? Details</i>	
	Abstinent, normal blood studies, no complications, <18 months	Postpone 18 months
	Abstinent, normal blood studies, no complications, >18 months	Select
	Abstinent >18 months, single hospitalization and/or detox admission, chronic treatment with an antialcoholic (e.g., antabuse), no limitations, non-disabling	Select w/90 day E.P.
	Abstinent with detox admission, normal blood studies, no complications, <18 months	Postpone 18 months
	Abstinent with detox admission, normal blood studies, no complications, >18 months	Select
	Abstinent with two or more hospitalizations and/or detox admission, <36 months	Postpone 36 months
	Abstinent with two or more hospitalizations and/or detox admission, >36 months	Class 1* w/180 day E.P. or Class 2*
	History of alcohol abuse with cirrhosis, a current fatty liver, abnormal liver function tests, multiple relapses, or continued alcohol use	Decline

Conditions with similar shape symbols represent co-morbid conditions which, when combined, increase the overall risk. If three or more medical conditions are present with the same shape symbol, please contact the Underwriting Department to prequalify the applicant.

- Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.

- ♥ Represents a circulatory co-morbid condition.
- * Represents a mental illness condition.

CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
	Allergies: An acquired, abnormal immune response to a substance that does not normally cause a reaction in most people	Preferred
	Alzheimer's disease: A slowly progressive form of dementia	Decline
♥	Amaurosis Fugax: Temporary loss of vision in one eye due to insufficient blood flow to the retina	
	<i>Date of episode</i>	
	<i>Has there been more than 1 episode? Details</i>	
	<i>Has any diagnostic testing been performed (carotid studies, MRI/CT of brain)? Details/Results</i>	
	<i>Have there been any residual vision problems?</i>	
	<i>Does applicant have any history of diabetes, heart, or circulatory problems? Details</i>	
	Single episode, complete recovery, asymptomatic, no cognitive or physical residuals, >12 months	Class 1* w/90 day E.P.
	2 episodes	Decline
	Single episode with cognitive or physical residuals or with diabetes	Decline
	Amputation: Removal of a limb, part, or organ	
	<i>Location of amputation?</i>	
	<i>Date of amputation</i>	
	<i>What caused the amputation?</i>	
	<i>Is the applicant disabled or do they experience any limitations? Details</i>	
	<i>Does the applicant use any type of assistance devices? If yes, type and frequency</i>	
	Single limb due to trauma or congenital, no limitations, non-disabling, no assistive devices, >12 months	Select w/6 year B.P.
	Single limb due to trauma or congenital, no limitations, non-disabling, occasional use an assistive device (single prong cane, or single crutch), >12 months	Class 1* w/3 year B.P.
	Due to disease	Decline
	Amyotrophic Lateral Sclerosis (ALS): A disorder causing progressive loss of control of voluntary muscles due to the destruction of nerves in the brain and spinal cord	Decline
	Anemia: A blood disorder characterized by the decreased ability of the red blood cells to provide adequate oxygen supplies to body tissues	
	<i>Date of diagnosis?</i>	
	<i>What type of anemia does applicant have?</i>	
	<i>What is the cause of the anemia?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has applicant received any transfusions? Date(s)</i>	
	<i>Has applicant been hospitalized? Date(s)/Details</i>	
	Mild iron, B-12 or Folate deficiency anemia, no underlying chronic disease, well controlled, near normal lab values	Preferred
	Currently under evaluation for anemia with abnormal lab values without known etiology	Postpone 3 months
	Due to disease	Refer to disease

Conditions with similar shape symbols represent co-morbid conditions which, when combined, increase the overall risk. If three or more medical conditions are present with the same shape symbol, please contact the Underwriting Department to prequalify the applicant.

- | | |
|---|---|
| ■ Represents a respiratory co-morbid condition. | ♥ Represents a circulatory co-morbid condition. |
| ● Represents a musculoskeletal co-morbid condition. | * Represents a mental illness condition. |

*Substandard risk classifications are only eligible for 2–6 year benefit periods. ShareCare only available with a 2- or 3-year Benefit Period. In AZ and NH a 4-year Benefit Period is allowed.

CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
	Anemia (continued)	
	Chronically abnormal blood studies, weakness or fatigue	Decline
	Current treatment with hydroxyurea, steroids, blood transfusions, immunosuppressants, or treated with bone marrow or stem cell transplant	Decline
♥	Aneurysm: A bulge in the wall of an artery	
	<i>Date of diagnosis</i>	
	<i>Where is the aneurysm located (abdominal-aortic, cerebral, thoracic, other)?</i>	
	<i>Was the aneurysm surgically repaired? Date</i>	
	<i>If present, what is the size in cm?</i>	
	<i>Has the aneurysm grown? Details</i>	
	<i>Does applicant have any history of diabetes, heart, or circulatory problems? Details</i>	
	Abdominal-aortic, ≤5 cm in size with no growth, monitored w/routine follow-ups, >6 months	Select w/90 day E.P.
	Abdominal-aortic, >5 cm in size, with growth, or symptomatic	Decline
	Abdominal-aortic, surgically repaired, complete recovery, >6 months	Select
	Abdominal-aortic, surgically repaired, complete recovery, <6 months	Postpone 6 months
	Cerebral, surgically repaired, complete recovery, no cognitive or physical residuals, >12 months	Select
	Cerebral, surgically repaired, complete recovery, no cognitive or physical residuals, <12 months	Postpone 12 months
	Cerebral, un-repaired or inoperable	Decline
	Thoracic, surgically repaired, complete recovery, >6 months	Select
	Thoracic, ≤5 cm in size with no growth, monitored w/routine follow-ups, >6 months	Select w/90 day E.P.
	Thoracic, >5 cm in size, with growth, or inoperable location	Decline
●	Ankylosing Spondylitis: A chronic inflammatory disease that affects the joints between the vertebrae of the spine, and the joints between the spine and the pelvis that eventually causes the affected vertebrae to fuse or grow together	
	<i>Date of diagnosis?</i>	
	<i>Does the applicant experience any pain? Describe</i>	
	<i>Is applicant taking any medication? Name(s)</i>	
	<i>Has the applicant undergone any back surgery? Date(s)/Details</i>	
	<i>Has the applicant undergone any physical therapy or injections? Details</i>	
	Asymptomatic, no limitations, treatment-free	Select
	With kyphosis, or respiratory compromise, or spinal fractures, or difficulty with mobility, or is advanced stage	Decline
	Anorexia Nervosa: An eating disorder associated with a distorted body image and marked fasting	Decline
*	Anxiety: A feeling of apprehension or fear that lingers	
	<i>Date of diagnosis?</i>	
	<i>Is applicant taking medication? Name(s)</i>	
	<i>Has there been any change in treatment over the past 6 months? Details</i>	

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
* Anxiety (continued)	<i>Has applicant ever been hospitalized? Date(s)/Details</i>	
	<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	Situational or new onset, no medications, >3 months	Preferred
	Well controlled, no limitations, non-disabling, treated with <4 medications, >3 months	Select
	Symptomatic	Decline
	Appendectomy: Surgical removal of the appendix	Preferred
♥ Arterious Venous Malformation (AVM): A large tangle of dilated blood vessels with rapid flow and early draining veins that may occur in many parts of the body	Brain or spinal cord, successfully eliminated (surgically, embolization or radiation), no residual complications, complete recovery, >12 months	Select
	Abdominal, successfully eliminated (surgically, embolization, or radiation), no residual complications, complete recovery, >6 months	Select
	Present Arterious Venous Malformation	Decline
	Asymptomatic, stable, treatment-free, <24 months	Postpone 24 months
	Asymptomatic, stable, and treatment-free, no limitations, non-disabling, >24 months	Select
	Symptomatic or requiring treatment	Decline
● Arthritis (excluding Osteo, Rheumatoid, and Degenerative): Inflammation of a joint	Mild, no limitations, non-disabling, treated with non-prescription medications	Preferred
	Mildly symptomatic, treated with 1 anti-inflammatory	Select
■ Asbestosis: A lung disease		Refer to Chronic Obstructive Pulmonary Disease
● Aseptic Necrosis: A condition resulting from the temporary or permanent loss of blood supply to the bones	Surgically repaired, no limitations, non-disabling, and no evidence of disease >6 months	Select
	Un-operated	Decline
	Assisted Living Facility: A residential facility for people who need assistance with Activities of Daily Living (ADLs) but wish to live as independently as possible for as long as possible	Decline
■ Asthma: A respiratory disease marked by attacks of breathing difficulty, wheezing, and coughing	<i>Date of diagnosis?</i>	
	<i>Is asthma seasonal or requires treatment year round?</i>	
	<i>Is applicant taking any medication/inhalers? Name(s)</i>	
	<i>Have pulmonary function tests been performed? Date/Results (FEV1 & FVC %)</i>	
	<i>Has applicant ever used oxygen or steroids? Frequency?</i>	
	<i>Does the applicant have any other respiratory disorders? Details</i>	

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■	Asthma (continued)	
	<i>Has applicant ever been hospitalized for a respiratory disorder? Date(s)/Details</i>	
	Seasonal, no limitations, well on controlled on short-term treatment, no other respiratory disorders or prior hospitalizations	Preferred
	Chronic treatment, mild, asymptomatic, stable baseline pulmonary function tests with FEV1>65% and FVC>75%	Select
	Chronic oral steroid use, frequent hospitalizations, oxygen use, or multiple exacerbations	Decline
	Ataxia: Defective muscular coordination that manifests when voluntary muscular movements are attempted	
	Etiology unknown with normal neurological work-up, completely resolved, no limitations, <12 months	Postpone 12 months
	Etiology unknown with normal neurological work-up, completely resolved, no limitations, >12 months	Select
	Due to underlying disease	Refer to disease
	Current	Decline
♥	Atrial Fibrillation: A rapid, irregular heart rhythm	
	<i>Date of diagnosis?</i>	
	<i>Is applicant taking any medication? Name(s)</i>	
	<i>Has applicant ever been hospitalized for a heart or circulatory problem? Date(s)/Details</i>	
	<i>Has applicant ever required electrical cardioversion? Date(s)/Results</i>	
	<i>Does applicant experience any symptoms of palpitations, chest pain, or dizziness? Details</i>	
	<i>Does applicant have any history of diabetes, heart, or circulatory problems? Details</i>	
	New onset, <6 months	Postpone 6 months
	Normal sinus rhythm, single successful cardioversion, no underlying cardiac disease, >6 months	Select
	Normal sinus rhythm, well controlled on oral medications, no underlying cardiac disease, >6 months	Select
	Chronic, well controlled on Coumadin, >12 months	Class 1*
	Multiple cardioversions, uncontrolled, or symptomatic	Decline
♥	Atrial Flutter: An irregularity of the heartbeat in which the contractions of the atrium exceed in number those of the ventricle	Refer to Atrial Fibrillation
	Atrophy (Brain): A decrease in size or wasting of the brain	
	60 and older, MRI or CT scan showing "Mild cerebral" or "cerebellar atrophy" and/or stating "consistent with age", no evidence of neurological symptoms	Select
	<60 years old with an MRI or CT scan showing "Mild cerebral" or "cerebellar atrophy" or "consistent with age", or evidence of neurological symptoms	Decline
*	Attention Deficit Disorder (ADD): A condition characterized by a developmentally inappropriate level of attention, concentration, activity, and distractibility	
	<i>Date of diagnosis?</i>	
	<i>Is applicant taking any medication? Name(s)</i>	
	<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details</i>	
	<i>Is the applicant disabled or do they experience any limitations? Details</i>	
	Well controlled, compliant with <3 medications, active lifestyle, no limitations, non-disabling, >3 months	Select

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	Barrett's Esophagus: A condition in which the lining of the esophagus changes from its normal lining to a type that is usually found in the intestines	Preferred
	Basal Cell Skin Cancer: A slow growing malignant neoplasm that arises from the basal layer of the skin	Preferred
	Bell's Palsy: A disorder involving sudden facial drooping and decreased ability to move the face	Preferred
*	Bipolar/Manic Disorder: A mood disorder characterized by mood swings from mania (exaggerated feeling of well-being) to depression	
	<i>Date of diagnosis?</i>	
	<i>Is applicant taking any medication? Name(s)</i>	
	<i>Has applicant ever been hospitalized or treated in facility for any type of mental illness? Date(s)/Details</i>	
	<i>Has applicant ever received any electroconvulsive shock therapy?</i>	
	<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	New onset, <12 months	Postpone 12 months
	Well controlled on <4 non-antipsychotic medications, no limitations, and non-disabling, >12 months	Class 1* w/90 day E.P.
	Well controlled on 4 or more non-antipsychotic medications, no limitations, and non-disabling, >12 months	Class 2* w/90 day E.P., 3 year B.P.
	Single psychiatric hospitalization, well controlled, no limitations, non-disabling, and treated with <4 medications, >24 months	Class 1* w/90 day E.P.
	Uncontrolled	Postpone 24 months
	History of electroconvulsive shock therapy, multiple hospitalizations, or treatment with an antipsychotic medication	Decline
■	Bronchiectasis: A respiratory disorder with abnormal destruction and widening of the large airways	
	<i>Date of diagnosis?</i>	
	<i>Is applicant taking any medication/inhalers? Name(s)</i>	
	<i>Date of last flare</i>	
	<i>Have pulmonary function tests been performed? Date(s)/Results</i>	
	<i>Has applicant ever used oxygen or steroids? Frequency</i>	
	<i>Has applicant ever been hospitalized for a respiratory disorder? Date(s)/Details</i>	
	<i>Has applicant smoked within the past 12 months?</i>	
	Mild, asymptomatic, treatment-free	Select
	Mild, asymptomatic, treated with <4 medications, normal and stable baseline pulmonary function tests >65% FEV1, >75% FVC	Select
	Moderate, asymptomatic, treated with <4 medications, normal and stable baseline pulmonary function tests, >60% FEV1, >70% FVC	Class 1* w/90 day E.P.
	Moderate-severe, <4 medications, stable baseline pulmonary function tests, >50% FEV1, >60% FVC	Class 2*
	Exacerbation within the last 3 months requiring medication change or oral steroids, complete recovery	Postpone 3 months
	Exacerbation requiring hospitalization, <6 months	Postpone 6 months

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■	Bronchiectasis (continued)	
	Symptomatic, severe, chronic reoccurring infections >3, daily steroid use, multiple hospitalizations, oxygen use, or FEV1 <50%, FVC <60%	Decline
	Smoker	Decline
■	Bronchitis (Chronic): An inflammation of the bronchi, the main air passages in the lungs, which persists for a long period or repeatedly recurs	See Chronic Obstructive Lung Disease
	Buerger's Disease: A chronic circulatory disease that leads to obstruction of the blood vessels of the hands and feet	Decline
	Bulimia: An illness of uncontrolled episodes of overeating, usually followed by self-induced vomiting	Decline
	Bunion: Defined when the big toe angles toward the second toe, resulting in inflammation and pain	Preferred
	Bursitis: An acute or chronic inflammation of the fluid-filled sac (bursa) that lies between tendon and skin or between tendon and bone	Preferred
	Calculi (Renal): A condition in which one or more stones are present in the kidney	Preferred
	Cancer (Internal): An uncontrolled growth of abnormal cells which have mutated from normal tissue <i>All scenarios assume that the following criteria has been met: Surgery and or treatment free (chemotherapy/radiation), with an established post treatment follow-up indicating a complete recovery and no complications. Recovery period starts the date of final treatment.</i>	
	<i>Date of diagnosis?</i>	
	<i>Where was the cancer located?</i>	
	<i>What stage/grade was the cancer?</i>	
	<i>Was there any lymph node involvement? # of nodes involved?</i>	
	<i>Was the cancer diagnosed as metastatic?</i>	
	<i>Is this a recurrent cancer or does the applicant have a history of other cancers? Dates(s)/Details</i>	
	<i>What type of treatment did applicant receive (surgery, x-ray therapy, chemotherapy)? Date completed</i>	
	<i>Any complications or residual problems?</i>	
	Bladder, Stage 0 or I, non-smoke	Select
	Bladder, Stage II, non-smoker	>12 months, Select w/90 day E.P. >24 months, Select
	Bladder, Stage III, non-smoker	>12 months, Select w/180 day E.P. >36 months, Select w/90 day E.P.
	Bladder, Stage IV	Decline
	Bladder, localized recurrence, Stage 0 to II, non-smoker	>36 months, Select w/180 day E.P.
	Breast, Stage 0 or I	<12 months, Select w/90 day E.P. >12 months, Select

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Cancer (continued)		
Breast, Stage IIA or IIB		<24 months, Select w/180 day E.P. >24 months, Select w/90 day E.P.
Breast, Stage IIIA		>12 months, Select w/180 day E.P. >36 months, Select w/90 day E.P.
Breast, Stage IIIB		>24 months, Select w/180 day E.P. >48 months, Select w/90 day E.P.
Breast, Stage IIIC		>24 months, Select w/ 365 day E.P. >60 months, Select w/180 day E.P.
Breast, Stage IV		>60 months, Select w/365 day E.P.
Breast, localized recurrence, Stage 0 to IIA		>36 months, Select w/180 day E.P.
Colon, Stage I		<12 months, Select w/90 day E.P. >12 months, Select
Colon, Stage IIA*		<12 months, Select w/180 day E.P. >12 months, Select w/90 day E.P. >24 months, Select
Colon, Stage IIB or IIIA*		>6 months, Select w/180 day E.P. >24 months, Select w/90 day E.P.
Colon, Stage IIIB or IIIC *		>12 months, Select w/180 day E.P. >36 months, Select w/90 day E.P.
Colon, Stage IV*		>60 months, Select w/180 day E.P.
Colon, localized recurrence, Stage 0 to IIB ⁺ <i>* If treated w/colostomy risk class will be Class I</i>		>24 months, Select w/180 day E.P.
Endometrial, Stage I, surgically treated		Select
Endometrial, Stage II, surgically treated		<24 months, Select w/90 day E.P. >24 months, Select

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Cancer (continued)		
Endometrial, Stage III		>6 months, Select w/365 day E.P. >24 months, Select w/180 day E.P. >36 months, Select w/90 day E.P.
Endometrial, Stage IV		Decline
Endometrial, localized recurrence, Stage I to II		>36 months, Select w/180 day E.P.
Melanoma, Stage 0, I, or In Situ		<12 months, Select >12 months, Preferred
Melanoma, Stage IIA or IIB		<12 months, Select w/180 E.P. >12 months, Select w/90 E.P.
Melanoma, Stage IIC, IIIA, or IIIB		<24 months, Select w/180 day E.P. >24 months, Select w/90 day E.P.
Melanoma, Stage IIIC		>36 months, Select w/180 day E.P.
Melanoma, Stage IV		Decline
Prostate, Stage I or II, stable PSA levels <1.0		<12 months, Select w/90 day E.P. >12 months, Select
Prostate, Stage I or II, Watchful waiting (untreated), 65 or older, stable PSA levels		>24 months, Select w/180 day E.P.
Prostate, Stage III, stable PSA levels <1.0		>6 months, Select w/180 day E.P. >24 months, Select w/90 day E.P.
Prostate, Stage IV, stable PSA levels <1.0		>60 months, Select w/365 day E.P.
Prostate, localized recurrence, Stage I or II, stable PSA levels <1.0		>24 months, Select w/180 day E.P.
Renal, Stage I, non-smoker		<12 months, Select w/90 day E.P. >12 months, Select
Renal, Stage II, non-smoker		<24 months, Select w/180 day E.P. >24 months, Select w/90 day E.P.

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	Cancer (continued)	
	Renal, Stage III, non-smoker	>12 months, Select w/180 day E.P. >36 months., Select w/90 day E.P.
	Renal, Stage IV, non-smoker or smoker any stage	Decline
	Renal, Single recurrence, localized, Stage I or II, non-smoker	>36 months, Select w/365 day E.P.
♥	Cardiomyopathy: A disorder affecting the heart muscle, which usually results in inadequate heart pumping	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has the applicant ever had congestive heart failure or other heart disorders? Date(s)/Details</i>	
	<i>Has an echocardiogram been done? Date/Ejection Fraction?</i>	
	<i>Does the applicant have shortness of breath, fatigue, or weakness? Details</i>	
	Asymptomatic, stable and well controlled, ejection fraction >45%, >12 months	Select
	History of heart transplant, >60 months	Class 1* w/365 day E.P.
	History of congestive heart failure, symptomatic, or ejection fraction <45%	Decline
	Carotid Artery Disease: A circulatory condition characterized by narrowing or stenosis of the carotid artery in the neck	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has the applicant experienced any dizziness, visual disturbances, or weakness?</i>	
	<i>Has there been any history of a TIA (transient ischemic attack) or stroke?</i>	
	<i>What were the results (% of stenosis) of the last carotid study? Date</i>	
	<i>Has the applicant had any carotid surgery? Date(s)/Details</i>	
	<i>Does the applicant have diabetes?</i>	
	<i>Has the applicant smoked within the past 12 months?</i>	
	<i>Does the applicant have any heart or other circulatory problems? Details</i>	
	Mild-moderate stenosis <50%, asymptomatic, no progression, no other circulatory disorders or history of TIA, >12 months	Select
	Mild-moderate stenosis <50%, asymptomatic, no progression, >12 months	Class 1*
	Moderate-moderately severe stenosis 50 -70%, asymptomatic, no progression, no history of TIA, >24 months	Class 2* w/90 day E.P.
	Symptomatic or >70% stenosis	Decline
	Endarterectomy, complete recovery, asymptomatic, no other circulatory disorders or history of TIA, released from care with post-op visit	Select
	Endarterectomy >6 months, symptomatic or with recurrent stenosis	Decline

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	Carotid Artery Disease (continued)	
	Stenosis >25% with Diabetes	Decline
	Tobacco use within the past 12 months	Decline
♥	Carotid Bruit: A murmur heard in the carotid artery in the neck area	
	No underlying circulatory disease, asymptomatic	Preferred
	Underlying circulatory disease	Refer to disease
	Catheter (Urinary): A soft plastic or rubber tube that is inserted into the bladder to drain the urine	
	Short term intermittent catheter, no limitations, non-disabling, independently managed, no underlying neurological disease, >3 months	Class 1*
	Long term indwelling catheter, no limitations, non-disabling, independently managed, no underlying neurological or spinal disease, >3 months	Class 1* w/90 day E.P.
	Utilized due to an underlying disease	Refer to disease
	>2 urinary tract infections with a 12 month period, chronic antibiotic or narcotic pain reliever treatment	Decline
	Requiring assistance with management, limitations, or disabling	Decline
	Cataract: A cloudy or opaque area in the lens of the eye	
	No visual impairment	Preferred
	Surgery anticipated/recommended, no visual impairment	Preferred
	Cerebral Palsy: A group of disorders characterized by loss of movement or loss of other nerve functions	Decline
♥	Cerebral Vascular Disease: A vascular disease of the brain, including abnormalities of the vessels, blood flow, or quality of flow	
	Evidence of white matter changes, small vessel disease, ischemic changes, microvascular changes, infarcts	Decline
	Charcot-Marie-Tooth: A slowly progressive disorder that results in wasting of muscles	Decline
	Chemotherapy: The use of chemical substances to treat disease, primarily cytotoxic drugs used to treat cancer	
	Current use	Decline
	Cholecystectomy: Surgical removal of the gallbladder	Preferred
	Cholecystitis: Inflammation of the gallbladder	Preferred
	Cholelithiasis: The presence of gallstones in the gallbladder	Preferred
●	Chronic Fatigue Syndrome: A condition of excessive fatigue, cognitive impairment and other varied symptoms. The cause is unknown and it may last months or years, causing severe disability.	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has applicant ever been hospitalized for a chronic fatigue related problem? Date(s)/Details</i>	
	<i>Does the applicant experience any weakness, joint pain, or fatigue? Details</i>	
	<i>Does the applicant have any history of Depression or Fibromyalgia? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	New onset, <6 months	Postpone 6 months

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●	Chronic Fatigue Syndrome (continued)	
	Asymptomatic, no limitations, non-disabling, treated with anti-inflammatory medication, >6 months	Select w/90 day E.P.
	Co-existing Fibromyalgia or Depression, asymptomatic, no limitations, non-disabling, >6 months	Class 1*
	Symptomatic, limitations, disabling, or treated with narcotics or steroids	Decline
■	Chronic Obstructive Pulmonary Disease: A respiratory disease process that decreases the ability of the lungs to perform ventilation	
	<i>Date of diagnosis?</i>	
	<i>Is applicant taking any medication/inhalers? Name(s)</i>	
	<i>Date of last flare</i>	
	<i>Have pulmonary function tests been performed? Date(s)/Results (FEV1 & FVC%)</i>	
	<i>Has applicant ever used oxygen or steroids? Frequency?</i>	
	<i>Has applicant ever been hospitalized for a respiratory disorder? Date(s)</i>	
	<i>Has the applicant smoked within the past 12 months?</i>	
	Mild, asymptomatic, treatment-free, seen radiographically	Select
	Mild, asymptomatic, treated with < 4 medications, stable baseline pulmonary function tests with FEV1>65%, FVC>75%	Select
	Moderate, asymptomatic, treated with < 4 medications, stable baseline pulmonary function tests with FEV1>60%, FVC>70%	Class 1* w/90 day E.P.
	Moderate to severe, < 4 medications, stable baseline pulmonary function tests with FEV1>50%, FVC>60%	Class 2* w/90 day E.P.
	Exacerbation in the last 3 months requiring medication change or oral steroids	Postpone 3 months
	Exacerbation requiring hospitalization, <6 months	Postpone 6 months
	Symptomatic, severe, daily steroid use, multiple hospitalizations, oxygen use, FEV1 <50%, FVC <60%	Decline
	Moderate to severe with currently treated congestive heart failure or cardiomyopathy	Decline
	Smoker, with current or previous treatment, symptoms, or other respiratory disorders	Decline
	Cirrhosis: A chronic liver disease where the liver is scarred and no longer functions properly	Decline
	Cirrhosis (Primary Biliary Cirrhosis): An inflammation of the bile ducts resulting in narrowing and obstruction of the flow of bile, causing damage to the liver cells	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has the applicant had a liver biopsy? Date(s)</i>	
	<i>Does the applicant use alcohol?</i>	
	<i>What were the results of the last blood workup (ALT, AST, Alk Phos, GGT)? Date</i>	
	Normal and stable liver function tests, asymptomatic, >12 months	Class 1*
	Abnormal liver function tests or symptomatic	Decline
	Colitis (excluding ulcerative): Inflammation of the large intestine	Preferred

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	Confusion: Not being aware of or oriented to time, place, or person	
	Asymptomatic, now resolved with normal neuropsychological workup, >12 months	Preferred
	Current or etiology unknown	Decline
	Normal neuropsychological workup with abnormal MRI/CT	Decline
♥	Congestive Heart Failure: A condition where the heart loses its ability to pump blood efficiently	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has the applicant ever been diagnosed with Cardiomyopathy or any other heart disorder? Details</i>	
	<i>Does the applicant have any respiratory disorders? Details</i>	
	<i>Does the applicant experience any shortness of breath or swelling of the lower extremities? Details</i>	
	<i>Has the applicant been hospitalized for any heart or respiratory disorders? Date(s)/Details</i>	
	Single event, asymptomatic, treatment-free, ejection fraction >45%, >6 months	Select w/90 day E.P.
	Chronic, symptomatic, severe, or recurrent	Decline
	History of Cardiomyopathy	Decline
♥	Cor Pulmonale: Enlargement or failure of the right ventricle due to pulmonary hypertension	Decline
	Corneal Impairment: An impairment affecting the cornea, the curved transparent covering at the front of the eye	
	No vision loss	Preferred
	Transplant, no vision impairment, released from care with post-op visit	Preferred
♥	Coronary Artery Disease: Narrowing of the coronary arteries that supply blood to the heart	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has the applicant been hospitalized for any heart or circulatory disorders? Date(s)/Details</i>	
	<i>Has applicant undergone heart surgery? Date(s)/Details</i>	
	<i>Does the applicant smoke?</i>	
	<i>Does the applicant have any other heart or circulatory disorders? Details</i>	
	<i>Does the applicant have diabetes?</i>	
	With diagnosis of Diabetes and >25% stenosis in any artery	Decline
	Asymptomatic, <75% stenosis in any artery with a follow-up visit showing stability	Select w/90 day E.P.
	Angioplasty/stent, <75% stenosis in any artery, complete recovery, asymptomatic with a post-op visit showing a complete recovery	Select
	Angioplasty/stent now symptomatic or with limitations	Decline
	Bypass surgery, asymptomatic, <75% stenosis in any artery, asymptomatic with a post-op visit showing a complete recovery	Select
	Single heart attack, asymptomatic, <75% stenosis in any artery, with follow-up visit showing complete recovery and stability	Select w/90 day E.P.

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
♥	Coronary Artery Disease: (continued)	
	Asymptomatic, <75% stenosis in any artery, Smoker	Class 1* w/90 day E.P.
	Multiple heart attacks (3 or more) or uncontrolled with recurring symptoms	Decline
	Stenosis >75% or ejection fraction <40%	Decline
	CREST Syndrome: A diffuse connective tissue disease characterized by changes in the skin, blood vessels, skeletal muscles, and internal organs	Decline
	Crohn's Disease: A chronic inflammatory disease that can affect any part of the gastrointestinal tract	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)/Dosage</i>	
	<i>Date of last flare</i>	
	<i>Has the applicant ever been hospitalized or had surgery performed (colostomy, colectomy)? Date(s)/Details</i>	
	<i>Is the applicant disabled or experience limitations? Details</i>	
	<i>Does the applicant experience problems with continence?</i>	
	New onset or recent exacerbation/flare, <6 months	Postpone 6 months
	Asymptomatic and treatment-free, >6 months	Select
	Asymptomatic, medically managed, no flares, no limitations, non-disabling, >24 months	Select
	Medically managed with occasional flares, no limitations, non-disabling, >6 months	Class 1* w/90 day E.P.
	Chronic steroid therapy ≤7.5mg per day, no evidence of osteoporosis, asymptomatic, no limitation, non-disabling, >12 months	Class 1* w/90 day E.P., 3 year B.P.
	Colostomy, complete recovery, no limitations, non-disabling, independent management, >6 months	Class 1* w/90 day E.P.
	Chronic treatment with frequent flares, severe, end stage, multiple surgeries, weight loss, or fecal incontinence	Decline
	Chronic steroid use >7.5mg per day or ≤7.5mg with evidence of Osteoporosis	Decline
	Crutches: Current use	Decline
	Cushing's Syndrome: An endocrine disorder caused by prolonged exposure of the body's tissues to the hormone cortisol, or by excessive use of cortisol or other steroid hormones	
	Medically managed, stable and asymptomatic, no evidence of osteoporosis, >12 months	Class 1*
	Benign adrenal tumors, pituitary adenomas, or ectopic ACTH Syndrome, surgically removed, complete recovery, asymptomatic, treatment-free, >12 months	Select
	Symptomatic with evidence of muscle weakness, chronic fatigue, or recurring infections.	Decline
	Chronic steroid therapy with evidence of osteoporosis	Decline
	Cystic Fibrosis: An inherited disease that affects the respiratory and digestive systems	Decline
	Cystitis: An infection or inflammation of the urinary bladder or urethra	Preferred
	Cyst (Benign): A closed sac or pouch of tissue which can be filled with air, fluid, pus, or other material	Preferred
	Cystocele: A bladder hernia that protrudes into the vagina	Preferred

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
♥	Defibrillator (Internal cardioverter defibrillator – ICD): A device used to treat life-threatening arrhythmias. It continually tracks a person's heart rate, and can correct an abnormally fast heart beat with a defibrillatory shock and/or antitachycardia pacing.	
	Asymptomatic, no limitations, with follow-up visit showing complete recovery and stability	Select
♥	Deep Venous Thrombosis (DVT): A condition where there is a blood clot in a deep vein	
	<i>Date of the event</i>	
	<i>Is the applicant on any medication? Name(s)</i>	
	<i>Has the applicant been hospitalized? Date(s)</i>	
	<i>How many total clots/embolisms has the applicant had? Date(s)</i>	
	<i>Has the applicant had a Greenfield Filter implanted? Date</i>	
	<i>Does the applicant have any circulatory or respiratory disorders?</i>	
	<i>Is the applicant disabled or experience any limitations?</i>	
	Single DVT, complete recovery, no underlying blood disorder or limitations, < 6 months	Postpone 6 months
	Single DVT, complete recovery, no underlying blood disorder or limitations, > 6 months	Select
	<3 DVT's within past 60 months, complete recovery, no limitations or underlying blood disorder, >12 months since last clot	Class 1*
	Single DVT with concurrent Pulmonary Embolism in past 60 months, > 6 months	Class 1*
	Greenfield Filter implant, no further events, complete recovery, no limitations, >6 months	Class 1*
	> 3 DVT's, functional limitations, or complications	Decline
	DVT or PE due to Polycythemia Vera, Essential Thrombocythemia, Thrombophilia, or Secondary Thrombocytosis	Decline
●	Degenerative Disc Disease: The gradual deterioration of the disc between the vertebrae	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has any testing been performed (X-ray, MRI, or CAT scan)? Date(s)/Results</i>	
	<i>What is the severity (mild, moderate, severe)?</i>	
	<i>Has the applicant ever undergone any back surgery? Number/Date(s)</i>	
	<i>Has the applicant undergone any physical therapy or injections? Date(s)/Details</i>	
	<i>Does the applicant experience any pain, numbness or tingling in the legs or arms? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	Mild, asymptomatic, no prior treatment	Preferred
	Mild, well controlled, no limitations, non-disabling, treated with non-prescription or prescription medications	Select
	Moderate, successful completion of Physical Therapy or 1st time treatment with steroid injections, asymptomatic, high functioning with no limitations	Select w/90 day E.P.
	Moderate, successful completion of Physical Therapy, mild neck or back pain, no evidence of radiculopathy or related symptoms to the extremities, no limitations, high functioning	Class 1* w/90 day E.P.
	Moderate, status post injection(s), mild neck or back pain, no evidence of radiculopathy or related symptoms to the extremities, no limitations, high functioning, > 6 months	Class 1* w/90 day E.P.

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●	Degenerative Disc Disease (continued)	
	< 70 years old: Single spinal surgery, Physical Therapy successfully completed, no evidence of radiculopathy or related symptoms to the extremities, no limitations, high functioning, must have had an established post-operative follow-up indicating a complete recovery & no complications	Select
	< 70 years old: 2nd spinal surgery, complete recovery, no limitations, Physical Therapy successfully completed, no evidence of radiculopathy or related symptoms to the extremities, moderate to high functioning, > 6 months (recovery period starts after surgery completed)	Select w/90 day E.P.
	≥ 70 years old: Surgically treated, complete recovery, no limitations, Physical Therapy successfully completed, no evidence of radiculopathy or related symptoms to the extremities, moderate to high functioning, > 6 months (recovery period starts after surgery completed)	Select w/90 day E.P.
	Daily narcotic pain relievers, chronic pain resulting in limitations or disability, gait or balance issues, radiculopathy or related symptoms to the extremities	Decline
	Surgery recommended, or use of assistive devices, or multiple spinal surgeries (3 or more), or use of a Dorsal Column Stimulator (DCS)	Decline
●	Degenerative Joint Disease: A chronic musculoskeletal disease causing deterioration of the joint cartilage and the formation of new bone at the margins of the joints	Refer to Osteoarthritis
	Dementia: Cognitive deficit, including memory impairment	Decline
*	Depression: A mental disorder marked by altered mood	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Names(s)</i>	
	<i>Has this been diagnosed as situational?</i>	
	<i>Has the applicant ever been hospitalized for depression, anxiety, or other mental illness? Date(s)/Details</i>	
	<i>Has the applicant ever received electroconvulsive shock therapy?</i>	
	<i>Does applicant have any history of anxiety or other mental illness disorders? Details</i>	
	Single episode or situational, recovered, asymptomatic, treatment-free, >6 months	Preferred
	Treated with <4 medications, well controlled, no limitations, non-disabling, >3 months	Select
	Single hospitalization for situational depression, well controlled, no limitations, non-disabling	>6 months, Class 1* >12 months, Select
	Multiple hospitalizations, treatment with an antipsychotic, disabling, or unstable	Decline
	Dermatitis: A skin inflammation	Preferred
	Detached Retina: A condition where the retina becomes completely or partially detached	
	Successfully surgically treated, complete recovery, no residual complications, or blindness	Preferred
	Legally blind, completely independent, no limitations, >24 months	Class 1* w/90 day E.P., 3 year B.P.
♥	Diabetes: A lifelong disease of high blood sugar caused by too little insulin, resistance to insulin, or both	
	<i>Date of diagnosis?</i>	
	<i>What type of diabetes does the applicant have (Juvenile, Type I, Type II)?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Is the applicant taking any insulin? Type, units/day</i>	

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	CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
♥	Diabetes (continued)	
	<i>Does the applicant have any history of circulatory or heart disorders? Details</i>	
	<i>Does the applicant smoke?</i>	
	<i>What is the applicant's most recent glycohemoglobin A1c reading? Date</i>	
	<i>Does the applicant have any history of neuropathy (numbness, pain, or tingling of the extremities), nephropathy (kidney complications), or retinopathy (visual complications)? Details</i>	
	<i>Has the applicant had any amputations? Details</i>	
	Uncontrolled or new onset with A1c >8.0	Postpone 6 months
	Treated with diet, oral medications, and or insulin <50 units, A1c <7.0	Select
	Treated with diet, oral medications, and or insulin <50 units, A1c 7.0 to 7.5	Class 1*
	Treated with diet, oral medications, and or insulin <50 units, A1c 7.6 to 8.0	Class 2*
	History of nephropathy, blindness, amputation, neuropathy, or neuropathic ulcers	Decline
	History of TIA, or carotid artery disease >25%, or peripheral vascular disease >25%, or coronary artery disease >25% in any vessel, or multiple circulatory conditions with any level of stenosis	Decline
	Diagnosed as Juvenile, Type 1, or brittle	Decline
	Background Retinopathy, untreated, or more than 2 laser treatments, or A1c readings > 7.0	Decline
	Background Retinopathy, successfully treated with < 3 laser treatments, A1c < 7.0, >3 months	Class 1* w/90 day E.P.
	History of Maculopathy, Pre-Proliferative or Proliferative Retinopathy	Decline
	Tobacco use within past 12 months	Decline
	Single surgery to treat coronary, peripheral or carotid disease (e.g.: Bypass, Endarterectomy, Angioplasty), complete recovery, asymptomatic, <25% stenosis in any artery, A1c <7.0, >12 months	Class 1* w/90 day E.P.
	Multiple surgeries to treat coronary, peripheral, or carotid artery disease treated with multiple surgeries (e.g.: Bypass, Endarterectomy, Angioplasty), or with an A1c >7.0	Decline
	Diverticulitis: An inflammation of an abnormal pouch in the intestinal wall, usually found in the colon	
	Well controlled, asymptomatic, medically or diet managed	Preferred
	Single hospitalization, complete recovery, asymptomatic with follow-up release visit	Preferred
	<3 Surgical procedures, complete recovery, asymptomatic with post-op visit	Select
	Diverticulosis: An asymptomatic, abnormal pouch in the intestinal wall	Preferred
	Down's Syndrome: A chromosome abnormality resulting in moderate to severe mental retardation and other abnormalities	Decline
*	Drug Abuse/Dependency: Use of any habit-forming or illegal drug (i.e., marijuana, cocaine) for purposes other than those for which it is normally intended, or in a manner or quantities other than directed	
	Drug-free, no limits to activities, >24 months	Select
	Ongoing drug use or cognitive impairment	Decline
●	Dupuytren's Contracture: A painless thickening and contracture of tissue beneath the skin on the palm of the hand	Preferred
	Dwarfism: Abnormally short stature with abnormal body proportions, caused by a deficiency of growth hormone	Decline

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	Dyspepsia: Imperfect or painful digestion (indigestion)	Preferred
	Dysphagia: Inability or difficulty swallowing	Refer to underlying cause
	Edema: Excessive build-up of fluid in the tissues, or an increase in tissue mass	Refer to underlying cause
	Ehlers-Danlos Syndrome: An inherited disorder of the elastic connective tissue	Decline
■	Emphysema: A lung disease which involves damage to the air sacs in the lungs	Refer to Chronic Obstructive Pulmonary Disease
♥	Endocarditis: Inflammation of the lining membrane of the heart	
	Acute, single episode, <6 months	Postpone 6 months
	Single episode, treatment-free, complete recovery, >6 months	Select
	Recurrent episodes	Decline
	Epstein-Barr: The virus responsible for infectious mononucleosis and is associated with the development of non-Hodgkin's lymphoma in patients with immune compromise	
	Complete recovery, no residuals or complications, >24 months	Select
	Esophagitis: Inflammation of the esophagus	Preferred
	Esophageal Stricture: A narrowing of the esophagus, causing swallowing difficulties	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has the applicant undergone any dilations? Date(s)</i>	
	<i>Has the applicant ever been hospitalized for an esophageal disorder? Date(s)/Details</i>	
	Single dilation within a 12 month period, asymptomatic, no dysphagia, stable weight, with follow-up visit	Select
	2 to 3 dilations within a 12 month period, asymptomatic, stable weight, no dysphagia, with follow-up visit, >6 months	Class 1* or Select w/180 day E.P.
	Multiple or frequent need for dilations, symptomatic, or unstable weight	Decline
	Esophageal Varices: A dilation of an esophageal vein	Decline
	Fatty Liver: An accumulation of fat within the liver cells	
	Asymptomatic, treatment-free, normal liver function tests, occasional or no alcohol use	Select
	Abnormal liver function tests or daily alcohol use	Decline
	Feeding Tube: A medical device used to provide nutrition to individuals who cannot do so via the normal oral route	
	Current	Decline
	Felty's syndrome: A disorder characterized by rheumatoid arthritis, an enlarged spleen, a decreased white blood cell count, and recurrent infection	Decline
	Fibrocystic Breast Disease: Common, benign breast changes	Preferred
●	Fibromyalgia: Chronic pain in muscles and soft tissues surrounding joints	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	

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●	Fibromyalgia (continued)	
	<i>Has applicant ever been hospitalized for any condition related to the Fibromyalgia? Date(s)</i>	
	<i>Does the applicant experience any weakness, joint pain, or fatigue? Details</i>	
	<i>Does the applicant have any history of Depression, Anxiety, or Chronic Fatigue syndrome? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	New onset or recent flare, <6 months	Postpone 6 months
	Asymptomatic, treatment-free	Select
	Asymptomatic, mild, treated with a single medication	Select
	Asymptomatic, mild, treated with 2-3 medications	Class 1*
	Co-existing Chronic Fatigue Syndrome or Depression, asymptomatic, no limitations, non-disabling, >6 months	Class 1*
	Symptomatic, chronic fatigue, pulmonary compromise, disabling or resulting in limitations	Decline
	Treated with chronic oral steroids or narcotic pain relievers	Decline
	Fissure/Fistula (Anal): A linear ulcer on the margin of the anus	Preferred
	Foot Drop: Foot weakness or paralysis	Refer to underlying cause
	Forgetfulness: Inability to remember something previously known or learned	
	Current or etiology unknown	Decline
	Asymptomatic, now resolved w/normal neuropsychological workup, >12 months	Select
	History of forgetfulness consistent w/age	Decline
	Normal neuropsychological workup w/abnormal MRI/CT indicating atrophy	Decline
●	Fractures: Sudden breaking of a bone	
	<i>What was the date of the fracture(s)?</i>	
	<i>What bone(s) were affected?</i>	
	<i>What was the cause of the fracture(s)?</i>	
	<i>Does the applicant have any history of osteoporosis? T-Score/Date</i>	
	<i>Did the applicant require PT? Dates(s)</i>	
	<i>Has the applicant fully recovered from the fracture and been released from care?</i>	
	<i>Does the applicant use any type of assistive device (i.e., cane, walker, brace)? Details</i>	
	<i>Is the applicant disabled or experience any limitations?</i>	
	Non-weight bearing traumatic fracture(s) (wrist, finger, arm, toe), complete recovery, treatment free, normal range of motion, non-disabling, no limitations or history of osteoporosis	Preferred
	Weight-bearing traumatic fracture(s) (hip, femur, pelvis, tib-fib, humerus), complete recovery, treatment free, normal range of motion, non-disabling, no limitations or history of osteoporosis with release from physicians care	Preferred
	Chronic non-healing fracture(s), evidence of osteomyelitis, use of assistance devices, chronic pain, limitations, treatment with narcotic pain relievers, or resulting in disability	Decline
	Gallstones: Calculus formed in the gallbladder or bile ducts	Preferred

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	Gastric Bypass/Stapling/Banding: Surgical alteration of the stomach	
	Asymptomatic, complete recovery, no limitations, <24 months	Postpone 24 months
	Asymptomatic, complete recovery, no limitations, >24 months	Select
	Due to disease	Refer to disease
	Gastritis: An inflammation of the lining of the stomach	
	Controlled with medical management	Preferred
	Glaucoma: A condition of increased pressure inside the eye	
	No visual impairment	Preferred
	Progressive vision loss or hospitalization for complications of blindness	Decline
	Glomerulonephritis: A group of kidney diseases caused by inflammation of the internal kidney structures	
	<i>Date of diagnosis?</i>	
	<i>Was condition diagnosed as Acute or Chronic? Details</i>	
	<i>What type of treatment did the applicant receive? Details</i>	
	<i>Has the applicant ever undergone dialysis? Date</i>	
	<i>Has the applicant ever been hospitalized for kidney problems? Date(s)/Details</i>	
	<i>What were the results of the last blood workup (Creatinine, BUN)? Date</i>	
	Acute, complete recovery, normal kidney function tests, no kidney damage	Select
	Chronic, abnormal kidney function tests, or treated with dialysis	Decline
	Glucose Intolerance: A state of blood sugar control that is abnormal but not diagnosed as Diabetes	Refer to Diabetes
	Goiter: Enlargement of the thyroid gland that is not associated with inflammation or cancer	Preferred
	Gout: A disease marked by uric acid deposits in the joints, causing painful arthritis especially in the joints of the feet and legs	
	Well controlled on diet or single medication	Preferred
	Well controlled on 2 medications	Select
	Severe recurrent flares	Decline
	Graves' Disease: Over activity of the thyroid gland	Preferred
	Guillain-Barre Syndrome: A disorder involving progressive muscle weakness or paralysis	
	Complete recovery, no residuals or recurrence, >24 months	Select
	Chronic or relapsing symptoms, residual weakness, muscle atrophy, limitations or disabling	Decline
	Hearing Impairment: Decreased ability to hear	Preferred
♥	Heart Attack: A condition when an area of heart muscle dies or is damaged because of an inadequate supply of oxygen to that area	Refer to Coronary Artery Disease
♥	Heart Block: A condition in which the signal from the heart's upper to lower chambers is impaired or doesn't transmit	
	First-degree AV Block, asymptomatic, treatment-free, no underlying cardiac conditions	Preferred
	Second-degree AV Block, asymptomatic, no underlying cardiac conditions	Select

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♥	Heart Block (continued)	
	Third-degree AV Block, asymptomatic, no underlying cardiac conditions, medically treated or with successful pacemaker implant with follow-up visit	Select
	Symptomatic with episodes of shortness of breath, dizziness, syncope, or ejection fraction <40%	Decline
♥	Heart Valve Disease: The heart valves can malfunction either by leaking (valve regurgitation) or by failing to open adequately (valve stenosis); either problem can seriously interfere with the heart's ability to pump blood	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>Has the applicant ever been hospitalized for a heart or circulatory disorder? Date(s)/Details</i>	
	<i>Has valvular surgery been performed? Date(s)/ Details</i>	
	<i>When was the last echocardiogram performed? Results</i>	
	<i>Does the applicant have other heart or circulatory problems? Details</i>	
	<i>Does the applicant experience any shortness or breath or limitations? Details</i>	
	Mild, asymptomatic, treatment-free	Preferred
	Moderate, asymptomatic	Class 1*
	Moderate-severe, asymptomatic, ejection fraction >40%	Class 2* w/90 day E.P.
	Severe, symptomatic, surgery recommended, or associated with atrial septal defect	Decline
	Valve replaced, repaired, reconstructed, asymptomatic, >6 months	Select
	Valve replacement with re-stenosis	Decline
♥	Heart Murmur: An abnormal sound in the heartbeat	
	Functional, no treatment	Preferred
	Hematuria: Blood in the urine	Refer to underlying cause
	Hemochromatosis: A genetic disease that results in excess iron deposits throughout the body	
	<i>Date of diagnosis?</i>	
	<i>When was the applicant's last phlebotomy?</i>	
	<i>Does the applicant have any joint, liver, or pancreatic problems? Details</i>	
	<i>What were the results of the last blood workup? Date</i>	
	New onset or abnormal blood studies, <6 months	Postpone 6 months
	Asymptomatic, stable with near normal blood studies, on maintenance phlebotomy	Select
	Complications, organ or joint involvement, or abnormal blood studies	Decline
	Hemophilia: A hereditary bleeding disorder in which it takes a long time for the blood to clot and abnormal bleeding occurs	
	Mild hemophilia, no history of spontaneous bleeding or use of replacement factor therapy outside of surgery/trauma indication, asymptomatic, no indication of severe anemia, >12 months	Class 1* w/90 day E.P.
	Mild hemophilia, no history of spontaneous bleeding or use of replacement factor therapy outside of surgery/trauma indication, asymptomatic, no indication of severe anemia, >24 months	Select

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Hemophilia: (continued)		
Recurrent episodes of bleeding, or evidence of severe anemia, or requiring frequent blood transfusions		Decline
Moderate or severe hemophilia		Decline
Hepatitis: An inflammation of the liver		
<i>Date of diagnosis?</i>		
<i>What type of Hepatitis?</i>		
<i>What type of treatment has the applicant received? Date(s)/Details</i>		
<i>Has the applicant ever been hospitalized? Date(s)/Details</i>		
<i>What were the results of the last blood workup? Date</i>		
<i>Does the applicant use alcohol? Frequency/Amount</i>		
Type A, stable normal liver function studies, in remission and treatment-free, >3 months		Select
Type B, stable normal liver function studies, in remission and treatment-free, >3 months		Select
Type C, successful treatment completed, stable normal liver function studies, >12 months		Select
Type C, untreated		Decline
Chronic, active, currently treated, abnormal liver functions studies or autoimmune		Decline
Hernia: The protrusion of an organ or a part of an organ through the wall of the cavity that normally contains it		Preferred
Herniated Disc: A disc that, due to use, injury or disease, bulges outside its normal area, causing pain and limiting function		Refer to Degenerative Disc Disease
Herpes Zoster: An acute, localized infection, causing painful blistering eruptions		Preferred
HIV (Human Immunodeficiency Virus): The virus that affects the immune system and causes the disease known as AIDS		Decline
Hodgkin's Disease: A malignancy found in the lymph nodes, spleen, liver, and bone marrow		
<i>Date of diagnosis?</i>		
<i>What stage has the applicant been diagnosed with?</i>		
<i>What type of treatment has the applicant received?</i>		
<i>Has there been any recurrence? Date(s)</i>		
<i>What was the date of the last treatment?</i>		
<i>Is applicant in complete remission?</i>		
Stage I and II, complete remission, stable-normal blood studies, asymptomatic, treatment-free, >12 months		Select w/180 day E.P.
Stage III and IV, complete remission, stable-normal blood studies, asymptomatic, treatment-free, >36 months		Class 1* w/90 day E.P. or Select w/180 day E.P.
Treated with Bone Marrow Transplant or Peripheral Stem Cell Transplant, stable-normal blood studies, asymptomatic, no complications or limitations, >60 months		Class 1* w/180 day E.P.
Recurrent Hodgkin's Disease (less than 3 occurrences), successfully treated, stable-normal blood studies, asymptomatic, no complications or limitations, >60 months		Class 1* w/180 day E.P.
Home Health Care Services: Current		Decline

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
	Hunter's Syndrome: A hereditary disease that causes a characteristic facial appearance and abnormal function of multiple organs	Decline
	Huntington's Disease: An inherited condition characterized by abnormal body movements, dementia, and psychiatric problems	Decline
	Hydrocephalus: A disorder associated with excessive fluid in the brain	Decline
♥	Hypercholesterolemia: An excessive amount of cholesterol in the blood	
	Total cholesterol ≤ 240 , no underlying circulatory disorders	Preferred
	Total cholesterol > 240	Select
♥	Hypertension/White Coat Syndrome: Higher than normal blood pressure	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>What is the applicant's last three blood pressure readings? Date(s)</i>	
	<i>Has the applicant ever been hospitalized for hypertension or hypertensive complications? Date(s)/Details</i>	
	<i>Does the applicant have any other heart or circulatory problems? Details</i>	
	<i>Does the applicant have any kidney problems? Details</i>	
	New onset, current reading 135/85 to 140/90	Select
	Average readings $< 135/85$	Preferred
	Average readings 135/85 to 160/90	Select
	Average reading $> 160/90$	Postpone 3 months
	Poor medical compliance	Postpone 3 months
	Chronically uncontrolled, $> 160/90$	Decline
	Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone	Preferred
	Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone	Preferred
	Hysterectomy (non-cancerous): Surgical removal of the uterus	Preferred
	Idiopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet counts resulting from platelet destruction by the immune system	
	<i>Date of diagnosis?</i>	
	<i>What type of treatment has the applicant received? Date(s)/Details</i>	
	<i>Is the applicant taking any steroids? Dosage</i>	
	<i>Has the applicant ever had a splenectomy? Date</i>	
	<i>Has the applicant ever been hospitalized for a blood related disorder? Date(s)/Details</i>	
	<i>Has there been any progressive weight loss? Details</i>	
	<i>What was the applicant's last platelet count? Date</i>	
	Mild ITP with no underlying disorder, asymptomatic, treatment free, stable and well controlled with platelet count between $> 80K$, > 12 months	Select w/90 day E.P.

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	Idiopathic Thrombocytopenia Purpura (ITP) (continued)	
	Successfully treated with splenectomy, no history of recurrent infections, normal platelets >150K	Select
	Chronically abnormal clotting time, or frequent bleeding, or current treatment, or platelets <80K	Decline
	Incontinence: The inability to retain urine or feces	
	<i>Type of incontinence (stress, urge urinary, bowel)</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>Has the applicant undergone surgery? Date(s)</i>	
	<i>Has the applicant been advised to have surgery? Details</i>	
	<i>Does the applicant require the use of protective undergarments? Details</i>	
	Stress or urge (urinary), well-controlled, self managed	Preferred
	Due to disease	Refer to disease
	Fecal	Decline
	Intravenous (IV) Treatments: The administration of a drug or fluid directly into a vein	
	Current	Decline
	Irritable Bowel Disease: A condition of abnormally increased, spontaneous movement of the small and large intestine	
	Quiescent, stable, medically managed	Preferred
	Severe, end-stage, multiple surgeries, or weight loss	Decline
●	Joint Replacement: The replacement of a joint	
	Treatment-free, no assistive devices, >3 months	Select
	Ongoing PT, limited activity or use of assistance devices	Decline
	Kidney Failure: Failure of the kidney to perform its essential functions	Decline
	Kidney Stones: A condition in which one or more stones are present in the kidney or the urethra	Preferred
	Kidney Transplant: A surgical procedure where a healthy kidney is implanted into a person with kidney disease or failure	
	Asymptomatic, normal renal function studies, >36 months	Class 1*
	Symptomatic, abnormal renal function blood studies, or renal failure	Decline
	Labyrinthitis: An ear disorder involving inflammation of the canals of the inner ear, resulting in dizziness	
	Stable, well controlled with medications	Preferred
	Evidence of neurological symptoms or hospitalization, <6 months	Postpone 6 months

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	Leukemia: A malignancy of the blood-forming cells in the bone marrow	
	<i>Date of diagnosis?</i>	
	<i>What type of leukemia does applicant have? Stage?</i>	
	<i>What type of treatment did applicant receive (surgery, radiation therapy, chemotherapy)?</i>	
	<i>What was the date of the last treatment?</i>	
	<i>Is the applicant in complete remission? Date</i>	
	<i>What were the results of the last blood workup? Date</i>	
	<i>Has there been any recurrence? Date(s)/Details</i>	
	<i>Any complications or residual problems? Details</i>	
	CLL Stage 0 and I, stable normal blood studies, asymptomatic, treatment-free, <12 months	Postpone 12 months
	CLL Stage 0 and I, stable normal blood studies, asymptomatic, treatment-free, >12 months	Select w/90 day E.P.
	CLL Stages II, new onset or abnormal blood studies, <24 months	Postpone 24 months
	CLL Stage II, normal blood studies, treatment-free, >24 months	Class 1* w/90 day E.P.
	CLL Stage III and IV, <48 months	Decline
	CLL Stage III and IV, normal blood studies, treatment-free, >48 months	Class 1* w/180 day E.P.
	Hairy Cell, normal blood studies, treatment free, <24 months	Postpone 24 months
	Hairy Cell, normal blood studies, treatment free, >24 months	Select w/180 day E.P.
	Acute lymphocytic or acute / chronic myelogenous, complete remission, no clinical evidence of disease, normal blood studies, treatment-free, >60 months	Class 1* w/90 day E.P.
	Acute lymphocytic or acute / chronic myelogenous with abnormal blood studies or under treatment	Decline
	Any stage successfully treated with bone marrow or stem cell transplant, >60 months	Class 2* w/180 day E.P.
	Recurrence or relapse any stage or type	Decline
	Lou Gehrig's Disease: A disorder causing progressive loss of control of muscles due to destruction of nerve cells in the brain and spinal cord	Decline
●	Lumbar Strain/Sprain: A sudden stressful injury to the lower back, causing stretching or tearing of the muscle, tendons, or ligaments of the lower back	
	Stable with non-steroidal anti-inflammatories, no history of PT or underlying spinal disorders	Preferred
	Symptoms of paresthesia, weakness, wasting, or currently undergoing PT	Postpone 6 months
	Lupus (Systemic Lupus Erythematosus): A chronic, inflammatory auto-immune disorder that may affect organ systems including the skin, joints, and internal organs	Decline
	Lupus (Discoid): A chronic disease of the skin characterized by remissions and exacerbation of a scaling, red, macular rash	
	<i>Date of diagnosis?</i>	
	<i>Has a skin biopsy been performed? Results</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	New onset or diagnosis, <12 months	Postpone 12 months
	Firm diagnosis, no treatment with oral medications, >12 months	Select

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Lyme Disease: A multi-system disorder caused by bacteria transmitted by a tick	Asymptomatic, no limitations, treatment-free, no neurological or cardiac involvement, >24 months	Preferred
	Asymptomatic, no limitations, treatment-free, no neurological or cardiac involvement, <24 months	Select
	Symptomatic, neurological, or cardiac impairment	Decline
Lymphedema: Swelling that occurs due to a lymphatic obstruction (a blockage of the lymph vessels, which drain fluid from tissues throughout the body)	Primary lymphedema, no ulcerations, non-disabling, no limitations	Select
	Current or recurrent ulcerations, multiple prescriptions (>2), limitations or disabling	Decline
Lymphoma: A usually malignant lymphoid tumor or growth		Refer to Non-Hodgkins Lymphoma
Macular Degeneration: A disorder that affects the macular (the central part of the retina) causing decreased visual acuity and possible loss of central vision		
	<i>Date of diagnosis?</i>	
	<i>Are both eyes involved?</i>	
	<i>Is there any vision loss? Details</i>	
	<i>Has there been any progression of vision loss? Details</i>	
	<i>Is the applicant legally blind? How long?</i>	
	<i>Does the applicant utilize any assistance or assistance device(s)? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	New diagnosis, <12 months	Postpone 12 months
	One eye, non-progressive, independent with no limitations, >12 months	Select
	One eye, progressive, independent with no limitations, >12 months	Class 1*
	Bilateral, no deterioration in vision, independent with no limitations, >12 months	Select
Macular Degeneration (continued)		
	Progressive visual loss, disabling, or with limitations	Decline
	Legally blind, completely independent, no limitations >24 months	Class 1* w/90 day E.P., 3 year B.P.
Macular Hole: An abnormal opening which forms in the center of the macular over weeks to months		Refer to Macular Degeneration
* Major Depression: A recurrent emotional state characterized by feelings of persistent sadness, worthlessness, rejection, loss of hope, and loss of interest in usual activities		Refer to Bipolar
Marfan Syndrome: A hereditary disorder of the connective tissues that affects the skeletal system, cardiovascular system, eyes, and skin		Decline
Marie Strumpell Disease: A disease of the connective tissue that results in the inflammation of the joints in the spine known as Ankylosing Spondylitis		Refer to Ankylosing Spondylitis

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Memory Loss: The inability to remember or recall bits of information or behavioral skills	Current or etiology unknown	Decline
	Asymptomatic, now resolved w/normal neuropsychological workup, >12 months	Select
	History of benign memory loss, now resolved w/normal neuropsychological workup, >12 months	Select
	History of memory loss consistent with age	Decline
	Normal neuropsychological workup w/abnormal MRI/CT indicating atrophy	Decline
Meniere's Disease: A disorder of the inner ear characterized by abnormal sensation of movement, loss of hearing in one or both ears, or noises and ringing	Mild, stable, treatment-free or single medication	Preferred
	Mild, stable on 2 medications	Select
	Diagnosis and treatment underway, hospitalization, or neurological symptoms	Postpone 6 months
Meningitis: An infection which causes inflammation of the membranes covering the brain and spinal cord	Completely recovered, treatment-free, >12 months	Select
	Active, chronic, or current treatment	Decline
Meningioma: A tumor of the protective lining of the brain and spinal cord which is usually benign, some may be malignant	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>How many meningiomas does applicant have?</i>	
	<i>When was the last MRI or brain scan performed? Results</i>	
	<i>Has the meningioma been surgically removed or radiated? Date</i>	
	<i>Any problems with balance, dizziness, falls, paresthesia, or seizures? Details</i>	
	Single tumor, benign, <12 months	Postpone 12 months
	Single tumor, benign, asymptomatic, non-progressive, no neurological deficits or limitations, >12 months	Select
	Single tumor, benign, successfully removed surgically or radiated, asymptomatic, no re-growth, no neurological deficit or complications, >12 months	Select
Menopausal Symptoms: Symptoms that occur during menopause, such as hot flashes, skin flushing, and mood changes	Treated with a single anti-depressant with no prior diagnosis of depression	Preferred
	Diagnosis of depression prior to menopausal symptoms, treated with an antidepressant	Select
Mental Retardation: Below average general intellectual function with associated deficits in adaptive behavior that occurs before age 18		Decline

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	Migraine (infrequent, non-debilitating, single medication): A disorder involving repeated or recurrent headaches, associated with temporary changes in the diameter of the blood vessels in the head	
	Infrequent, non-debilitating, single medication	Preferred
	Well controlled on 2–3 medications	Select
	Migraine with auras, temporary blindness, asphasia or paresthesia, single episode within past 5 years	Class 1* w/90 day E.P.
	Migraine with auras, temporary blindness, asphasia or paresthesia, 2 or more episodes within past 5 years	Decline
	Ocular Migraine, with evidence of cerebrovascular disease	Decline
♥	Mitral Valve Prolapse: A heart disorder in which the mitral heart valve does not close properly, allowing blood to leak into the left atrium	
	Asymptomatic, treatment-free	Preferred
	Asymptomatic, treated with single medication	Select
	Mixed Connective Tissue Disease (MCTD): An overlap of three connective tissue diseases — Systemic Lupus Erythematosus, Scleroderma, and Polymyositis	Decline
	Monoclonal Gammopathy: A blood disorder where there is a presence of abnormal protein in the blood	
	New diagnosis, <24 months	Postpone 24 months
	Asymptomatic, treatment-free, no progression, >24 months	Select w/180 day E.P. or Class 1*
	Multiple Myeloma: A cancer of the bone marrow	Decline
*	Multiple Personalities: A state in which two or more personalities alternate in the same individual, usually with each personality unaware of the other	Decline
	Multiple Sclerosis: A disorder of the central nervous system involving decreased nerve function associated with the formation of scars on the covering of nerve cells	Decline
	Muscular Dystrophy: A group of disorders characterized by progressive weakness and loss of muscle tissue	Decline
	Myasthenia Gravis: A disorder characterized by chronic muscle weakness of voluntary muscles	Decline
	Myasthenia Gravis (Ocular): A disorder characterized by chronic muscle weakness that affects the eye muscles in particular	
	New onset, <24 months	Postpone 24 months
	Asymptomatic, treatment-free, no deterioration in vision, no limitations, >24 months	Class 1*
	Myopia: A defect in visual focusing resulting in farsightedness	Preferred
	Narcolepsy: A sleep disorder associated with uncontrollable sleepiness and frequent daytime sleeping	
	Asymptomatic and controlled, >6 months	Select
	Recent onset, flare of symptoms, hospitalization, or injury, or disability secondary to narcoleptic episode	Decline

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Neurogenic Bladder: A urinary bladder problem in which there is abnormal emptying of the bladder; it may empty spontaneously or may not empty at all		
<i>Date of diagnosis?</i>		
<i>Is the applicant taking any medication? Name(s)</i>		
<i>Does the applicant use a catheter at any time? Frequency</i>		
<i>Does the applicant experience urinary tract infections? Frequency</i>		
<i>Has the applicant ever been hospitalized for bladder related problems? Date(s)/Details</i>		
<i>Does the applicant require the use of protective undergarments?</i>		
Completely independent, no limitations or complications, non-disabling, >12 months		Select
Independent use of catheter >12 months, <2 urinary tract infections within a 12 month period		Class 1* w/90 day E.P.
>2 urinary tract infections within a 12 month period, or chronic antibiotic or narcotic pain reliever treatment		Decline
Neuropathy: A disease of the nerves		
<i>Date of diagnosis?</i>		
<i>What is the cause of the neuropathy?</i>		
<i>Is the applicant taking any medication? Name(s)</i>		
<i>Does the applicant have diabetes, circulatory, or back problems?</i>		
<i>Does the applicant use any assistive devices (i.e., cane, walker, brace)?</i>		
<i>Is the applicant disabled or experience any limitations</i>		
Etiology unknown, new onset, or workup underway, <6 months		Postpone 6 months
Mild, non-limiting, non-progressive, treatment-free, >6 months		Select
Mild, non-limiting, non-progressive, on medication, >6 months		Class 1*
Progressive, uncontrolled, use of adaptive devices, balance problems, or falls		Decline
Related to disease		Refer to disease
Polyneuropathy		Decline
Non-Hodgkin's Lymphoma: A cancer of the immune system whereby cells in lymph nodes abnormally reproduce which eventually leads to tumors that spread throughout the body		
Stage I and II, new onset or diagnosis, <12 months		Postpone 12 months
Stage I and II, complete remission, stable-normal blood studies, asymptomatic, treatment-free >12 months		Select w/180 day E.P. or Class 1* w/90 day E.P.
Mycosis Fungoides/Cutaneous T-Cell Lymphoma, complete remission, treatment-free >24 months		Select w/180 day E.P. or Class 1* w/90 day E.P.
Stage III and IV, new onset or diagnosis, <48 months		Postpone 48 months
Stage III and IV, complete remission, stable-normal blood studies, asymptomatic, treatment-free, >48 months		Select w/180 day E.P. or Class 1* w/90 day E.P.
Treated with Bone Marrow Transplant or Peripheral Stem Cell Transplant, stable-normal blood studies, asymptomatic, >60 months		Class 1* w/180 day E.P.
Recurrent lymphoma, <3 occurrences, successfully treated, stable-normal blood studies, asymptomatic, treatment-free, >60 months		Class 1* w/180 day E.P.

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	Nursing Home Services: A licensed facility with three or more beds that provides nursing or personal care services to the older population, infirm, or chronically ill	
	Current	Decline
*	Obsessive Compulsive Disorder: An anxiety disorder characterized by the presence of obsessions or compulsions	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>Has the applicant ever been hospitalized? Date(s)</i>	
	<i>Is the applicant disabled or experience any limitations? Describe</i>	
	<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details?</i>	
	New onset or uncontrolled, <6 months	Postpone 6 months
	Asymptomatic, non-disabling, no limitations, <3 medications, >6 months	Select
	Chronic, uncontrolled, limited activities, or disabling	Decline
	Occupational Therapy: Skilled treatment that assists individuals to relearn physical skills that were lost as a result of an accident or illness	
	Current	Decline
	Organic Brain Syndrome: Any of a large group of acute and chronic mental disorders associated with brain damage or impaired cerebral function	Decline
●	Osteoarthritis: A chronic musculoskeletal disease causing deterioration of the joint cartilage and the formation of new bone at the margins of the joints	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>What joints are affected?</i>	
	<i>What is the severity (mild, moderate, severe)?</i>	
	<i>Has the applicant received any steroid or Synvisc injections? Date(s)</i>	
	<i>Has the applicant had any orthopedic surgeries or has any been recommended? Date(s)/Details</i>	
	<i>Has the applicant undergone any PT? Date(s)/Results</i>	
	<i>Does the applicant use any assistive devices (i.e., cane, walker, brace)?</i>	
	Non-weight bearing extremities, mild, treatment free, asymptomatic	Preferred
	Weight-bearing extremities, mild, treatment free, asymptomatic	Select
	Mild, treated with anti-inflammatory medication	Select
	Mild to moderate, current or recommended Physical Therapy, full range of motion, no limitations, no prior injections or surgery	Select
	Moderate, treated with <4 viscosupplement injections (Synvisc) within a 12 month period, asymptomatic, no limitations, no assistive devices	Select w/90 day E.P.
	Moderate, treated with steroid injection(s), asymptomatic, no limitations, no assistive devices	Select w/90 day E.P.
	History of joint replacement, treatment-free, no assistive devices, established post treatment follow-up indicating a complete recovery and no complications	Select

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●	Osteoarthritis (continued)	
	Severe or with surgery recommended	Decline
	Symptomatic with limitations, use of an assistance device, or disabling	Decline
	Treated with chronic narcotic pain relievers, recurrent PT or multiple steroidal injections	Decline
●	Osteomyelitis: An acute or chronic bone infection	
	Asymptomatic, complete recovery, no limitations, >6 months	Select
	Symptomatic or residuals	Decline
●	Osteopenia: A thinning of the bones, typically the stage before true osteoporosis	
	Preventative treatment, asymptomatic	Preferred
	With single related fracture, asymptomatic, no limitations, non-disabling, >12 months	Class 1* w/90 day E.P.
●	Osteoporosis: The progressive loss of bone density and thinning of bone tissue	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>What were the T-score(s) of the last bone density study? Date</i>	
	<i>Has the applicant had any bone or spinal fractures? Date(s)/Details</i>	
	<i>Does the applicant have degenerative disc disease or scoliosis? Details</i>	
	<i>Does the applicant smoke?</i>	
	<i>What type of exercise does the applicant engage in? Frequency</i>	
	Mild to Moderate, weight-bearing location (pelvis, hip, spine), stable total bone density (-2.5 to -3.5) under acceptable treatment, non-smoker, no related fractures, no diagnosis of Rheumatoid Arthritis treated w/steroids or Methotrexate	Select
	Mild to Moderate, weight-bearing location (pelvis, hip, spine), stable total bone density (-2.5 to -3.5) not receiving acceptable treatment, or smoker, or diagnosed with Rheumatoid Arthritis treated w/steroids or Methotrexate	Class 1*
	1 related fracture complete recovery, Mild to Moderate stable total bone density studies (-2.5 to -3.5), under acceptable treatment, non-smoker, no diagnosis of Rheumatoid Arthritis treated w/steroids or Methotrexate, >12 months	Class 1* w/90 day E.P.
	1 related fracture complete recovery, Mild to Moderate stable total bone density studies (-2.5 to -3.5), not receiving acceptable treatment, or smoker, or diagnosed with Rheumatoid Arthritis treated w/steroids or Methotrexate, >24 months	Class 2* w/90 day E.P.
	Moderate to Severe weight-bearing location (pelvis, hip or spine), stable total bone density studies (-3.6 to -4.0) under appropriate treatment, non-smoker, no related fractures, no diagnosis of Rheumatoid Arthritis treated w/steroids or Methotrexate	Class 1* w/90 day E.P.
	Moderate to severe, weight-bearing location (pelvis, hip, spine), stable total bone density studies (-3.6 to -4.0), not receiving appropriate treatment, or related fractures, or smoker, or diagnosed with Rheumatoid Arthritis treated w/steroids or Methotrexate	Decline
	Severe, non-weight-bearing location (wrist, forearm) stable bone density studies (>-4.0), under appropriate treatment, non-smoker, no fractures, no diagnosis of Rheumatoid Arthritis treated w/steroids or Methotrexate	Class 1*

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
●	Osteoporosis (continued)	
	Severe, non-weight-bearing location (wrist, forearm) stable bone density studies (>-4.0), not receiving appropriate treatment, or related fractures, or smoker, or diagnosed with Rheumatoid Arthritis treated w/steroids or Methotrexate	Decline
	Severe Wt bearing location (pelvis, hip, or spine) with stable total bone density studies (-4.0 to 4.5), under appropriate treatment, no fractures, non-smoker, no diagnosis of Rheumatoid Arthritis treated w/steroids or Methotrexate, active	Class 2* w/180 day E.P., 3 year B.P.
	Severe weight bearing location (pelvis, hip, or spine) with stable total bone density studies (-4.0 to 4.5), not receiving appropriate treatment, or related fractures, or smoker, or diagnosed with Rheumatoid Arthritis treated w/steroids or Methotrexate	Decline
	Oxygen: Current use	Decline
♥	Pacemaker: An implantable battery-powered implantable device that electrically stimulates the heart to contract	
	Asymptomatic, no limitations, with follow-up visit	Select
●	Paget's Disease: A metabolic bone disease that involves bone destruction and re-growth that results in deformity	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant receiving any treatment? Details</i>	
	<i>What location is affected?</i>	
	<i>Have there been any fractures? Date(s)/Details</i>	
	<i>What were the results of the last blood workup (Alkaline Phosphate level)?</i>	
	<i>Does the applicant experience any bone pain? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	Of breast	Refer to Cancer (Breast)
	Of bone, seen radiographically, asymptomatic, no limitations, normal Alkaline Phosphate levels, >12 months	Select
	History of fracture, complete recovery, asymptomatic, normal Alkaline Phosphate levels, no limitations, >24 months	Select
	Active, evidence of fractures with bone pain, or elevated Alkaline Phosphate levels	Decline
	Pancreatitis: An inflammation or infection of the pancreas	
	<i>Date of diagnosis?</i>	
	<i>Was the Pancreatitis acute or chronic?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>Has the Pancreatitis completely resolved?</i>	
	<i>What were the results of the last blood workup? Date</i>	
	New onset, <6 months	Postpone 6 months
	Acute, complete recovery, asymptomatic, >6 months	Select
	Chronic, active, or abnormal blood studies	Decline

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
✱	Panic Disorder: Repeated, unpredictable attacks of intense fear, accompanied by severe anxiety symptoms in the body that may last from minutes to hours	
	<i>Date of diagnosis?</i>	
	<i>Is applicant taking medication? Name(s)</i>	
	<i>Has there been any change in treatment over the past 6 months? Details</i>	
	<i>Has applicant ever been hospitalized for a panic disorder or any other type of mental illness disorder? Date(s)/Details</i>	
	<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	New onset, treatment-free, no limitations or follow-up recommended	Preferred
	Well controlled on <4 medications, no limitations, non-disabling, >3 months	Select
	Symptomatic, uncontrolled, resulting in limitations or disability, or multiple emergency room visits	Decline
	Paralysis/Paresis: Temporary suspension or permanent loss of function, especially loss of sensation or voluntary motion	
	Single partial limb, due to trauma, no limitations, >12 months	Class 1* w/90 day E.P.
	Two limbs, complete single limb	Decline
	Due to disease	Decline
	Paraplegia: Paralysis of the lower portion of the body and of both legs	Decline
	Parkinson's Disease: A chronic nervous disease characterized by a fine, slowly spreading tremor and difficulty with walking, movement, and coordination	Decline
♥	Paroxysmal Supraventricular Tachycardia: A rapid heart rhythm that occurs inside the atria and occurs sporadically	
	Asymptomatic, treatment-free, no underlying cardiac conditions	Preferred
	Asymptomatic, treated with single medication	Select
	Successful pacemaker implant, asymptomatic with follow-up visit	Select
	Symptomatic, or ejection fraction <40%	Decline
♥	Pericarditis: Inflammation of the pericardium, the sac covering the heart	
	Acute, single episode, <6 months	Postpone 6 months
	Single episode, treatment-free, complete recovery, >6 months	Select
	Recurrent episodes	Decline
♥	Peripheral Vascular Disease: A circulatory disease of the peripheral blood vessels that is characterized by narrowing and hardening of the arteries that supply blood to the legs and feet	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>Has the applicant smoked within the past 12 months?</i>	
	<i>Does the applicant have any symptoms of claudication, cramping, or pain in the lower extremities? Details</i>	
	<i>Has the applicant had leg surgery or has any been recommended? Date(s)/Details</i>	

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
♥	Peripheral Vascular Disease (continued)	
	<i>Does the applicant have diabetes, heart or other circulatory problems? Details</i>	
	<i>Has the applicant experienced any lower extremity skin changes, swelling, or ulcers? Date(s)/Details</i>	
	Mild, asymptomatic, no claudication or limitations, good pulses	Select
	Mild, under treatment with a single medication, asymptomatic, no claudication or limitations, good pulses	Select
	Surgically treated, complete recovery, asymptomatic, no claudication or limitations, good pulses, >6 months	Select
	With claudication, ulcerations, absent pulses, or history of amputation	Decline
	Tobacco use, <12 months	Decline
	>25% stenosis with diagnosis of Diabetes	Decline
	Physical Therapy: Rehabilitation concerned with the restoration of function and the prevention of disability following disease, injury, or loss of a body part	
	Current treatment for bursitis, tendonitis, carpal tunnel syndrome, or a non-weight bearing fracture	Preferred
	Current treatment for degenerative disc disease, spinal stenosis, or osteoarthritis	Refer to disease
	Pituitary Tumor: A growth that arises in the pituitary gland	
	Benign, asymptomatic, stable with no growth, monitored annually, <12 months	Postpone 12 months
	Benign, stable, treatment-free, >12 months	Preferred
	Benign, successfully removed surgically or treated with radiation therapy, complete recovery, asymptomatic, no limitations or residual complications, >6 months	Select
	Progressive growth, symptomatic, or recommended surgery or radiation therapy	Decline
	Pneumonia: An inflammation of the lungs caused by an infection	
	Complete recovery, asymptomatic, no underlying respiratory disorders	Preferred
	Polycystic Kidney Disease: An inherited kidney disorder that enlarges the kidneys and interferes with their function because of multiple cysts on the kidneys	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>What were the results of the last blood kidney profile (Creatinine, BUN)? Date</i>	
	<i>Has surgery been recommended? Details</i>	
	<i>Has the applicant ever received dialysis? Details</i>	
	Normal kidney function studies, no kidney damage or limitations	Select
	Abnormal kidney function studies, progressive, or with surgery recommended	Decline
	Polycythemia Vera: A blood disorder characterized by abnormal increase in red blood cells resulting from increased blood cell production by the bone marrow	
	<i>Date of diagnosis?</i>	
	<i>Is applicant taking any medications? Name(s)</i>	
	<i>When was the applicants last phlebotomy?</i>	
	<i>Has the applicant every had a transient ischemic attack, blood clot, or gastrointestinal bleed? Details</i>	

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
	Polycythemia Vera (continued)	
	<i>Does the applicant have any ongoing fatigue or anemia? Details</i>	
	<i>Has there been any indication of progression to Leukemia? Details</i>	
	New onset or abnormal blood studies (elevated RBC, hemoglobin, hematocrit, platelets or WBC)	Postpone 12 months
	Successfully treated with maintenance phlebotomies and normal blood studies, >12 months	Select
	Successfully treated with splenectomy, normal blood studies, no history of recurrent infections	Select
	Treated with maintenance phlebotomies and Hydrea, Agrylin or antiplatelet medication, normal blood studies	Class 1* w/90 day E.P.
	Neurological complaints, chronic fatigue, weight loss, or progression to Leukemia	Decline
	History of Transient Ischemic Attack (TIA), stroke, blood clots, splenomegaly or hepatomegaly, or Budd-Chiari syndrome	Decline
	With current smoking	Decline
●	Polymyalgia Rheumatica: A disorder of unknown cause, usually afflicting persons over the age of 50, involving pain and stiffness in the hip and shoulder area	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)/Dosage</i>	
	<i>When was the last flare? Date</i>	
	<i>Does the applicant have any osteoarthritis or back disorders? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	New onset, recent flare, <12 months	Postpone 12 months
	Asymptomatic, in remission and treatment-free, >6 months	Select
	Asymptomatic, well controlled on chronic steroid therapy <7.5mg daily, no evidence of osteoporosis, <6 months	Class 1*
	Symptomatic, daily narcotic use, muscle weakness or wasting	Decline
●	Polymyositis: A systemic connective tissue disease, characterized by inflammation and degeneration of the muscles	
	Asymptomatic, in remission, treatment-free, >12 months	Select
	Active, chronic steroid therapy, currently undergoing PT or OT, or muscle weakness or wasting	Decline
	Polyyps (Benign): A growth that projects, usually on a stalk; commonly found in vascular organs such as the nose, uterus, colon, and rectum	Preferred
	Post Polio Paralytic Syndrome: A variety of musculoskeletal symptoms and muscular atrophy that create new difficulties with activities of daily living 25 to 30 years after the original attack of acute paralytic poliomyelitis	Decline
*	Post Traumatic Stress Syndrome (PTSS): A psychiatric illness that can occur following a psychologically traumatic event that is generally outside the range of usual human experience	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)</i>	
	<i>Has the applicant been hospitalized for PTSS or any other mental illness disorder? Date(s)/Details</i>	
	<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details</i>	

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✱	Post Traumatic Stress Syndrome (PTSS) (continued)	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	New onset, well controlled and stable with no medical treatment or follow-up recommended	Preferred
	Well controlled on <4 medications, no limitations, non-disabling, >3 months	Select
	Symptomatic, uncontrolled, or resulting in limitations or disability	Decline
♥	Premature Atrial Contractions (PACs): An early or premature heartbeat originating from the atria	
	Asymptomatic, no underlying cardiac condition, treatment-free	Preferred
	Asymptomatic, treated with single medication	Select
♥	Premature Ventricular Contractions (PVCs): An early or premature heartbeat originating from the ventricle	
	Asymptomatic, no underlying cardiac condition, treatment-free	Preferred
	Asymptomatic, treated with single medication	Select
	Prolapsed Bladder: Falling or sliding of the bladder from its normal position	Preferred
	Prostatic Hypertrophy (Benign): A non-malignant enlargement of the prostate due to excessive growth of prostatic tissue	Preferred
	Prostatism: Any condition of the prostate that interferes with the flow of urine from the body	Preferred
●	Psoriatic Arthritis: Arthritis associated with psoriasis	Refer to Rheumatoid Arthritis
✱	Psychosis: A general term referring to a loss of contact with reality	Decline
♥ ■	Pulmonary Embolism (PE): A blockage of an artery in the lungs by a blood clot or an unknown substance	
	<i>Date of the event?</i>	
	<i>Is the applicant on any medication? Name(s)</i>	
	<i>Has the applicant been hospitalized? Date(s)</i>	
	<i>How many total clots/embolisms has the applicant had? Date(s)</i>	
	<i>Has the applicant had a Greenfield Filter implanted? Date</i>	
	<i>Does the applicant have any circulatory or respiratory disorders or complications?</i>	
	<i>Is the applicant disabled or experience any limitations?</i>	
	Single Pulmonary Embolism, complete recovery, no underlying blood disorder, > 6 months	Select
	< 3 Pulmonary Embolisms within past 60 months, complete recovery, no limitations and no underlying blood disorder, > 12 months since last clot	Class 1*
	Single DVT with concurrent Pulmonary Embolism in past 60 months, > 6 months	Class 1*
	Greenfield filter implant, no recurrence of clot since inserted, complete recovery and no limitations, > 6 months	Class 1*
	DVT or Pulmonary Embolism due to Polycythemia Vera, Essential Thrombocythemia, Secondary Thrombocytosis, or Thrombophilia	Decline
	Pulmonary Fibrosis: A respiratory condition of unknown cause, characterized by scarring, thickening, and inflammation of the deep lung tissues	
	Localized, incidental finding on chest x-ray, normal pulmonary function tests, no underlying respiratory disease, >6 months	Select

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■	Pulmonary Fibrosis (continued)	
	Hospitalization or respiratory problems, <6 months	Postpone 6 months
	Hospitalization or exacerbation, complete recovery, asymptomatic, stable baseline pulmonary function tests >65% FEV1, >75% FVC, >6 months	Select
	Hospitalization or exacerbation, complete recovery, asymptomatic, stable baseline pulmonary function tests >60% FEV1, >70% FVC, >6 months	Class 1* w/90 day E.P.
	Symptomatic, chronic steroid therapy, oxygen use or heart failure	Decline
♥	Pulmonary Hypertension: A chronic and deadly disease characterized by increased pulmonary pressure and right-sided heart failure	
	Incidental finding by echocardiogram, asymptomatic, treatment-free, pulmonary pressure <40%	Select
	Symptomatic, under treatment, or pulmonary pressure >40%	Decline
	Quadriplegia: Paralysis of all four extremities and usually the trunk, caused by injury to the spinal cord	Decline
	Quad Cane: A cane that has a broad base on four short "feet"	
	Current	Decline
	Radiation Therapy: Treatment that kills malignant cells and shrinks tumors by utilizing high-dose x-rays or other high energy rays	
	Current	Decline
	Raynaud's Phenomenon: Sporadic attacks of blood vessel spasms resulting in interruption of blood flow to the fingers, toes, ears, and nose, caused by exposure to the cold or strong emotions	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>Does the applicant have any history of Lupus, Scleroderma, or Connective Tissue Disease? Details</i>	
	<i>Has the applicant had any amputations? Date(s)/Details</i>	
	Asymptomatic, treatment-free	Preferred
	Stable, treated with <3 medications, no systemic involvement or limitations	Select
	Treated with 3 or more medications	Decline
	Rectocele: Protrusion or herniation of the posterior vaginal wall with the anterior wall of the rectum through the vagina	
	Asymptomatic	Preferred
	With fecal incontinence	Decline
■	Reflex Sympathetic dystrophy (RSD): A pain syndrome caused by an abnormal sympathetic nervous reflex. This gives rise to a pain response that is out of proportion to, and inconsistent with the injury.	Decline
■	Respirator: A machine to aid with breathing	
	Current use	Decline
■	Respiratory Infection: An infection occurring in the organs involved in breathing	
	Acute event, no underlying pulmonary disease	Preferred

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	Restless Leg Syndrome: A sleep disorder characterized by leg discomfort during sleep, which is only relieved by frequent movements of the legs	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>Does the applicant have sleep apnea?</i>	
	New onset, well controlled on single medication	Select
	Well controlled on 2 medications	Class 1*
	Treated with >2 medications	Decline
	Retinitis Pigmentosa: A progressive degeneration of the retina in the eye that affects night vision and peripheral vision	
	New onset, <12 months	Postpone 12 months
	One eye, non-progressive, >12 months	Select
	Bilateral, no deterioration in vision, completely independent, >12 months	Class 1*
	Progressive visual loss, or existing neurological symptoms	Decline
	Legally blind, completely independent, no limitations, >24 months	Class 1* w/90 day E.P., 3 year B.P.
●	Rheumatoid Arthritis: A chronic, inflammatory, systemic disease that primarily affects the joints and surrounding tissues but also affects other organ systems within the body	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication? Name(s)/Dosage</i>	
	<i>Is the RA classified as juvenile or was it diagnosed prior to age 25?</i>	
	<i>Does the applicant have any joint swelling or limited range of motion? Details</i>	
	<i>Does the applicant have joint deformities? Details</i>	
	<i>Has the applicant had any joint repair or replacement? Date(s)/Details</i>	
	<i>Has the applicant had to have any joints aspirated to remove fluid? Date(s)/Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	Asymptomatic, normal range of motion, treatment-free, no assistance devices or joint replacement, no limitations, non-disabling	Select
	Asymptomatic, on non-steroidal maintenance medications, no joint deformities or limitations	Select w/90 day E.P.
	Asymptomatic, on chronic steroid therapy, ≤5 mg daily, no limitations, non-disabling	Class 1* w/90 day E.P.
	Asymptomatic, 2–3 flares per year on non-steroidal maintenance medications and steroid taper only, >6 months	Class 2* w/90 day E.P.
	History of joint replacement, treatment-free, no assistance devices, no limitations, non-disabling, >6 months	Select w/90 day E.P.
	History of joint replacement, on non-steroidal maintenance medications, no assistance devices or limitations, non-disabling, >6 months	Class 1* w/90 day E.P.
	Asymptomatic, on non-steroidal maintenance medications (i.e., Plaquenil, MTX) with chronic steroid treatment	Decline

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●	Rheumatoid Arthritis (continued)	
	Symptomatic, severe or multiple joint deformities, multiple joint replacements (>2), limitations, disabling, or current PT or OT	Decline
	Juvenile diagnosis	Decline
■	Sarcoidosis: A disease of unknown cause in which inflammation consisting of granulomas occurs in lymph nodes, lungs, liver, eyes, skin, and other tissues	
	<i>Date of diagnosis?</i>	
	<i>What areas of the body are affected?</i>	
	<i>Is the applicant taking any medication? Name(s)</i>	
	<i>If lung involvement, have pulmonary function tests been performed? Date/Results (FEV1 & FVC%)</i>	
	New onset, <12 months	Postpone 12 months
	Asymptomatic, no complications or limitations, treatment-free, if lung involvement baseline pulmonary function tests, FEV1 >65%, FVC >75%, >12 months	Select
	Multiple sites, under treatment, symptomatic, or with limitations	Decline
*	Schizophrenia: A group of psychotic disorders characterized by disturbances in thought, perception, affect, behavior, and communication lasting longer than 6 months	Decline
	Schwannoma: A benign tumor situated in the hearing canal	
	<i>Has the neuroma been removed? Date</i>	
	<i>Has there problems with balance or falls? Details</i>	
	<i>Has there been any seizure activity? Date of last seizure?</i>	
	<i>Is applicant taking any medication? Name(s)</i>	
	<i>Is the applicant receiving physical therapy?</i>	
	Surgically removed, complete recovery, no seizures or residuals other than hearing loss	Preferred
	Present neuroma, current seizure activity, balance disturbance or falls, or inoperable tumors	Decline
●	Sciatica: A condition involving impaired movement and/or sensation in the leg, caused by damage to the sciatic nerve	
	Asymptomatic, normal range of motion, treatment-free >12 months	Preferred
	Scleroderma: A diffuse connective tissue disease characterized by changes in the skin, blood vessels, skeletal muscles, and internal organs	Decline
	Scleroderma Morphea: A localized form of scleroderma that affects the skin with no internal organ involvement	
	Localized to the skin w/biopsy confirmation, no internal organ involvement, no oral medications	Preferred
●	Scoliosis: A lateral (away from the middle) or sideways curvature of the spine	
	<i>Is the applicant on any medication? Name(s)</i>	
	<i>Does the applicant have osteoporosis? T-Score?</i>	
	<i>Has the applicant undergone any physical therapy? Date</i>	
	<i>Has the applicant had any back surgeries performed? Date(s)/Details</i>	

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●	Scoliosis: (continued)	
	<i>What is the severity (mild, moderate, severe)?</i>	
	<i>Does applicant have any associated pulmonary problems?</i>	
	Mild, asymptomatic and treatment-free, >6 months	Preferred
	Mild, symptomatic, on prescription medication	Select
	Moderate, treated with <3 medications, asymptomatic, no limitations, non-disabling	Select
	Moderate, status post Physical Therapy or steroid injection(s), <6 months	Postpone 6 months
	Moderate, status post Physical Therapy or injections(s), asymptomatic, no limitations, non-disabling, >6 months	Select w/90 day E.P.
	Moderate, status post-Physical Therapy, mildly symptomatic, no limitations, non-disabling, >6 months	Class 1*
	Moderate, status post-injections, mildly symptomatic, no limitations, non-disabling, >6 months	Decline
	Mild to moderate with osteoporosis of the spine, stable bone density studies (-3.1 to -3.5), no compressions fractures or limitations, asymptomatic, non-disabling	Class 1*
	With osteoporosis of the spine, stable bone density studies (>-3.5) or with compression fracture(s)	Decline
	Severe, with limitations or any pulmonary compromise, multiple surgeries, or disabling	Decline
	Scooter: Current use	Decline
	Seizure Disorder: A sudden violent, uncontrollable contraction of a group of muscles	
	<i>Date of diagnosis?</i>	
	<i>When was the applicant's last seizure?</i>	
	<i>What type of seizures does applicant have?</i>	
	<i>What is the cause?</i>	
	<i>Is the applicant on any medication? Name(s)</i>	
	<i>Has the applicant had a recent EEG and/or MRI? Date, Results</i>	
	New onset or episode, <12 months	Postpone 12 months
	Well controlled, seizure-free, normal EEG/MRI, >12 months	Select
	Ongoing or uncontrolled seizure activity	Decline
	Shunt: A surgically placed tube designed to divert excess cerebrospinal fluid from the brain and carry it to other parts of the body. It usually sits outside the skull, but beneath the skin, behind the ear.	Decline
	Shy-Drager Syndrome: A degenerative disorder characterized by progressive damage to the autonomic nervous system, muscle tremor and rigidity, and other widespread neurological losses	Decline
♥	Sick Sinus Syndrome: A form of bradycardia in which the sinoatrial node (the heart's natural pacemaker) is not functioning properly	
	Successful pacemaker implant, asymptomatic with follow-up visit	Select
	Symptomatic with episodes of syncope or near-fainting, shortness of breath, dizziness, weakness, or ejection fraction <40%	Decline
	Sickle Cell Anemia: An inherited chronic blood disease in which the red blood cells function abnormally and break down, causing recurrent painful episodes	Decline

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
♥	Sinus Bradycardia: Abnormally slow sinus rhythm	
	Asymptomatic, treatment-free, no underlying cardiac condition	Preferred
	Successful pacemaker implant, asymptomatic with follow-up visit	Select
	Symptomatic with episodes of syncope or near fainting, shortness of breath, dizziness, or ejection fraction <40%	Decline
♥	Sinus Tachycardia: A fast rhythm (more than 100 beats per minute) originating at the sinus node	
	Asymptomatic, treatment-free, no underlying cardiac condition	Preferred
	Successful pacemaker implant, asymptomatic with follow-up visit	Select
	Symptomatic with episodes of syncope or near fainting, shortness of breath, dizziness, or ejection fraction <40%	Decline
	Sjogren's Syndrome: A systemic, inflammatory disorder characterized by dry mouth, decreased tearing, and other mucous membranes often associated with auto-immune rheumatic disorders	
	Asymptomatic, treatment-free	Preferred
	Well controlled and stable, treated with <3 medications, no systemic involvement	Select
	Due to disease	Refer to disease
■	Sleep Apnea: Repeated, prolonged episodes of cessation of breathing during sleep	
	<i>Date of diagnosis?</i>	
	<i>Does the applicant require the use of CPAP or BIPAP?</i>	
	<i>Does the applicant require the use of supplemental oxygen with their breathing device?</i>	
	<i>Have pulmonary function tests been performed? Date and results (FEV1 and FVC%)</i>	
	<i>Does the applicant have any other respiratory conditions? Details</i>	
	<i>Does the applicant smoke? Frequency</i>	
	Mild, treatment compliance, stable pulmonary function tests	Select
	Respiratory compromise or failure, non-compliance, or oxygen use	Decline
	Social Security Disability Benefits: A federal assistance program for disabled people who have paid Social Security taxes or are dependents of people who have paid	
	Currently receiving	Decline
	Spastic Colon: A condition of abnormally increased spontaneous movement of the small and large intestine, generally exacerbated by emotional stress	Preferred
	Speech Therapy: The corrective or rehabilitative treatment of physical and/or cognitive deficits/disorders resulting in difficulty with verbal communication	
	Currently receiving	Decline
●	Spina Bifida: A congenital disorder where the backbone and spinal cord do not close before birth	Decline
●	Spina Bifida (Occulta): The least dangerous form of spina bifida, in which bones in the spine fail to close but there is no protrusion of the spinal cord or its fluid cushion out of the body	
	Asymptomatic and treatment-free since diagnosis	Select
	Spinal Cord Injury: An injury to the spinal cord	Decline

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
●	Spinal Stenosis: A narrowing of the lumbar or cervical spine canal, which causes compression on nerve roots	
	Mild, asymptomatic, no prior treatment	Preferred
	Mild, well controlled, no limitations, non-disabling, treated with non-prescription or prescription medication	Select
	Moderate, successful completion of PT, asymptomatic, high functioning with no limitations	Select w/90 day E.P.
	Moderate, successful completion of Physical Therapy, mild neck or back pain, no evidence of radiculopathy or related symptoms to the extremities, no limitations and high functioning	Class 1* w/90 day E.P.
	Moderate, status post steroid injections, no evidence of radiculopathy or related symptoms to the extremities, no limitations, < 6 months	Postpone 6 months
	Moderate, status post steroid injections, no evidence of radiculopathy or related symptoms to the extremities, no limitations, > 6 months	Select w/90 day E.P.
	< 70 years old: Single spinal surgery, Physical Therapy successfully completed, no evidence of radiculopathy or related symptoms to the extremities, no limitations, high functioning, must have had an established post operative follow-up indicating a complete recovery and no complications	Select
	< 70 years old: 2nd spinal surgery, complete recovery, no limitations, Physical Therapy successfully completed, no evidence of radiculopathy or related symptoms to the extremities, moderate to high functioning, > 6 months	Select
	≥ 70 years old: Surgically treated, complete recovery, no limitations, Physical Therapy successfully completed, no evidence of radiculopathy or related symptoms to the extremities, moderate to high functioning, > 6 months	Select w/90 day E.P.
	Diagnosed as severe, daily narcotic pain relievers, chronic pain resulting in limitations or disability, current gait or balance issues, radiculopathy or related symptoms to the extremities	Decline
	Surgery recommended, use of assistive devices, or multiple spinal surgeries (3 or more), or use of a Dorsal Column Stimulator (DCS)	Decline
●	Spondylolisthesis: Forward slippage of a lumbar vertebra on the vertebra below it	Refer to Degenerative Disc Disease
	Squamous Cell Carcinoma (disease- and treatment-free): A malignant skin tumor involving the middle portion of the epidermal skin layer	
	Localized to the skin w/biopsy confirmation, no internal organ involvement	Preferred
	Of an internal organ	Refer to Cancer (Internal)
	Stairlift: A mechanical device which transports people up and down stairs	
	Current use	Decline
♥	Stroke (CVA): Occurs when the blood supply to any part of the brain is interrupted, resulting in the death and loss of brain function and tissue	Decline
	Subdural Hematoma: A collection of blood on the surface of the brain	
	New onset, <12 months	Postpone 12 months
	Complete recovery, no limitations or cognitive deficits, >12 months	Select
	Diagnosed as chronic, with limitations or cognitive deficit	Decline
	Surgery: Recommended or anticipated minor or day surgery recommended for hernia, gallbladder, cataracts, or bunions	Preferred

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
Syncope: A transient loss of consciousness due to inadequate blood flow to the brain		
<i>Date of diagnosis?</i>		
<i>What is the cause of the syncope?</i>		
<i>What type of work-up has the applicant undergone?</i>		
<i>Is the applicant receiving any treatment? Details</i>		
<i>How many episodes has the applicant had?</i>		
<i>Does the applicant have any heart or neurological disorders?</i>		
Benign, vasovagal per work-up		Preferred
Due to disease		Refer to disease
Unknown etiology or recurring episodes		Decline
Tendonitis: Inflammation of a tendon		Preferred
Tennis Elbow: Inflammation of the muscles of the forearm, or their tendons near the origin on the humerus (bone of the upper arm)		Preferred
Thrombocythemia (Essential or Secondary Thrombocytosis): A blood disorder characterized by an increase in the number of blood platelets		
<i>Date of diagnosis?</i>		
<i>Is the applicant taking any medication? Name(s)</i>		
<i>What are the applicant's platelet levels? Date</i>		
<i>Does the applicant require phlebotomies? Frequency</i>		
<i>Has the applicant ever had a Transient Ischemic Attack (TIA) or have any heart or circulatory disorders?</i>		
<i>Does the applicant smoke?</i>		
Normal platelet counts <450K, treatment-free, asymptomatic, no current tobacco use, >6 months		Select w/90 day E.P.
Stable platelet counts between 450K - 750K, treatment-free, asymptomatic, no circulatory disorders or tobacco use, >6 months		Class 1*
History of a single DVT or Pulmonary Embolism with platelets <450K, successfully treated with anticoagulation, asymptomatic, no circulatory disorders or tobacco use, >24 months		Select w/90 day E.P.
Chronically elevated platelet counts ≥750,000, or under treatment, or current tobacco use, or evidence of progression to Leukemia		Decline
History of transient ischemic attack (TIA), stroke, more than one DVT or PE, splenomegaly		Decline
Thrombophilia: One of a group of disorders in which the blood clots easily or excessively		
No history of a clot, no current tobacco use, asymptomatic		Select
Single blood clot, successfully treated, no recurrent episodes, no current tobacco use, > 6 months		Select w/90 day E.P.
Recurrent blood clots (< 3), successfully treated, can be on anticoagulation, no current tobacco use, >12 months		Class 1* w/90 day E.P.
Tobacco use within past 12 months		Decline

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	Tobacco Use: Cigarettes, pipe, cigars, chew, or snuff	
	Abstinence, >12 months	Preferred
	Current use or abstinence <12 months	Select
	Tourette's Syndrome: A disorder characterized by repetitive muscle movements and vocal outbursts	Decline
	Tracheotomy: A surgical opening made through the neck into the breathing tube (trachea) in order to bypass the mouth and throat	Decline
♥	Transient Global Amnesia: A memory disorder seen in middle-aged and elderly persons; characterized by an episode of amnesia and bewilderment that lasts for several hours; person is otherwise alert and intellectually active	
	<i>Date of episode?</i>	
	<i>Has the applicant had any similar episodes in the past? Date(s)/Details</i>	
	<i>Does the applicant have diabetes, heart, or circulatory problems?</i>	
	<i>Was the applicant hospitalized?</i>	
	<i>What were the results of testing performed? (carotid studies, MRI/CT of brain)?</i>	
	<i>Does the applicant have any residual symptoms (memory loss/confusion, dizziness)?</i>	
	Single episode, asymptomatic, no cognitive or physical residuals, >12 months	Class 1* w/90 day E.P.
	2 episodes	Decline
	Residual cognitive or physical abnormalities	Decline
♥	Transient Ischemic Attack: A brain disorder caused by temporary disturbance of blood supply to an area of the brain, resulting in a sudden, brief decrease in brain functions	
	<i>Date of episode?</i>	
	<i>Has the applicant had any similar episodes in the past? Date(s)/Details</i>	
	<i>Does the applicant have diabetes, heart or circulatory problems?</i>	
	<i>Was the applicant hospitalized?</i>	
	<i>What were the results of testing performed? (carotid studies, MRI/CT of brain)?</i>	
	<i>Does the applicant have any residual symptoms (memory loss/confusion, dizziness)?</i>	
	<i>Does the applicant smoke?</i>	
	<i>Is the applicant disabled or experience any limitations?</i>	
	Single episode, asymptomatic, no cognitive or physical residuals, >12 months	Class 1* w/90 day E.P.
	2 episodes	Decline
	Single episode with diabetes or residual cognitive or physical abnormalities	Decline
	Transverse Myelitis: A neurological disorder caused by inflammation across both sides of one level, or segment, of the spinal cord	Decline
	Tremor: An involuntary type of shaking movement	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medication or had any surgical implants? Name(s)</i>	

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	Tremor (continued)	
	<i>Has the applicant had a neurological evaluation? Date</i>	
	<i>What type of tremor has been diagnosed?</i>	
	<i>Has there been any progression of the tremor? Details</i>	
	<i>Is the applicant disabled or experience any limitations or require any assistance?</i>	
	Negative neurological work-up, diagnosed as benign, essential, intention or familial, non-progressive, no limitations, non-disabling, untreated	Select
	Absent neurological work-up, diagnosed as benign, essential, intention or familial, non-progressive, no limitations, non-disabling, untreated, >12 months	Select
	Negative neurological work-up, diagnosed as benign, essential, intention or familial, non-progressive, no limitations, non-disabling, treated with a non-antiparkinson medication (i.e., Propranolol or Primidone)	Select
	Absent neurological work-up, diagnosed as benign, essential, intention or familial, non-progressive, no limitations, non-disabling, treated with a non-antiparkinson medication (i.e., Propranolol or Primidone), >12 months	Select
	Negative neurological work-up, diagnosed as benign, essential, intention or familial, non-progressive, no limitations, non-disabling, treated with >1 medication, >12 months	Class 1*
	Due to an underlying disease	Refer to disease
	Benign, essential, intention or familial with limitations or resulting in disability	Decline
■	Tuberculosis: A contagious bacterial infection; the lungs are primarily involved, but the infection can spread to other organs	
	Acute episode, treatment-free, asymptomatic, baseline pulmonary function tests, FEV1 >65%, FVC >75%, <6 months	Postpone 6 months
■	Tuberculosis (continued)	
	Acute episode, treatment-free, asymptomatic, baseline pulmonary function tests, FEV1 >65%, FVC >75%, >6 months	Select
	Symptomatic or evidence of residual disease, reduced pulmonary function tests, or oxygen use	Decline
	Tumor (Benign): Excluding brain and pituitary tumors: A spontaneous growth of tissue which forms an abnormal mass	Preferred
	Ulcerative Colitis: A chronic, episodic, inflammatory disease of the large intestine and rectum characterized by bloody diarrhea	
	<i>Date of diagnosis?</i>	
	<i>Is the applicant taking any medications? Name(s)/Dosage</i>	
	<i>Date of last flare?</i>	
	<i>Has the applicant ever been hospitalized for a bowel disorder? Date(s)/Details</i>	
	<i>Has the applicant had surgery performed (colostomy, colectomy)? Date(s)/Details</i>	
	<i>Is the applicant disabled or experience limitations? Details</i>	
	<i>Does the applicant experience problems with continence?</i>	

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Ulcerative Colitis (continued)		
New onset, recent exacerbation or flare, <6 months		Postpone 6 months
Asymptomatic, medically managed, no exacerbations/flare, >6 months		Select
Asymptomatic, medically managed w / occasional bowel obstructions/flare, >6 months		Class 1* w/90 day E.P.
Chronic steroid therapy ≤7.5mg per day, no evidence of osteoporosis, asymptomatic, no limitations, non-disabling, >12 months		Class 1* w/90 day E.P.
Colostomy, ileostomy, complete recovery, no limitations, non-disabling, independent management, >6 months		Class 1* w/90 day E.P., 3 year B.P.
Frequent exacerbations/flare, multiple surgeries, weight loss, surgery recommended, or incontinence		Decline
Chronic steroid use >7.5mg per day or ≤7.5mg per day with evidence of Osteoporosis		Decline
Ulcer (Gastric, Duodenal, Peptic): An erosion or open sore in the lining of the area of the stomach or duodenum lining		
Stable, asymptomatic, no history of bleeds		Preferred
GI bleed or hospitalization, complete recovery, asymptomatic, no limitations, >6 months		Select
Urethral Stricture: An abnormal narrowing of the urethra		
<i>Date of diagnosis?</i>		
<i>Is the applicant taking any medication?</i>		
<i>Has the applicant been dilated? Frequency</i>		
<i>Has the applicant undergone any surgical procedures? Date(s)/Details</i>		
<i>Does the applicant have recurrent urinary tract infections? Frequency</i>		
<i>Does the applicant require catheterization? Frequency</i>		
<i>Does the applicant have any problems with continence? Explain</i>		
<i>Does the applicant experience any incontinence? Details</i>		
Asymptomatic, treatment-free, no recurrent urinary tract infections, >12 months		Preferred
Independent use of an intermittent catheter, no recurrent urinary tract infections, >12 months		Class 1*
Treated with <3 dilations within a 12 month period, stable, no recurrent urinary tract infections or incontinence >3 months		Select
Treated w/dilations (3) within a 12 month period, stable, no recurrent urinary tract infections or incontinence >3 months		Class 1*
Surgically treated, complete recovery, asymptomatic, >12 months		Select w/90 day E.P.
Recurrent urinary tract infections, incontinence, surgery recommended or anticipated, chronic daily antibiotic treatment, abnormal renal functions (creatinine >2.0, BUN >35)		Decline
Varicose Veins: Enlarged, twisted veins just below the surface of the skin, caused by defective valves in the veins, usually located in the legs		
No underlying vascular disease or ulcerations		Preferred
Vein stripping, completely recovered		Preferred

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	Varicose Veins (continued)	
	Venous stasis ulcer, completely healed, asymptomatic, treatment-free with follow-up visit	Select
	Non-healing ulcers, recurrent ulcers, or claudication	Decline
■	Ventilator: A machine that controls or assists breathing; a respirator	Decline
♥	Ventricular Fibrillation: A rapid and irregular heartbeat arising from the lower chambers of the heart	
	New onset, <3 months	Postpone 3 months
	Successful defibrillator implant, asymptomatic, ejection fraction > 40% with follow-up visit	Select
	Uncontrolled, episodes of chest pain, shortness of breath, syncope or near syncope, dizziness, or ejection fraction <40%	Decline
♥	Ventricular Tachycardia: A rapid heartbeat originating from the lower chambers of the heart	
	New onset, <3 months	Postpone 3 months
	Successful defibrillator implant, asymptomatic, ejection fraction ≥ 40% with follow-up visit	Select
	Uncontrolled or episodes of chest pain, shortness of breath, dizziness, syncope, or near syncope, or ejection fraction <40%	Decline
♥	Vertebral Basilar Insufficiency: Insufficient blood flow to the back parts of the brain	Decline
	Vertigo: A feeling of faintness or lightheadedness, making it difficult to maintain balance while standing or sitting	
	Benign positional vertigo, mild, stable, no limitations, treatment free or single medication	Preferred
	Acute isolated episode with complete resolution of symptoms, no underlying cardiac or neurological disorder, no limitations, treatment-free	Preferred
	Due to disease	Refer to disease
	Symptomatic, recurring falls, or cause unknown	Decline
	Visual Loss	
	<i>Date of diagnosis?</i>	
	<i>What is the cause?</i>	
	<i>Does it involve one or both eyes?</i>	
	<i>Does the applicant utilize any assistance or assistance device(s)? Details</i>	
	<i>Is the applicant disabled or experience any limitations? Details</i>	
	Single eye, congenital or traumatic, no limitations, non-disabling, completely independent	Select
	Both eyes, congenital, no limitations, non-disabling, completely independent	Select
	Both eyes, traumatic, no limitations, non-disabling, completely independent, >12 months	Class 1*
	Due to disease	Refer to disease
	Von Hippel-Lindau: A rare, genetic multi-system disorder characterized by the abnormal growth of tumors in certain parts of the body	Decline

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	von Willebrand's Disease: A congenital bleeding disorder	
	Mild to moderate types I and II VWD, treatment-free, >12 months	Select
	Mild to moderate types I and II VWD on treatment with oral contraceptives, DDAVP, or oral clot stabilizing medications, with stable blood studies, >12 months	Class 1* w/90 day E.P.
	von Willebrand's Disease (continued)	
	Type III VWD, or severe types I and II, or requiring replacement therapy	Decline
	Waldenstrom's Macroglobulinemia: A cancer of white blood cells known as B lymphocytes	Decline
	Walker: Current use	Decline
	Wegener's Granulomatosis: A rare disorder which causes inflammation of blood vessels in the upper respiratory tract, lungs, and kidneys	Decline
	Wernicke-Korsakoff Syndrome: A brain disorder involving loss of specific brain functions, due to a thiamine deficiency that commonly accompanies habitual alcohol use	Decline
	Wheelchair: A device used for mobility by people for whom ambulating is difficult or impossible	
	Current use	Decline
	Whipple's Disease: A rare disorder with widespread symptoms that causes malabsorption (inadequate absorption of nutrients from the intestinal tract)	Decline
	Wilson's Disease: An inherited disorder where there is excessive amounts of copper in the body, which causes a variety of effects including liver disease and damage to the nervous system	Decline
	Wiscott-Aldrich Syndrome: An immunodeficiency disorder of both T- and B-cells characterized by thrombocytopenia, eczema, and recurrent infections	Decline
♥	Wolff-Parkinson-White Syndrome: Episodes of rapid heart rate (tachycardia) caused by abnormal electrical pathways (circuits) in the heart	
	Asymptomatic, treatment-free, >12 months	Preferred
	Asymptomatic, medically treated, no underlying cardiac conditions	Select
	Successful treatment with radio frequency or catheter ablation, asymptomatic with follow-up visit	Select
	Uncontrolled, episodes of chest pain, shortness of breath, syncope, or near-syncope, dizziness, or ejection fraction <40%	Decline
	Worker's Compensation Disability Benefits: Compensation for a worker, contractor or layperson who is injured while working on site	
	Currently receiving	Decline
	Xeroderma Pigmentosa: An inherited inability to repair DNA damage from ultraviolet light	Decline

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XV. Underwriting Guidelines for the Double Accidents Benefit*

If applicant has any of the following occupations, they will not be considered for this benefit:

- Coal miner
- Electrician
- Explosive handler
- Fireman
- Flight attendant
- Ironworker (bridge, tunnel, or structural)
- Military personnel
- Pilot
- Policeman
- Railroad worker

If applicants participate in any of the following sports more than two times a year, they will not be considered for this benefit:

- Boxing
- Motorized racing
- Parachuting
- Rock/mountain climbing
- Skin/scuba diving

If an applicant has been convicted of two or more felony motor vehicle moving violations or had a driving license suspended or revoked, a motor vehicle report will be retrieved and reviewed by Underwriting to determine if the applicant qualifies for this feature.

XVI. Uninsurable Medications

The following medications indicate a serious underlying condition that will result in a declined application. This list is not all-inclusive. If the applicant is being treated with any of the following medications for a different condition, the application can be submitted for consideration. Please contact the Underwriting area to prequalify the applicant.

Abilify — Antipsychotic

Adriamycin — Malignant tumors

Alkeran — Multiple Myeloma

Aranesp — Anemia

Aricept — Alzheimer's Disease

Artane — Parkinson's Disease

Avinza — Chronic pain

Avonex — Multiple Sclerosis

A.Z.T. — HIV, AIDS

Cogentin — Parkinson's Disease

Cognex — Alzheimer's Disease

Cyloserine — Alzheimer's Disease

Cytosan — Malignant tumors

D.D.I. — HIV, AIDS

Depo-Provera — Inoperable, Recurrent, and Metastatic Endometrial, and Renal Carcinoma

Duragesic Patch — Chronic pain

Eldepryl — Parkinson's Disease

Epogen — Anemia

Estinyl — Cancer

Ergoloid — Decline in mental capacity

Exelon — Alzheimer's Disease/Dementia

Fentanyl Patch — Chronic pain

Geodon — Schizophrenia

Gleevec — Cancer, Leukemia

Gold Therapy — Arthritis

Haldol — Antipsychotic

Hydergine — Decline in mental capacity

Imuran — Immunosuppressant

Interferon — Immunosuppressant

Kadian — Chronic pain

Kineret — Rheumatoid Arthritis

L-Dopa — Parkinson's Disease

Larodopa — Parkinson's Disease

Leukeran — Malignant tumors, not curative

Mellaril — Antipsychotic

Mestinon — Myasthenia Gravis

Methadone — Severe pain

Mirapex — Parkinson's Disease

Morphine — Severe pain

MS Contin — Severe pain

Namenda — Alzheimer's Disease

Narvane — Antipsychotic

Neulasta — Anemia

Oxycontin — Severe pain

Parlodel — Parkinson's Disease

Parsidol — Parkinson's Disease

Permax — Parkinson's Disease

PhosLo — Kidney failure

Plenaxis — Advanced Prostate Cancer

Procrit — Anemia

Purinthenol — Severe Progressive Ulcerative Colitis

Razadyne — Alzheimer's Disease

Rebif — Multiple Sclerosis

Remicade — Rheumatoid Arthritis/Crohn's Disease

Reminyl — Alzheimer's Disease

Renagel — Kidney failure

Rezulin — Diabetes

Ridura — Rheumatoid Arthritis

Risperdal — Antipsychotic

Seroquel — Antipsychotic

Sinemet — Parkinson's Disease

Stelazine — Antipsychotic

Steroid Use — >10 mg daily

Symbyax — Antipsychotic

Symmetrel — Parkinson's Disease

Thiothixene — Antipsychotic

Thorazine — Antipsychotic

Trilifon — Antipsychotic

Tysabri — Multiple Sclerosis

Xyrem — Narcolepsy

Zyprexa — Antipsychotic

XVII. Male/Female Height and Weight Table

	Preferred/Select		Class 1		Class 2	
	Min.	Max.	Min.	Max.	Min.	Max.
4' 7"	73	150	151	168	169	185
4' 8"	76	156	157	174	175	192
4' 9"	79	162	163	180	181	199
4' 10"	82	167	168	186	187	205
4' 11"	84	173	174	193	194	212
5' 0"	87	179	180	199	200	220
5' 1"	90	185	186	206	207	227
5' 2"	93	191	192	213	214	235
5' 3"	96	197	198	220	221	242
5' 4"	99	204	205	227	228	250
5' 5"	102	210	211	234	235	258
5' 6"	106	216	217	241	242	266
5' 7"	109	223	224	249	250	274
5' 8"	112	230	231	256	257	282
5' 9"	115	236	237	263	264	291
5' 10"	119	243	244	271	272	299
5' 11"	122	250	251	279	280	308
6' 0"	126	258	259	287	288	316
6' 1"	129	265	266	295	296	325
6' 2"	133	272	273	303	304	334
6' 3"	136	279	280	311	312	343
6' 4"	140	287	288	320	321	353
6' 5"	144	295	296	329	330	363
6' 6"	147	303	304	337	338	372
6' 7"	150	311	312	346	347	382

XVIII. Appeal Process

The Underwriting Department understands the importance of an appeal process and has established an avenue for discussing rated, modified, and declined cases when there is additional information to consider. Our goal is to make the most informed decision for the Company and your prospects.

If you are considering an appeal of an underwriting decision, the checklist below can help you determine if that appeal is appropriate:

- ✓ Review the specific reason(s) for the adverse decision that is outlined in the applicant's letter.
- ✓ Compare the letter to the application for insurance and the Underwriting Guide.
- ✓ Check for multiple co-morbid conditions that will increase the risk of using long-term care services.
- ✓ Review the letter with the applicant:
 - If the applicant disagrees with the information contained in the letter, he should review the letter with his/her physician.
 - If the physician disagrees with the contents of the letter, he should send a letter outlining the discrepancies.

If additional medical information is submitted, you will be informed of our decision within 30 days from home office receipt.

- ✓ All informal appeals (verbal) must be presented by Managing Directors, General Agents, Managing General Agents, Sales Managers, Brokerage Managers, or individuals in equivalent positions.

NOTES

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NOTES

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

NOTES

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