What You Need to Know About…Field Underwriting with a Focus on Heart Disease

A heart, like most houses, has walls and electricity; it has "plumbing" that delivers blood and oxygen to itself (coronary arteries), and windows (valves) through which blood flows. All of these parts work in concert to keep you safe, comfortable, and living well. Underwriting risk, whether in real estate investment, or in the offer of life insurance, requires careful inspection – and an understanding of the function of each of the parts. When underwriting heart disease, underwriters need to know what part of the heart is affected by disease, and how it is affected.

Not only is each area of the heart treated differently in underwriting; but within each category there are many scenarios with many different underwriting outcomes. The heart is complex, and so are the diseases that affect it. Specific information is important. A disease of one area may even underlie the disease in another area, for example, when coronary atherosclerosis (a disease of the coronary arteries) results in atrial fibrillation (a disease of electrical conduction). All of this information needs to be understood before a reliable offer can be made by a life insurance underwriter.

Disease of the walls can result in enlargement (hypertrophy). Disease that affects the electricity can result in arrhythmias of different types. Disease that affects the valves can affect the flow of blood. And disease that affects the coronary arteries (atherosclerosis) can result in myocardial infarction (heart attack). All of these problems can negatively impact the output of the heart, and to different degrees.

When you have a client who indicates he or she has heart disease, the first step is to find out what part of the heart is affected. Refining the severity is also vital; if your client has mild disease, that must be clear in order to get a better premium. Here are some questions to ask when confronted with a client (or proposed insured) who indicates a general history of heart disease:

- What part of the heart is affected [walls, electricity, plumbing (arteries), windows (valves)]?
- Can you explain your heart history in your own words?
- What is the exact diagnosis according to your doctor?
- What symptoms precipitated the diagnosis?
- What are the current symptoms, when do they occur, and how often do they occur?
- How would you categorize the severity of the disease (mild, moderate or severe)?
- How has the disease been treated (detail all treatment and any medication)?
- Since treatment, would you say you have improved, remained the same, or gotten worse?
- How would you describe your exercise tolerance (below average, average, above average)? Provide examples.
- How frequently and how long do you exercise? What exercises?
- Do you have symptoms while exercising that you do not experience at rest?
- What surveillance testing has been done to keep track of the disease (include test names and dates; e.g., Nuclear Stress Test, March, 2023)?
- When was the last visit with a cardiologist (gather contact information)?
- Have you been compliant with treatment and cardiology follow up?

Life insurance risks are not all the same. Disease takes myriad forms and each individual may be afflicted differently. Getting a fair and reliable underwriting opinion requires thorough development of the specific risk presented. This includes understanding the exact diagnosis and how the disease affects your specific client. This starts with asking the right questions.

Contact your Crump underwriter or Crump representative to discuss your case.

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