

Life & DI Underwriting

Field Impairment and Probable Action Guide

Guardian's Life and Disability Field Impairment and Probable Action Guide provides likely underwriting action for many medical and non-medical histories to help you with managing expectations and cross selling with your client.

For example, many applicants who qualify for life insurance coverage may be excellent candidates for individual disability coverage; however, in some cases there may be important differences in the underwriting process. Understanding those differences can make it easier to manage a client's expectations. Refer to the guide when your client is applying for either or both types of coverage, or when recently approved for one or the other, as underwriting consideration may be very different.

Final underwriting action will be determined by the underwriter after careful consideration. Please feel free to contact anyone in the underwriting departments with questions or with feedback in order to improve the effectiveness of this guide.

ddison's Disease:	A disorder that occurs when the adrenal glands do	not produce sufficient amount of	certain hormones	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	1. Age of client? 2. Date of diagnosis and treatment 3. Is condition fully controlled? 4. Any complications?	NS to include Flat Extra	PP to Decline	PP to Decline
Individual Disability	All cases Decline	Action		
<u>.</u>	Acquired Immune Deficiency Syndrome	Action		
Life	All cases Decline			
Individual Disability	All cases Decline	Action		
cohol Dependency/Abuse:	Having unhealthy or dangerous drinking habits.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 When was their last drink and how much? Past history of treatment(s)? Any history of other substance abuse? Any history of driving violations? 	NS to Table 6	Table 8 to Table 10	Table 12 to Decline
	Trany motory of driving violations.	Action		
Individual Disability	History of alcohol treatment, normal lab results, an No alcohol use in past 5 years Decline No alcohol use in the past 7 years 50% rating w/ 9 No alcohol use in past 10 years 25% rating with 1 No alcohol use in over 10 years No adverse action	5 year BP O year BP		
nyotrophic Lateral Sclerosis (ALS):	An incurable neuromuscular disease characterized	by progressive muscle weakness,	resulting in paralysis. Also	o known as Lou Gehrig's Dise
Life	Underwriting Considerations 1. Date of diagnosis?	Mild/Low Grade	Moderate Decline	Severe
Individual Disability	All cases Decline	Action		
nemia:	Any condition in which the number of red blood cel megaloblastic, sickle cell, thalassemia.	ls are less than normal: iron def	ciency, hemorrhagic, apla	stic, sideroblastic, hemolytic
	Underwriting Considerations 1. Type of anemia?	Mild/Low Grade	Moderate	Severe
Life	Underwriting Considerations 1. Type of anemia? 2. Any complications? (shortness of breath, palpitations of the heart, heart murmurs, lethargy, fatigue) 3. Details of treatment?	Mild/Low Grade NS	C	Severe NS to Decline ding on Type)
Life Individual Disability	 Type of anemia? Any complications? (shortness of breath, palpitations of the heart, heart murmurs, lethargy, fatigue) 	Action ing cause 25% rating iderlying cause 50% rating in Individual consideration Usually decline	Depend (Depender)	NS to Decline ding on Type)
Individual Disability	 Type of anemia? Any complications? (shortness of breath, palpitations of the heart, heart murmurs, lethargy, fatigue) Details of treatment? Iron deficiency anemia mild, no worrisome underly Iron deficiency anemia moderate, no worrisome undericiency anemia mild, stable, cause unknown Iron deficiency anemia moderate, cause unknown Iron deficiency anemia severe Decline Aplastic Anemia - Decline Sideroblastic Anemia - Decline Hemolytic Anemia - Individual consideration Megaloblastic Anemia - Fully worked up - Decline Megaloblastic Anemia - Fully worked up cause unknown 	Action ing cause 25% rating iderlying cause 50% rating in Individual consideration Usually decline nown, but stable for less than one years	Depend (Depender)	NS to Decline ding on Type)
	 Type of anemia? Any complications? (shortness of breath, palpitations of the heart, heart murmurs, lethargy, fatigue) Details of treatment? Iron deficiency anemia mild, no worrisome underly Iron deficiency anemia moderate, no worrisome underly Iron deficiency anemia mild, stable, cause unknown Iron deficiency anemia moderate, cause unknown Iron deficiency anemia severe Decline Aplastic Anemia - Decline Sideroblastic Anemia - Decline Hemolytic Anemia - Individual consideration Megaloblastic Anemia - Fully worked up cause unknown Megaloblastic Anemia - Fully worked up cause unknown 	Action ing cause 25% rating iderlying cause 50% rating in Individual consideration Usually decline nown, but stable for less than one years	e year - Decline ear - Individual Considerat Moderate	NS to Decline ding on Type)
Individual Disability kylosing Spondylitis:	1. Type of anemia? 2. Any complications? (shortness of breath, palpitations of the heart, heart murmurs, lethargy, fatigue) 3. Details of treatment? Iron deficiency anemia mild, no worrisome underly Iron deficiency anemia moderate, no worrisome un Iron deficiency anemia moderate, cause unknown Iron deficiency anemia moderate, cause unknown Iron deficiency anemia severe Decline Aplastic Anemia - Decline Sideroblastic Anemia - Decline Hemolytic Anemia - Individual consideration Megaloblastic Anemia - Not fully worked up - Decline Megaloblastic Anemia - Fully worked up cause unknown Megaloblastic Anemia - F	Action ing cause 25% rating iderlying cause 50% rating in Individual consideration Usually decline ne nown, but stable for less than one nown, stable for more than one y ind sacroiliac joints. Mild/Low Grade NS to Table 2	e year - Decline ear - Individual Considerat Moderate	NS to Decline ding on Type) tion Severe Table 4 to

norexia Nervosa:	Eating disorder characterized by extreme fear of gain	ing weight, refusal to eat to	maintain normal body weight, a	nd distortion of body im
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Date of diagnosis and treatment? Date of recovery/last episode? Recurrence? Current build? 	NS	Table 2 with Flat Extra	PP to Decline
	5. Current treatment, maintenance medication, or psychotherapy?			
		Action		
Individual Disability	Fully resolved less than 5 years Decline Fully resolved, no co morbid conditions, 5 - 10 years Fully resolved more than 10 years Exclude	- Exclude with a 5 year BP		
ortic Aneurysm:	An abnormal dilation of the upper (thoracic) or lower	(abdominal) aorta.	•	
orde Alledi yoli.	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Location and size of aneurysm?	Willa/Low Grade	Table 3	Jevere
Life	2. Treatment?	Table 2	to	Decline
	3. Smoking status?		Table 6	
	Repaired and fully recovered within last 3 years Dec	Action		
Individual Disability	Repaired and fully recovered, no co morbid condition Repaired and fully recovered, no co morbid condition term BP	s, 3 - 6 years ago 50% rati	_ ,	ing 25% rating with a sh
ortic Valve Surgery:	The repair or replacement of the valve between the le	eft ventricle and the ascend	ing aorta.	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
1:5-	1. Date and type of procedure?	Table 3		
Life	2. Underlying cause?	to	Decline	Decline
	3. Date of most recent follow up?	Decline		
Individual Disability		Action		
Individual Disability	All cases Decline			
sthma:	An inflammatory disease of the lungs characterized b	y (in most cases) reversible	airway obstruction.	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Frequency of attacks?			
Life	2. Any ER/hospital visits? Work missed?	. Lot	Table 2	Table 6
	3. Treatment? Name of medications?	NS*	to	to
	4. How often is a Rescue Inhaler used?		Table 4	Decline
		Action		
		Action		
Individual Disability	Occasional symptoms a few days a week, occasional occasional symptoms every day of the week, daily use Frequent symptoms every day of the week, use of a reposition of the week, use of the	e of a rescue inhaler, freque	nt nighttime awakenings Exclu	ude
trial Fibrillation:	Rapid and random contraction of the heart causing in	regular beats that results fro	om a disorder of the heart's elec	trical system.
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Date of diagnosis?			
	2. Cause of the atrial fibrillation?			
	3. Date of last episode and number per	***		* 11 6
Life	year?	NS to	Table 4	Table 8
	4. Current symptoms and type of treatment?	to Table 3	to Table 6	to Decline
	5. Was stress test or Echo performed? If	Table 5	Table 0	Decline
	yes, results?			
	6. Any cardiac disease?			
	or my caratac arsease.	Action		
	Action			
Individual Disability	Single episode, fully evaluated, no underlying heart di Single episode, fully evaluated, no underlying heart di Single episode, fully evaluated, no underlying heart di	sease, within last year De sease, 1-4 years ago 50%	rating with a short term BP	

Attention Deficit Disorder (ADD) / Attention deficit Hyperactivity Disorder (ADHD):	People with ADHD generally have problems paying a organizational skills, goal setting, and employment. T	_		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Age at diagnosis? Treatment? Other mental or nervous disorders? Names of medications and dosage? Any disability or loss of time at work/school? Any history of substance abuse? 	NS*	NS to Table 2	Decline
		Action		
Individual Disability	Diagnosed in childhood fully resolved with no medical Diagnosed in childhood currently treated w/ good con No adverse action Diagnosed in adulthood or not medication taken solely to hadverse action Others - Usually exclude & limit BP to decline	ntrol (3 yrs), stable employme eting the favorable conditions	nt (3 yrs), no co-morbid psy noted above Exclusion w	rith limited benefit period
utism:	A mental disorder characterized by severely abnorma	al development of social intera	ction and of verbal and non	verbal communication skills.
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Any associated disorders such as depression, anxiety or obsessive compulsive disorder? Level of intellectual functioning (IQ)? Ability to live and work independently? 	NS to Table 4	Table 6 to Table 12	Decline
Individual Disability		Action		
	All cases Decline			
Back/Neck Sprains no disc involvement):	Soft tissue injury that consists of damage to the muse	cles, ligaments and tendons.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Severity and duration of pain? Functional Abilities and work history? Treatment and medications? 	NS*	See Ch	nronic Pain
Individual Disability	One episode lasting less than 6 months, fully recover One episode lasting less than 6 months, fully recover Multiple episodes, or a single episode lasting more the Multiple episodes, or a single episode lasting more the	ed for at least 1 year No adv nan 6 months, fully recovered f	erse action for less than 3 years Exclud	
Back/Spine: Not found elsewhere (Sciatica, scoliosis, spinal stenosis):	Symptoms and/or deformities affecting the back.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Severity and duration of pain? Functional Abilities and work history? Treatment and medications? 	NS*	See Ch	nronic Pain
	Sciatica-Cause Unknown Exclude	Action		
Individual Disability	Scoliosis-Mild to moderate spinal curvature without scoliosis-Mild to moderate spinal curvature with sym Scoliosis-Severe curvature Decline Scoliosis-Surgically corrected Exclude Stenosis-Mild with no worse than mild symptoms Estenosis-Moderate or severe	nptoms Exclude Exclude & possible limited bene	efit period	
sarrett's Esophagus:	Chronic peptic ulceration of the lower esophagus due	e to injury, often caused by chr	onic reflux of stomach acid	into the esophagus.
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Date of diagnosis? Date and results of last biopsy? 	NS to Table 4	Di	ecline
Individual Disability	Well followed with endoscopy showing no dysplasia Poorly followed, or with findings of dysplasia Declin			

Benign Prostatic Hyperplasia (BPH):	A condition in men in which the prostate gland is enla	rged.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	 Treatment? PSA abnormalities? Urinary complications? Abnormal biopsies? Client's age? 	NS*	NS with Flat Extra	PP to Decline	
		Action			
Individual Disability	Over age 40, incidental finding, no symptoms No ad Under age 40, incidental finding, no symptoms Exclude Any age, with symptoms Exclude Surgically treated, fully resolved, no further symptom	ude	than one year no adverse ac	ction	
Bleeding Disorders:	Problems in the clotting mechanism of the blood.				
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	 Severity of disease (i.e. mild, moderate, severe)? Age of applicant? Symptoms or complications? 	NS	Table 2 to Table 6	Decline	
		Action			
Individual Disability	Diagnosed more than 2 years ago, with normal/stable Hemophilia-All coverage's Decline Others Individual consideration				
Breast Cancer:	Abnormal malignant growth of cells in primarily the m (lump) and then spreads (metastasizes) to the lymph			of a small, confined tumor	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	 Date of diagnosis? Stage and grade of tumor? Any metastasis to lymph nodes? If yes, how many? Treatment? (Mastectomy, Lumpectomy, other treatments and dates performed) Date of most recent follow up? 	NS to Postpone	Postpone 2 - 3 Years then Flat Extra	Decline	
		Action			
Individual Disability	Stage 0 - TIS, NO, MO, within last year - Decline Stage 0 - TIS, NO, MO, greater than one year - Exclusion Stage I, within last 5 years Decline Stage I, fully recovered, more than 5 years ago Exclusion Stage II, within last 10 years Decline Stage II, fully recovered, more than 10 years ago and Stage III or Stage IV or Stage II with nodes positive I	ude nodes negative Exclude	nd reduce benefit period if tr	reated with chemo/radiation	
	Extreme variances in an applicant's build is known to considered along with several other factors to determ as a starting point to help set initial expectations.	nine if a rating is appropriate	e; therefore, the rating chart	provided should be considered	
Build (Body Mass Index):	•Lower than normal BMI readings increase future risks of osteoporosis, endometriosis and infertility in women, decreased immunity, poor wound healing and cardiac arrhythmias and those with a low build are more susceptible to vascular diseases, and systemic inflammation.				
	 Higher than normal BMI readings are associated wit elevated lipids, type II diabetes, hypertension, metabolisease, arthritis and poor wound healing. 				
Life	Underwriting Considerations See Underwriting Quick Guide (Pub4396) for build tak	Mild/Low Grade	Moderate	Severe	
	Body Mass Index less than 16 - Decline	Action			
Individual Disability	Body Mass Index less than 16 - Decline Body Mass Index between 16 and 18.5 - Rating and possed Mass Index between 18.5 and 34 - No action Body Mass Index between 34 and 42 - Rating and possed Mass Index greater than 42 - Decline *When calculating a client's BMI for rating purposes was add it to the current weight.	sible limited benefit period		he previous twelve months and	

Bulimia Nervosa:	Eating disorder characterized by eating and purging a	along with distressing conce	rn about with body weight an	d shape.
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Date of diagnosis and treament? Date of recovery/last episode? Recurrence? Current build? Current treatment, maintenance medication, or psychotherapy? 	NS to Table 2	PP to Decline	PP to Decline
		Action		
Individual Disability	Fully resolved less than 2 years Decline Fully resolved between 2 and 10 years Exclude & lir Fully resolved more than 10 years No adverse actio			
<u>Cardiomyopathies</u> :	Reduced cardiac function.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Date of diagnosis? Type of cardiomyopathy and cause? Treatment? Current symptoms? 	If Resolved NS to Table 2	Table 3 to Table 6	Decline
Individual Disability		Action		
	All cases Usually decline			
Carotid Artery Stenosis:	A narrowing of the carotid artery caused by fatty dep			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Date of diagnosis? One or both carotids? Symptoms, CAD or associated disease and risk factors? Any surgery done or recommended? 	NS to Table 2	Table 3 to Table 6	Decline
	4. Any surgery done of recommended:	Action		
Individual Disability	All cases Usually decline	Action		
	7.11 cases — Osaaniy aconne			
Celiac Disease:	Hypersensitive to Gluten foods such as Wheat, Barley	and Rye.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Age of diagnosis? Duration of diagnosis? Date of last symptoms? Compliance to Gluten free diet? Evidence of malabsorption? 	NS	NS to Table 2	Postpone
		Action		
Individual Disability	Symptoms fully resolved within the last six months Symptoms fully resolved more than six months ago, n		e action	
Cerebral Palsy:	A disorder that affects muscle tone, movement, and and speech problems, and learning disabilities.	motor skills. Cerebral palsy c	an also lead to other health is	ssues, including vision, hearing,
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Extent and severity of disability? Presence/severity of epilepsy? Degree of mental impairment, if any? 	NS to Table 4	Table 6 to Table 10	Decline
	4. Severity of complications, if any?			
Individual Disability	Minimal involvement, no mental defect or limitations	25%		
	OthersUsually Decline			
Cervix Uteri Tumors/Abnormal Pap Smear:	Cancer that starts in the lining of the cervix due to ab	_		
Life	Underwriting Considerations 1.Severity of disease/pap smear results? 2.Date of diagnosis and treatment? 3. Type of treament? 4. Recurrence?	Mild/Low Grade NS to Postpone	Moderate NS with Flat Extra	Severe PP to decline
	4. Necurrences	Action		
Individual Disability	If any pap smear result in the last 12 months indicated if no pap smear results in the past 12 months indicated if abnormal pap discovered and recommended follows:	s moderate or severe dysplase moderate or severe dysplase	sia No adverse action	

ronic Fatigue Syndrome:	medical conditions.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Years since onset of symptoms?		Table 2	
Life	2. Years since full recovery?	If Resolved		Postpone
Life	3. Additional factors: Anxiety,	NS*	to	or
	depression, not able to perform daily	(No Waiver)	Table 4	Decline
	living activities?	, , , ,	(No Waiver)	
		Action		
Individual Disability	Fully resolved 5 years or less Decline Fully resolved more than 5 years Individual conside	eration		
onic Pain:	Pain that lasts beyond the expected healing process.			
	Underwriting Considerations 1. Severity?	Mild/Low Grade	Moderate	Severe
	2. Degree of functional impairment?	NS to	Table 2	
Life			to	Dodina
	3. Treatment and medications (to include dosage	Table 2	Table 6	Decline
	and frequency?	(No Waiver)		
	4. Any associated mood or psychiatric disorders?			
		Action		
Individual Disability nic Obstructive Pulmonary Disease (COPD):	Severe, or with comorbid substance abuse and/or ps Mild to moderate, no impact on the ability to perform **Note, additional action for underlying cause may be Chronic, nonreversible obstruction of the airways, the	m job duties, no medications bey pe needed.	ond anti-inflammatories -	- Individual Consideration
blic obstructive Pullionary Disease (COPD):	smoking. If your client is currently smoking, case will	l be rated Moderate at best.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Date of diagnosis?			
	2. If any, names of medications, how			
	often?	Table 2	Table 4	
Life				Dealine
Life	3. Type of treatment?	to	to	Decline
		Table 4	Table 8	
	4. Any hospitalizations?			
	5. Pulmonary Function Test (PFT) results?			
	, .			
	5. Pulmonary Function Test (PFT) results? 6. Currently smoking?	Action		
Individual Disability	5. Pulmonary Function Test (PFT) results?	Action		riod
Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking?	Action ase 25% to 50% rating with a m		riod
Individual Disability	5. Pulmonary Function Test (PFT) results?6. Currently smoking?Non-smokers who are in the early stages of the disease	Action ase 25% to 50% rating with a m		riod
	5. Pulmonary Function Test (PFT) results?6. Currently smoking?Non-smokers who are in the early stages of the disease	Action ase 25% to 50% rating with a m Usually decline	naximum 5 year benefit pei	
	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the disease stages.	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function o	naximum 5 year benefit per due to improper blood flow	v to liver.
hosis:	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations	Action ase 25% to 50% rating with a m Usually decline	naximum 5 year benefit pei	
	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function o	naximum 5 year benefit per due to improper blood flow	v to liver.
hosis:	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade	naximum 5 year benefit per due to improper blood flow Moderate	v to liver.
hosis:	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of to Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function o	naximum 5 year benefit per due to improper blood flow Moderate	v to liver.
nosis: Life	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade	naximum 5 year benefit per due to improper blood flow Moderate	v to liver.
Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of to Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade	naximum 5 year benefit per due to improper blood flow Moderate	v to liver.
Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of to Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade	naximum 5 year benefit per due to improper blood flow Moderate	v to liver.
hosis: Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action	naximum 5 year benefit per due to improper blood flow Moderate Decline	v to liver. Severe
hosis: Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of to Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe
Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of to Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability aine:	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of to Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use?	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability aine: Life	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results.	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability aine:	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results to the past of the disease of the disea	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action Sults, and:	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability Life Life	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results.	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action Sults, and:	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability Life Life	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results to the past of the disease of the disea	Action ase 25% to 50% rating with a management of the liver and poor liver function of the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability Life Life	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results to the past 5 years Decline No substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ratio	Action ase 25% to 50% rating with a management of the liver and poor liver function of the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability Life Life Life	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results to the past 5 years Decline No substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ratio	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP on	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability aine: Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results to substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ration No substance use in over 10 years No adverse actions.	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP on	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate	v to liver. Severe Severe
Life Individual Disability Life Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of to Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results No substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ration No substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in over 10 years No adverse action of the substance use in the lining of the colon of the substance use in the lining of the colon of the substance use in the lining of the colon of the substance use in the lining of the colon of the substance use in the lining of the colon of the substance use in the lining of the colon of the substance use in the lining of the colon of the substance use in the lining of the colon of the substance use in the lining of the colon of the substance use in the lining of the substance use in the substance use in the lining of the substance use in the lining of the substance use in the s	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP on or rectum.	naximum 5 year benefit per due to improper blood flow Moderate Decline Moderate Dec	Severe Severe Severe
Life Individual Disability Life Life Individual Disability Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results to substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ration No substance use in over 10 years No adverse action of Underwriting Considerations 1. Type of polyp? (i.e. benign, malignant)	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP on or rectum.	maximum 5 year benefit per due to improper blood flow Moderate Decline Moderate Decline	Severe Severe Severe Severe
Life Individual Disability aine: Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results to substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ration to substance use in over 10 years No adverse action of the lining of the colon of the Underwriting Considerations 1. Type of polyp? (i.e. benign, malignant) 2. Stage/Grade (if applicable)	Action ase 25% to 50% rating with a management of the liver and poor liver function of the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP on or rectum. Mild/Low Grade	maximum 5 year benefit per due to improper blood flow Moderate Decline Moderate Decline NS	Severe Severe Severe Table 8
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Life Individual Disability Life Life Individual Disability Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab removed to substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ration to substance use in over 10 years No adverse action of the lining of the colon of the Underwriting Considerations 1. Type of polyp? (i.e. benign, malignant) 2. Stage/Grade (if applicable) 3. Surgery? 4. Age at diagnosis?	Action ase 25% to 50% rating with a management of the liver and poor liver function of the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP on or rectum. Mild/Low Grade	maximum 5 year benefit per due to improper blood flow Moderate Decline Moderate Decline NS	Severe Severe Severe Table 8
Life Individual Disability Life Life Individual Disability Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results to substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ration to substance use in over 10 years No adverse action of the lining of the colon of the Underwriting Considerations 1. Type of polyp? (i.e. benign, malignant) 2. Stage/Grade (if applicable) 3. Surgery?	Action ase 25% to 50% rating with a management of the liver and poor liver function of the liver and liver an	maximum 5 year benefit per due to improper blood flow Moderate Decline Moderate Decline NS to include	Severe Severe Severe Table 8 to
Life Individual Disability aine: Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab removed to substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ration No substance use in over 10 years No adverse action of Underwriting Considerations 1. Type of polyp? (i.e. benign, malignant) 2. Stage/Grade (if applicable) 3. Surgery? 4. Age at diagnosis? 5. Family history of colorectal cancer?	Action ase 25% to 50% rating with a management of the liver and poor liver function of the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP on or rectum. Mild/Low Grade	maximum 5 year benefit per due to improper blood flow Moderate Decline Moderate Decline NS to include	Severe Severe Severe Table 8 to
Life Individual Disability aine: Life Individual Disability Life Life Life	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab removed to substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ration to substance use in over 10 years No adverse action of the lining of the colon of the Underwriting Considerations 1. Type of polyp? (i.e. benign, malignant) 2. Stage/Grade (if applicable) 3. Surgery? 4. Age at diagnosis?	Action ase 25% to 50% rating with a management of the liver and poor liver function of the liver and liver an	maximum 5 year benefit per due to improper blood flow Moderate Decline Moderate Decline NS to include	Severe Severe Severe Table 8 to
Life Individual Disability Life Life Individual Disability Life Individual Disability	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Slowly progressing disease which causes scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? All cases Decline A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab removed to substance use in past 5 years Decline No substance use in the past 5 - 10 years 50% ration No substance use in over 10 years No adverse action of Underwriting Considerations 1. Type of polyp? (i.e. benign, malignant) 2. Stage/Grade (if applicable) 3. Surgery? 4. Age at diagnosis? 5. Family history of colorectal cancer?	Action ase 25% to 50% rating with a management of the liver and poor liver function of the liver and liver an	maximum 5 year benefit per due to improper blood flow Moderate Decline Moderate Decline NS to include	Severe Severe Severe Table 8 to
Life Individual Disability Life Individual Disability Life Individual Disability Life	5. Pulmonary Function Test (PFT) results? 6. Currently smoking? Non-smokers who are in the early stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Smokers and those in the later stages of the disease Smokers and those scarring of the Underwriting Considerations 1. Date of diagnosis? 2. Has a biopsy been performed? A highly addictive stimulant drug. Underwriting Considerations 1. Years since last use? 2. Any history of relapse or rehab? 3. Multiple drug use or alcohol use? 4. Any convictions? 5. Frequency of use? History of substance abuse treatment, normal lab results for the past 5 - 10 years 50% ration No substance use in past 5 years Decline No substance use in over 10 years No adverse action A fleshy growth occurring on the lining of the colon of Underwriting Considerations 1. Type of polyp? (i.e. benign, malignant) 2. Stage/Grade (if applicable) 3. Surgery? 4. Age at diagnosis? 5. Family history of colorectal cancer? Hyperplastic-Single, polyp No adverse action	Action ase 25% to 50% rating with a m Usually decline the liver and poor liver function of Mild/Low Grade Action Mild/Low Grade After 3 Yrs NS to include Flat Extra Action sults, and: ng w/ 5 year BP on or rectum. Mild/Low Grade NS*	maximum 5 year benefit per due to improper blood flow Moderate Decline Moderate Decline NS to include	Severe Severe Severe Table 8 to

Coronary Artery Disease (CAD):	Disorder of the arteries where they become blocked	and decrease blood flow to the	e heart. This causes the hear	t to lack oxygen.
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Date and age at diagnosis? Type of occurrence? (heart attack, coronary artery aneurysm, angina, etc.) Date of occurrence(s)? How many vessels are involved? Was there surgery? Yes - which kind? Names of all medications? 	Table 2 to Table 4	Table 4 to Table 8	Table 10 to Decline
Individual Disability		Action		
,	All cases - Decline			
Crohn's Disease:	A form of inflammatory bowel disease that is most o	ammonly found in the intestine	es hut can develon anywhere	in the digestive tract
<u></u>	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Years since last major episode? Frequency of symptoms? Surgical treatment? Additional factors (i.e. underweight, abnormal liver functions, special diet, surgery contemplated, combined with other GI ailments) Age of applicant? 	NS to Table 4	Table 6 to Table 10	Postpone to Decline
	3. Age of applicant.	Action		
Individual Disability	Mild symptoms, less than 2 years since last attack Mild symptoms, no steroid treatment, no anemia, 2 y Moderate symptoms, less than 5 years since last atta Moderate symptoms, occasional steroid treatment, i short term benefit period Severe, recurrent symptoms, or frequent use of stero treated with certain medications Individual consider	veas or more since last attack - ick Decline solated past surgery 5 years or old medication, or hospitalization	more since last attack Exc	lude 25% - 50% rating with a
Cystic Fibrosis:	A genetic chronic disease that affects the respiratory	and the digestive system.		
Life	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	1. Diagnosis confirmed?		Decline	
Individual Disability	All cases - Decline	Action		
Deep Vein Thrombosis (DVT):	A deep blood clot in a vein, usually found in the legs.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Site of DVT? Number of episodes? Period since last recovery? Complications? Treatment? Clotting disorder? 	NS to Table 4	Table 4 to Postpone	Decline
		Action		
Individual Disability	Single episode within the last year Decline Single episode, fully resolved more than 1 year ago Multiple episodes or with clotting disorder Individu			
Degenerative Joint Disease:	Chronic condition affecting the joints in which bone a	and surrounding cartilage deter	iorates causing inflammation	and pain.
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Severity of impairment? Surgery? Pain as main symptom? Treatment? 	NS*	NS	Table 2
Individual Disability	No symptoms and not worse than typical for age N With symptoms or worse than typical for age Exclu			
Dementia:	A chronic loss of brain function affecting memory, th	inking, language, judgment, and	d behavior thus interfering w	ith daily functioning.
Life	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Lile	1. Type of Dementia?		Decline	
Individual Disability	All cases Decline	Action		
	IAII Cases Decline			

Diabetes:	Disorder where the body can not regulate blood su age groups and called Juvenile onset diabetes, Typ pregnancy and usually disappears after delivery. (1	e 2 which is Adult onset diabete	s and Gestational which is te	·
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Date of diagnosis? Type of Diabetes? (Type 1, Type 2, Gestational) If any, names of medications? Age at onset? What is the most recent hemoglobin test (A1c) result? Any complication from the disease? (Diabetic coma, Diabetic eye disease, amputation, Neuropathy) 	NS to Table 3	Table 4 to Table 8	Table 10 to Decline
		Action		
Individual Disability	Well-controlled, no complications, onset age 40 to Well-controlled, no complications, onset age from Well-controlled, no complications, onset age 51 or Not well-controlled, or with complications, or with	46 - 50 50% rating with a 5 yes older 25% rating with a 5 yea	ar benefit period	
Diverticulitis:	A condition when multiple diverticuli (small pouch	es) form in the large intestine ar	nd get inflamed.	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Current symptoms? Time lapsed since last attack? Surgery? Complications? 	NS*	NS	Table 2 to Table 4
		Action		
Individual Disability	Diagnosed prior to age 40 - Exclusion Single episode of diverticular bleeding, with full red	covery > two years, no surgery r	equired to treat - No adverse	action
iverticulosis:	A condition when multiple diverticuli (small pouch	es) form in the large intestine.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Current symptoms? Time lapsed since last attack? Surgery? Complications? 	NS*	NS	Table 2 to Table 4
		Action		
Individual Disability	Diagnosed prior to age 40 with symptoms, unopera Diagnosed after age 40 with minimal symptoms - N			
Down's Syndrome:	A genetic abnormality which causes intellectual dis	sabilities and multiple defects.		
·	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	1. Age of client?2. Functional capabilities?	Table 8 to Decline	De	ecline
Individual Disability	All cases Decline	Action		
mphysema:	Long term, progressive lung disease which causes	shortness of breath.		
Life	Underwriting Considerations 1. Date of diagnosis? 2. Type of treatment? 3. Any hospitalizations? 4. Pulmonary Function Test (PFT) results? 5. Smoking status?	Mild/Low Grade Table 2 to Table 4	Moderate Table 4 to Table 8	Severe PP to Decline
Individual Disability		Action		
muividuai Disability	See Chronic Obstructive Pulmonary Disease			
pilepsy: (Also see Seizure Disorder)	A brain disorder in which a person has recurrent se	eizures		
encest: (1130 See Seizure Disorder)	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	 Type of seizure/underlying cause? Number of seizures? Date of diagnosis? Time lapsed since last seizure? 	NS to Table 4	Table 6 to Postpone	Decline
Individual Disability	Epilepsy 0-2 years since last seizure or change in se Epilepsy > 2 years since last seizure or change in se Isolated seizure, seizure onset after age 40 or statu	eizure medicationNo adverse a		ne

Esophageal Stricture:	A narrowing of the esophagus causing swallowing diff	iculties.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Type of stricture?			
Life	2. Symptoms?		NS	Table 2
Life	3. Treatment?	NS*	to	to
	4. Underlying cause?		Table 2	Table 4
	5. Additional factors worsening condition?			
Individual Disability	All cases Exclude	Action		
ye Conditions: Lattice Degeneration, Macular				
egeneration, Retinitis Pigmentosa, Retina	Miscellaneous eye conditions affecting vision and/or p	ootentially		
etachment, Keratoconus, Strabismus, Uveitis, Iritis.		2411/2		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
1:6-	1. Specific diagnosis?			
Life	2. Underlying cause?	NS*	_	and level of visual impairmen
	3. Level of severity / impairment of vision?		No waive	er of premium
	4. Functional abilities?			
		Action		
	Macular DegenerationAll coverage's Decline			
	Retinitis Pigmentosa Family history only, not diagnos	ea in applicant, current norr	nai vision-exclude	
Individual Disability	Retinitis PigmentosaOthers Decline	do ovo New turn 11 f 11	manaya mada assala da da da	
·	Retinal Detachmenttraumatic, fully recovered, exclu			
	KeratoconusExclude, StrabismusWithin 3 yrs, or wi	•		n eyes
	Uveitis or IritisSingle attack < 3 yrsDecline, > 3 yrs N		dividual consideration	
	Mild symptoms, less than 2 years since last attack D	edille		
atty Liver:	Fatty infiltration of the liver.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. What is underlying cause?		Table 2	5576.5
Life	2. What is the amount of alcohol	NS	to	Decline
	consumption?		Table 4	2 3 3 3
		Action		
Individual Disability	Normal liver function results No adverse action			
,	Abnormal liver function results Individual consideration	tion		
bromyalgia:	Pain in muscles, tendons, ligaments and fibrous tissue			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Date of diagnosis?			
	2. Duration of pain, location and	NS	Table 4	
Life	intensity?	to	to	
	3. Any disability or loss of work?	Table 2	Table 6	Decline
	4. Names of medications, frequency and	(No Waiver)	(No Waiver)	
	doses ?	,		
	5. Any psychiatric impairments?	A -41		
	Fully reached less than 2 years. Dealing	Action		
Individual Disability	Fully resolved less than 3 years Decline	C veer benefit period		
	Fully resolved between 3 - 5 years 50% rating with a Fully resolved more than 5 years No adverse action			
	Fully resolved more than 5 years No adverse action			
ramen Ovale:	Congenital abnormal opening between the left & right	t atrium.		
Tamen Ovaic.	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. What testing was done?		iviouelate	Jevere
Life	(Catheterization, echocardiogram)	NS*	Table 2	
0	2. Date/type of any surgery?	to	to	Decline
	3. Date of most recent follow up?	Table 4	Table 8	
	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Action		
Individual Disability	All cases - Individual consideration			
		venting absorption of calori	es & nutrients.	
stric Bypass:	Involves bypassing a portion of the digestive tract pre-	0		Carrana
	Involves bypassing a portion of the digestive tract prev Underwriting Considerations	Mild/Low Grade	Moderate	Severe
astric Bypass: Life			Moderate	Severe
Life	Underwriting Considerations		Moderate	Severe
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	Underwriting Considerations See Weight Reduction Surgery	Mild/Low Grade	Moderate	Severe
	Underwriting Considerations See Weight Reduction Surgery All cases - See Weight Reduction Surgery Restrictive surgery that closes parts of the stomach to	Action make it smaller.		
Life Individual Disability astric Stapling (Gastroplasty):	Underwriting Considerations See Weight Reduction Surgery All cases - See Weight Reduction Surgery Restrictive surgery that closes parts of the stomach to Underwriting Considerations	Mild/Low Grade Action	Moderate	Severe
Life Individual Disability	Underwriting Considerations See Weight Reduction Surgery All cases - See Weight Reduction Surgery Restrictive surgery that closes parts of the stomach to	Action make it smaller. Mild/Low Grade		
Life Individual Disability astric Stapling (Gastroplasty): Life	Underwriting Considerations See Weight Reduction Surgery All cases - See Weight Reduction Surgery Restrictive surgery that closes parts of the stomach to Underwriting Considerations See Weight Reduction Surgery	Action make it smaller.		
Life Individual Disability astric Stapling (Gastroplasty):	Underwriting Considerations See Weight Reduction Surgery All cases - See Weight Reduction Surgery Restrictive surgery that closes parts of the stomach to Underwriting Considerations	Action make it smaller. Mild/Low Grade		

	Ulceration of the stomach.				
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. Frequency & severity of symptoms?				
	2. Types of symptoms & date of last				
	symptom?	NS*			
Life	3. Is there any underlying cause?	to	Table 4	Decline	
	4. Was an endoscopy done?	Table 2			
	5. Details of any medical or surgical				
	treatment?				
		Action			
Individual Disability	Single episode, fully resolved 2 years or less or bleed	ding ulcers Exclude			
,	Single episode, fully resolved more than 2 years N	-			
stroesophageal Reflux Disease (GERD):	A digestive disorder that affects the lower esophage	al sphincter.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. Frequency & severity of symptoms?				
	2. Any complications that have been	NS*	NS		
Life	investigated?	to	to	Postpone	
	3. Any treatment? Names of medication?	Table 2	Table 4	rostpone	
	4. Any testing done?	Table 2	Table 4		
	5. Any surgery?				
		Action			
Individual Disability	Mild symptoms No adverse action				
	Moderate or severe symptoms Exclude				
estational Diabetes:	Glucose intolerance that is first diagnosed during pro	egnancy			
estational Diabetes:	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
		ivilia/ Low Grade	iviouerate	Jevere	
Life	1. Date of diagnosis?	NS*	If remains post delivery,	Pregnant @ time of app	
	2. Currently pregnant?	INS."	refer to Diabetes	Postpone	
	3. Has it been resolved?			<u> </u>	
Individual Disability		Action			
·	All cases (current pregnancy will be excluded) No	adverse action			
<u>lbert's Syndrome</u> :	Metabolic syndrome resulting in elevated bilirubin.				
Life	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. Date of diagnosis?		Best Rating Available		
Individual Disability		Action			
	All cases with normal LFT's, except bilirubin No ad	verse action			
<u>out</u> :	Joint pain from uric acid excess.	2011/10 201		_	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	1. Frequency of attacks?			Table 2	
	2. Any arthritis or joint deformities?	NS*	NS	to	
	3. Details of treatment?			Table 4	
		Action			
	Condition diagnosed more than 2 years ago, with fe	wer than 2 flare ups per year	and not involving multiple join	nts No adverse action	
Individual Disability	Condition diagnosed more than 2 years ago, with fewer than 2 flare ups per year and not involving multiple joints No adverse action Condition diagnosed less than 2 years ago, or with more than 2 flare ups per year or involving multiple joints Exclude				
Individual Disability		nore than 2 flare ups per year			
Individual Disability		nore than 2 flare ups per year			
Individual Disability	Condition diagnosed less than 2 years ago, or with m	nore than 2 flare ups per year			
		nore than 2 flare ups per year			
	Condition diagnosed less than 2 years ago, or with m	nore than 2 flare ups per year Mild/Low Grade			
	Condition diagnosed less than 2 years ago, or with modern and seems ago, or with modern ago, or with moder		or involving multiple joints	Exclude	
uillain-Barre Syndrome:	Condition diagnosed less than 2 years ago, or with modern and series and series ago, or with modern ago, o		or involving multiple joints	Exclude	
	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged		or involving multiple joints Moderate	Exclude	
uillain-Barre Syndrome:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course?	Mild/Low Grade	or involving multiple joints Moderate Table 4	Exclude Severe	
uillain-Barre Syndrome:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered?	Mild/Low Grade	Moderate Table 4 to	Exclude Severe	
uillain-Barre Syndrome:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals?	Mild/Low Grade	Moderate Table 4 to	Exclude Severe	
uillain-Barre Syndrome: Life	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes?	Mild/Low Grade If full recovery, NS	Moderate Table 4 to	Exclude Severe	
uillain-Barre Syndrome:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline	Mild/Low Grade If full recovery, NS Action	Moderate Table 4 to	Exclude Severe	
<u>uillain-Barre Syndrome</u> : Life	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes?	Mild/Low Grade If full recovery, NS Action	Moderate Table 4 to	Exclude Severe	
Life Individual Disability	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse active more than 2 years ago, or with more with more with more said.	Mild/Low Grade If full recovery, NS Action	Moderate Table 4 to Table 6	Exclude Severe	
Life Individual Disability	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse actions.	Mild/Low Grade If full recovery, NS Action ion e or both ears or ringing in th	Moderate Table 4 to Table 6	Severe If present, Postpone	
Life Individual Disability	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action of the partial or complete inability to hear sound in one Underwriting Considerations	Mild/Low Grade If full recovery, NS Action	Moderate Table 4 to Table 6	Exclude Severe	
Life Individual Disability	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action of the partial or complete inability to hear sound in on Underwriting Considerations 1. Specific diagnosis?	Mild/Low Grade If full recovery, NS Action ion e or both ears or ringing in th Mild/Low Grade	Moderate Table 4 to Table 6	Severe If present, Postpone	
Life Individual Disability earing Loss and Tinnitus:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action of the partial or complete inability to hear sound in one Underwriting Considerations 1. Specific diagnosis? 2. Underlying cause?	Mild/Low Grade If full recovery, NS Action ion e or both ears or ringing in th	Moderate Table 4 to Table 6 e ears. Moderate Rating based on caus	Severe If present, Postpone Severe	
Life Individual Disability Pearing Loss and Tinnitus:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action of the partial or complete inability to hear sound in on Underwriting Considerations 1. Specific diagnosis?	Mild/Low Grade If full recovery, NS Action ion e or both ears or ringing in th Mild/Low Grade NS*	Moderate Table 4 to Table 6 e ears. Moderate Rating based on caus	Severe If present, Postpone Severe e and level of impairment	
uillain-Barre Syndrome: Life Individual Disability earing Loss and Tinnitus:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action of the partial or complete inability to hear sound in one Underwriting Considerations 1. Specific diagnosis? 2. Underlying cause?	Mild/Low Grade If full recovery, NS Action ion e or both ears or ringing in th Mild/Low Grade	Moderate Table 4 to Table 6 e ears. Moderate Rating based on caus	Severe If present, Postpone Severe e and level of impairment	
uillain-Barre Syndrome: Life Individual Disability earing Loss and Tinnitus:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action of the partial or complete inability to hear sound in one Underwriting Considerations 1. Specific diagnosis? 2. Underlying cause?	Mild/Low Grade If full recovery, NS Action e or both ears or ringing in th Mild/Low Grade NS*	Moderate Table 4 to Table 6 e ears. Moderate Rating based on caus Possibly no w	Severe If present, Postpone Severe e and level of impairment	
uillain-Barre Syndrome: Life Individual Disability earing Loss and Tinnitus:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action of the partial or complete inability to hear sound in one Underwriting Considerations 1. Specific diagnosis? 2. Underlying cause? 3. Level of severity / impairment of hearing?	Mild/Low Grade If full recovery, NS Action ion e or both ears or ringing in th Mild/Low Grade NS* Action earing loss No adverse action	Moderate Table 4 to Table 6 e ears. Moderate Rating based on caus Possibly no w	Severe If present, Postpone Severe e and level of impairment	
uillain-Barre Syndrome: Life Individual Disability earing Loss and Tinnitus:	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action The partial or complete inability to hear sound in on Underwriting Considerations 1. Specific diagnosis? 2. Underlying cause? 3. Level of severity / impairment of hearing? Hearing Loss-Stable (for greater than 1 year) mild hearing considerations in the complete inability to hearing?	Mild/Low Grade If full recovery, NS Action ion e or both ears or ringing in th Mild/Low Grade NS* Action earing loss No adverse actions Exclude	Moderate Table 4 to Table 6 e ears. Moderate Rating based on caus Possibly no w	Severe If present, Postpone Severe e and level of impairment vaiver of premium	
uillain-Barre Syndrome: Life Individual Disability earing Loss and Tinnitus: Life	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action of the partial or complete inability to hear sound in one Underwriting Considerations 1. Specific diagnosis? 2. Underlying cause? 3. Level of severity / impairment of hearing? Hearing Loss-Stable (for greater than 1 year) mild he Hearing loss-Stable, moderate to severe hearing loss	Mild/Low Grade If full recovery, NS Action ion e or both ears or ringing in th Mild/Low Grade NS* Action earing loss No adverse actions Exclude known to be progressive or was a second control of the con	Moderate Table 4 to Table 6 e ears. Moderate Rating based on caus Possibly no we have the companion of t	Severe If present, Postpone Severe e and level of impairment vaiver of premium	
Life Individual Disability earing Loss and Tinnitus: Life	Acute form of progressive polyneuropathy. Underwriting Considerations 1. Verify if active or a prolonged relapsing/chronic course? 2. Verify if recovered? 3. Any residuals? 4. How many episodes? Fully recovered 1 years or less Decline Fully recovered more than 1 years No adverse action of the partial or complete inability to hear sound in on Underwriting Considerations 1. Specific diagnosis? 2. Underlying cause? 3. Level of severity / impairment of hearing? Hearing Loss-Stable (for greater than 1 year) mild he Hearing loss-Stable, moderate to severe hearing loss Others, including sudden onset, not fully evaluated,	Mild/Low Grade If full recovery, NS Action e or both ears or ringing in th Mild/Low Grade NS* Action earing loss No adverse actions Exclude known to be progressive or with dizziness - Treat as Menier	Moderate Table 4 to Table 6 Rating based on caus Possibly no w with difficulty performing dutiere's Disease	Severe If present, Postpone Severe e and level of impairment valver of premium es of current occupation -	

eart Murmurs:	Disease of the heart valve resulting in abnormal bloo	od flow.		
Life	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	See Valve Disease			
Individual Disability		Action		
marriadar 2 isasinty	See Valve Disease			
emochromatosis:	A genetic or acquired disease of iron metabolism res		·	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	1. Was liver biopsy done?	NS		
Life	2. Any complications?3. Type of treatment?	to	Table 4	Decline
	4. Is there compliance with therapy?	Table 2		
	4. Is there compliance with therapy.	Action		
		Action		
Individual Disability	Diagnosed more than 2 years ago, with normal/stab	le liver function testing and no	complications 50% rating	with a 5 year benefit period
	Others Individual consideration			
mophilia:	Also known as Factor VIII Deficiency, A common her	editary bleeding disorder due	to deficiencies in coagulation	factors.
•	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Clotting factor levels?			
	2. The frequency & severity of symptoms?		Table 2	Table 6
Life	3. Type of treatment?	NS	to	to
	4. Extent of any disabilities?	INS	Table 6	Table 8
	5. Results of most recent HIV test &		100.00	
	Hepatitis B & C status?			
Individual Disability	All access Dealine	Action		
	All cases Decline			
patitis:	Infectious liver disease caused by a hepatitis B virus			
	Underwriting Considerations Hepatitis A	Mild/Low Grade	Moderate	Severe
	1. Treatment?	If infection prese	ent currently or within last 3	months - nostnone
	2. Current problems or residuals?	· ·	esolved and liver functions ref	· ·
	3. Current liver functions normal?			
	Hepatitis B			
	1. Type of infection (acute or chronic)?			
	2. Treatment?	NS to Table 4	Table 6 to Table 8	Decline
	3. Elevated liver enzymes?	NS to Table 4	Table 6 to Table 6	Decline
Life	4. Positive or Negative markers?			
	5. Family history?			
	Hepatitis C			
	1. Age of proposed insured and duration of the			
	disease?			
	2. Treatment details?	Table 2 to Table 4	Table 6 to Table 8	Decline
	3. Serological testing, current liver functions and liver biopsy results?			
	4. Any current alcohol use? If yes, amount per			
	week?			
		Action		
	Hepatitis A, fully resolved No adverse action	71011011		
	Hepatitis B, if chronic or chronic carrier state Decl	ine		
Individual Disability	Hepatitis B in history, fully resolved, not chronic, ant		sideration	
	Hepatitis C spontaneously cleared without treatmen		31461411	
	Hepatitis C all others Decline			
	A common back condition involving discs located in	the vertebrae which can lead t	o irritation of the spinal nerv	es and can cause chronic b
rniated Disk:	and leg pain.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Current treatment?	-		
1 :£_	1	NS*	NS*	See Chronic Pain
Life	2. Currently seeing a Physician?	(No Maiyor)	(No Waiyer)	
Life	2. Currently seeing a Physician?3. Any disability or loss of work?	(No Waiver)	(No Waiver)	
Life	3. Any disability or loss of work?	(No Waiver) Action	(No Waiver)	
Life	3. Any disability or loss of work? Cervical Disc:	Action		
	3. Any disability or loss of work? Cervical Disc: Just a single herniated disc, not surgically treated, an	Action nd no symptoms in the last 2 years.	ears No adverse action	
Life Individual Disability	3. Any disability or loss of work? Cervical Disc: Just a single herniated disc, not surgically treated, ar More than 1 herniated disc, or surgically treated, or	Action nd no symptoms in the last 2 years.	ears No adverse action	
	3. Any disability or loss of work? Cervical Disc: Just a single herniated disc, not surgically treated, ar More than 1 herniated disc, or surgically treated, or Lumbar or Thoracic Disc:	Action nd no symptoms in the last 2 years -	ears No adverse action - Exclude	ction
	3. Any disability or loss of work? Cervical Disc: Just a single herniated disc, not surgically treated, ar More than 1 herniated disc, or surgically treated, or	Action nd no symptoms in the last 2 years - reated, and no symptoms in the	ears No adverse action - Exclude	ction

	A sustained elevation in blood pressure above the lev	vel which is considered to be	acceptable for an individual'	s age and gender.
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Date of diagnosis?			
	2. Current treatment?		Table 3	Table 4
Life	3. Have your blood pressure readings	NS*	to	to
	been normal with treatment?		Table 4	Decline
	4. Any complications?			
		Action		
Individual Disability	Well controlled No adverse action			
•	Others Individual consideration			
IV: Human Immunodeficiency Virus	A virus that attacks the body's immune system.			
The state of the s	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Age25-60	Ivilia/ Low Grade	Wiodelate	Severe
	2. Whole life only			
Life	3. Healthy	Moderate substandard	Decline	Decline
	4. Under the care of an HIV specialist	Woderate substantial a	Decimie .	Decime
	5. Must self-identify			
	3. Wast self-lacitify	Action		
Individual Disability	All cases - Decline			
adelinia Discossi	Cancer of the lymphatic system which is part of your	immune system. Cells in the	lymphatic system grow abno	rmally and compromises y
odgkin's Disease:	body's ability to fight infection. Two common types a	re: Non-Hodgkin's Lymphom	a and Hodgkin's Lymphoma.	
	Underwiting Considerations	Mild/Low Grade	Moderate	Severe
	Underwriting Considerations 1. Date of diagnosis?	iviliu/Low Grade	ivioderate	Severe
	1. Date of diagnosis?			
	2. Staging of disease?	Elat Futus		المساور والمساول
Life	3. What type of treatment was provided?	Flat Extra	Postpone	Highly rated
	4. What was the date of last treatment?	to	2-3 years then Flat Extra	to
	5. Has there been any recurrence?	Postpone	,	Decline
	6. When was the last visit with the			
	oncologist?			
		Action		
Individual Disability	Fully resolved within last 10 years Decline			
	Fully resolved more than 10 years ago Individual co	onsideration		
untington's Disease:	An inherited disease that causes the progressive brea	akdown of muscle coordination	on and can lead to cognitive	decline and psychiatric
	problems			
Life	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Date of diagnosis?		Decline	
Individual Disability		Action		
,	All cases Decline			
	A condition original forms the consequence of all	destance by the education	and location to continue vetocati	an matacaisma laca and
yperaldosteronism:	A condition arising from the excessive secretion of all hypertension.	dosterone by the adrenal gla	nd leading to sodium retention	on, potassium ioss and
		Mild/Low Grade	Moderate	
				Sovere
	Underwriting Considerations	iviiia, zoti Grade	ivioderate	Severe
Life	1. Date of diagnosis?	ilina, zow craac	Moderate	Severe
Life	1. Date of diagnosis?2. Underlying cause?	NS		Severe Pecline
Life	 Date of diagnosis? Underlying cause? Current treatment? 			
Life	1. Date of diagnosis?2. Underlying cause?	NS		
Life	 Date of diagnosis? Underlying cause? Current treatment? Any complications? 	NS Action		
	 Date of diagnosis? Underlying cause? Current treatment? Any complications? Treated with surgery, fully resolved 2 years or less	NS Action Decline		
Life Individual Disability	 Date of diagnosis? Underlying cause? Current treatment? Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year	NS Action Decline rs No adverse action		
	 Date of diagnosis? Underlying cause? Current treatment? Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year	Action Decline rs No adverse action or less Decline	D	Pecline
	 Date of diagnosis? Underlying cause? Current treatment? Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year	Action Decline rs No adverse action or less Decline	D	Pecline
Individual Disability	 Date of diagnosis? Underlying cause? Current treatment? Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren	D	Pecline
Individual Disability	 Date of diagnosis? Underlying cause? Current treatment? Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more to	NS Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren	D	Pecline
Individual Disability ypercalcemia:	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren	al concerns) No adverse ad	ecline
Individual Disability	 Date of diagnosis? Underlying cause? Current treatment? Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations Type of treatment? 	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren	al concerns) No adverse ac Moderate	ecline
Individual Disability ypercalcemia:	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS	al concerns) No adverse ac Moderate Table 3	ecline
Individual Disability ypercalcemia: Life	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications?	NS Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action	al concerns) No adverse ad Moderate Table 3 to	ecline
Individual Disability ypercalcemia:	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved Definition of the calcium level in your blood is the	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline	al concerns) No adverse ad Moderate Table 3 to	ecline
Individual Disability ypercalcemia: Life	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications?	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline	al concerns) No adverse ad Moderate Table 3 to	ecline
Individual Disability ypercalcemia: Life Individual Disability	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved Defunderlying condition identified and resolved Individuals.	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration	al concerns) No adverse ac Moderate Table 3 to Decline	ecline
Individual Disability ypercalcemia: Life Individual Disability	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved Defunderlying condition identified and resolved Individual Condition in which the thyroid gland produces too medical condition in which the thyroid gland produces too medical causes.	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration	Moderate Table 3 to Decline	ecline
Individual Disability ypercalcemia: Life Individual Disability	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved De Underlying condition identified and resolved Individual Condition in which the thyroid gland produces too medical conditions.	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration	al concerns) No adverse ac Moderate Table 3 to Decline	ecline
Individual Disability ypercalcemia: Life Individual Disability yperthyroidism (over active thyroid):	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved Defunderlying condition identified and resolved Individual Condition in which the thyroid gland produces too medical condition in which the thyroid gland produces too medical causes.	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration	Moderate Table 3 to Decline	ecline Severe Decline
Individual Disability ypercalcemia: Life Individual Disability	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved De Underlying condition identified and resolved Individual Condition in which the thyroid gland produces too medical conditions.	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration	Moderate Table 3 to Decline	ecline Severe Decline
Individual Disability Lypercalcemia: Life Individual Disability Lyperthyroidism (over active thyroid):	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved De Underlying condition identified and resolved Individence of the condition in which the thyroid gland produces too medical conditions. Underwriting Considerations 1. Treatment?	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration nuch of the hormone thyroxin Mild/Low Grade	Moderate Table 3 to Decline Moderate	secline Severe Decline Severe
Individual Disability ypercalcemia: Life Individual Disability yperthyroidism (over active thyroid):	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved De Underlying condition identified and resolved Individence of the condition in which the thyroid gland produces too medical conditions in which the thyroid gland produces too medical conditions? 1. Treatment? 2. Complications?	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration nuch of the hormone thyroxin Mild/Low Grade	Moderate Table 3 to Decline Moderate	secline Severe Decline Severe
Individual Disability ypercalcemia: Life Individual Disability yperthyroidism (over active thyroid):	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved De Underlying condition identified and resolved Individence of the condition in which the thyroid gland produces too medical conditions in which the thyroid gland produces too medical conditions? 1. Treatment? 2. Complications?	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration Mild/Low Grade NS NS TO Postpone Action ecline dual consideration	Moderate Table 3 to Decline Moderate Toble 1	secline Severe Decline Severe
Individual Disability ypercalcemia: Life Individual Disability yperthyroidism (over active thyroid):	 Date of diagnosis? Underlying cause? Current treatment? Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more to A condition in which the calcium level in your blood is Underwriting Considerations Type of treatment? Any complications? Underlying condition not identified and resolved Individual Condition in which the thyroid gland produces too multiple Underwriting Considerations Treatment? Complications? Recurrence? 	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration much of the hormone thyroxin Mild/Low Grade NS*	Moderate Table 3 to Decline Moderate NS to Table 2	secline Severe Decline Severe
Individual Disability ypercalcemia: Life Individual Disability yperthyroidism (over active thyroid): Life	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved Do Underlying condition identified and resolved Individence of the condition in which the thyroid gland produces too m Underwriting Considerations 1. Treatment? 2. Complications? 3. Recurrence? Treated with surgery or radioactive iodine treatment. Treated with surgery or radioactive iodine treatment.	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration Mild/Low Grade NS to Postpone Action ecline dual consideration Mild/Low Grade NS*	Moderate Table 3 to Decline Moderate NS to Table 2	secline Severe Decline Severe
Individual Disability Life Individual Disability Lyperthyroidism (over active thyroid): Life	1. Date of diagnosis? 2. Underlying cause? 3. Current treatment? 4. Any complications? Treated with surgery, fully resolved 2 years or less Treated with surgery, fully resolved more than 2 year Treated with medication only, well controlled 1 year Treated with medication only, well controlled more t A condition in which the calcium level in your blood is Underwriting Considerations 1. Type of treatment? 2. Any complications? Underlying condition not identified and resolved Do Underlying condition identified and resolved Individence of the condition in which the thyroid gland produces too m Underwriting Considerations 1. Treatment? 2. Complications? 3. Recurrence? Treated with surgery or radioactive iodine treatment.	Action Decline rs No adverse action or less Decline han 1 year (no cardiac or ren s above normal. Mild/Low Grade NS to Postpone Action ecline dual consideration Mild/Low Grade NS to Postpone Action ecline dual consideration Mild/Low Grade NS*	Moderate Table 3 to Decline Moderate NS to Table 2	secline Severe Decline Severe

- - - - - - - - - - - - - - - - - - -	Condition in which the thyroid gland does not fun	ction properly. Take out goiter/n	odules, use line 702			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	1. Date of diagnosis?2. Treatment?3. Any symptoms or complications?	NS*	NS to Table 2	PP to Decline		
		Action				
Individual Disability	Graves-Treated with surgery or radioactive iodine Graves-Treated with surgery or radioactive iodine					
<u>fertility (Female):</u>	The inability to achieve or maintain a pregnancy.	Astion				
Life	Typically no mortality impact - rate for cause	Action				
		Action				
Individual Disability	adverse action History of unexplained infertility treated with inje	History of unexplained infertility, treated with oral medication only, under age 30 and normal singleton pregnancy and delivery achieve adverse action History of unexplained infertility treated with injectable medications, or over age 30 or with failure to achieve a normal pregnancy Ex Current unexplained infertility under treatment or undergoing evaluation Exclude				
rritable Bowel Syndrome (IBS):	Disorder affecting the gastrointestinal tract, assoc	ciated with abdominal pain/disco	mfort, bloating, and alteration	on of bowel habits.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Treatment? Severity of symptoms? Associated with mood disorder? 	NS*	NS to Table 2	Table 2 to Table 4		
	5.71550cluted With mood disorder.	Action				
Individual Disability	Infrequent and mild symptoms No adverse action Frequent or severe symptoms Exclude	on				
idney Transplantation:	A surgical procedure to place a functioning kidney	r from a donor into a person who	se kidneys no longer functic	on normally.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 What is the underlying cause? Current treatment and medication? Source of transplanted kidney? (i.e. related donor vs. cadaver donor) Any complications? 	Highly Rated to Postpone	D	Pecline		
Individual Disability	The complications.	Action				
maividual bisability	All cases Decline					
eukemia:	A type of cancer of the blood or bone marrow cha Acute Myeloid Leukemia (AML), Chronic Lymphoi					
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
	1. What is the date of diagnosis?					
Life	2. What type of treatment was given?3. Type of leukemia and staging?4. Any recurrences?5. Date of the last oncology visit?	Flat Extra to Postpone	Postpone 5 yrs then Table 4 - 6	Decline		
Life Individual Disability	2. What type of treatment was given?3. Type of leukemia and staging?4. Any recurrences?	to	then	Decline		
Individual Disability	 2. What type of treatment was given? 3. Type of leukemia and staging? 4. Any recurrences? 5. Date of the last oncology visit? All cases Decline 	to Postpone Action	then Table 4 - 6	Decline		
Individual Disability <u>ver Transplant</u> :	2. What type of treatment was given?3. Type of leukemia and staging?4. Any recurrences?5. Date of the last oncology visit?	to Postpone Action	then Table 4 - 6	Decline Severe		
Individual Disability	 2. What type of treatment was given? 3. Type of leukemia and staging? 4. Any recurrences? 5. Date of the last oncology visit? All cases Decline A surgical procedure to remove a diseased liver and 	to Postpone Action Indicate it with a healthy liver for the second sec	then Table 4 - 6 From a donor.	Severe		
Individual Disability ver Transplant:	 2. What type of treatment was given? 3. Type of leukemia and staging? 4. Any recurrences? 5. Date of the last oncology visit? All cases Decline A surgical procedure to remove a diseased liver at Underwriting Considerations 	to Postpone Action Indicate it with a healthy liver for the second sec	then Table 4 - 6 from a donor. Moderate	Severe		
Individual Disability ver Transplant: Life Individual Disability	2. What type of treatment was given? 3. Type of leukemia and staging? 4. Any recurrences? 5. Date of the last oncology visit? All cases Decline A surgical procedure to remove a diseased liver at Underwriting Considerations 1. Date of the transplant? All cases Decline An incurable neuromuscular disease characterized Lateral Sclerosis)	Action Action Independent of the property of	then Table 4 - 6 from a donor. Moderate er on an individual basis, usu s, resulting in paralysis. Also	Severe ally decline known as ALS (Amyotrophic		
Individual Disability ver Transplant: Life Individual Disability	2. What type of treatment was given? 3. Type of leukemia and staging? 4. Any recurrences? 5. Date of the last oncology visit? All cases Decline A surgical procedure to remove a diseased liver at Underwriting Considerations 1. Date of the transplant? All cases Decline An incurable neuromuscular disease characterized Lateral Sclerosis) Underwriting Considerations	to Postpone Action Indicate it with a healthy liver for the Mild/Low Grade Consider Action	then Table 4 - 6 From a donor. Moderate er on an individual basis, usu s, resulting in paralysis. Also Moderate	Severe ally decline		
Individual Disability ver Transplant: Life Individual Disability ou Gehrig's Disease:	2. What type of treatment was given? 3. Type of leukemia and staging? 4. Any recurrences? 5. Date of the last oncology visit? All cases Decline A surgical procedure to remove a diseased liver at Underwriting Considerations 1. Date of the transplant? All cases Decline An incurable neuromuscular disease characterized Lateral Sclerosis)	Action Action Independent of the property of	then Table 4 - 6 from a donor. Moderate er on an individual basis, usu s, resulting in paralysis. Also	Severe ally decline known as ALS (Amyotrophic		

Lung Cancer:	Cancer of the lung and bronchus. There are two ty benign lung tumors usually asymptomatic: bronch					
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Staging? Date of diagnosis? Treatment details (surgery, radiation, chemotherapy)? Any recurrences? Current smoker? Former smoker? If yes, date they quit? Any complications after treatment? 	NS	Flat Extra to Postpone	Decline		
	o. Any complications after treatment:	Action				
Individual Disability	Stage I, within last 5 years Decline Stage I, fully recovered, more than 5 years ago I Higher stages Decline	Stage I, fully recovered, more than 5 years ago Individual consideration				
Lunue	A chronic inflammatory disease that occurs when	the hody's immune system attacks	s its own tissues and organ	25		
<u>Lupus:</u>	Underwriting Considerations 1. What is the date of diagnosis?	Mild/Low Grade	Moderate	Severe		
Life	2. Current treatment?3. Current symptoms?4. When was the last flare up or episode?	Table 4 to Postpone	Table 4 to Table 8	Highly Rated to Decline		
	5. Date of the last rheumatology visit?	Action				
Individual Disability	Discoid or Cutaneous Lupus diagnosed between 3 - Exclude and 25% rating	Systemic Lupus Decline Discoid or Cutaneous Lupus diagnosed within the last 3 years Decline Discoid or Cutaneous Lupus diagnosed between 3 and 5 years ago, well followed, limited disease, no evidence of Systemic Lupus, no residude and 25% rating Discoid or cutaneous Lupus diagnosed more than 5 years ago, well followed, limited disease, no evidence of Systemic Lupus, no residuals				
Lyme Disease:	An inflammatory disorder caused by a bacteria that	at is spread by the bite of a tick.				
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 What is the date of diagnosis? What type of treatment was given? Any current symptoms? Any complications or residual problems? Was there a full recovery? 	Postpone until Recovered then NS*]	Decline		
		Action				
Individual Disability	Fully resolved within past 6 months Exclude Fully resolved, more than 6 months ago No adve	erse action				
Marfan's Syndrome:	A genetic disorder of the connective tissue that ca unusually tall with long limbs and long, thin fingers		and ocular abnormalities.	People with this syndrome are		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Diagnosis date? Last echocardiogram findings? Any use of beta-blockers? 	Table 2 to Table 8	Table 8 to Decline	Decline		
Individual Disability	5. Any history of heart surgery? All cases Individual consideration, usually declin	Action				
Melanoma:	The most serious from of skin cancer, melanoma i of control and attacks the tissues around them. U		•			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Date of diagnosis? Thickness and depth of tumor? Type of treatment? Date of surgery or treatment? Any occurrence of more than 1 melanoma? Date of most recent follow up? 	NS to Flat Extra	Postpone 2 -3 Years then Flat Extra	Decline		
		Action				
Individual Disability	Melanoma insitu, no lymph nodes/no metastasis- OthersUsually decline					

Meniere's Disease:	A chronic condition in which there are episodic attacks of sensorineural deafness and vertigo, associated with nausea and vomiting. Another name for this disease is Labyrinthitis or Otitis Interna.				
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. Date of diagnosis? 2. Frequency of attack (acute, chronic,	Mild/Low Grade	Moderate		
Life	recurrent)? 3. Last episode date?	NS*	(No	NS • Waiver)	
	4. Any neurological testing's?	Action			
Individual Disability	Rare episodes of short duration and no symptoms in t Any symptoms in the past 3 years or any history of fre	the past 3 years Exclude	s Decline		
leningitis (History of) :	Inflammation of brain covering (meninges), often of t case would be a postpone.				
	Underwriting Considerations 1. Date of diagnosis?	Mild/Low Grade	Moderate	Severe	
Life	2. Any residuals? 3. Date of resolution?	NS*	NS	Decline	
Individual Disability		Action			
marviadar Bisasinty	Fully recovered No adverse action				
ental/Emotional: Depression, Major Depression, xiety, Adjustment Disorder, Bipolar disorder, stpartum depression:	Emotional and/or behavior symptoms occurring in resand hopelessness, or chronic worry. Symptoms can	•		lings of sadness, discouragement	
stpartum depression:	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	Date of diagnosis and current treatment? Specific Diagnosis? (Bi-Polar,				
	Anxiety, etc)	NS*	Table 3		
Life	3. Date of last episode?4. Currently seeing a specialist?	to	to	Decline	
	5. If any, names of medications, how often?	Table 2	Table 8		
	6. Any disability or loss of work?				
	Exclude Adjustment disorder-No longer under treatm	Action			
Individual Disability	Anxiety or Depression-Severe or with unexplained physical Major Depression-within last year Decline, Single explored Consideration, usually decline *Benefit Periods are dependent upon the severity of Consideration - Postpartum Fully resolved within the last 12 months Decline Fully resolved more than 12 months ago, applicant sti	pisode < 5 years exclude Bipoleach condition	ar Disorder- < 5 years De		
	I Fully received more than 12 months ago, applicant no	-			
	Fully resolved more than 12 months ago, applicant no	-			
graine Headaches:	Fully resolved more than 12 months ago, applicant no A category of headaches.	-			
igraine Headaches:	A category of headaches. Underwriting Considerations	-		Severe	
igraine Headaches: Life	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity?	ot capable of child-bearing N	Moderate Recent onset or incre postponement - terr	Severe rasing frequency may cause ms depend on history and tions performed	
	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause?	Mild/Low Grade NS*	Moderate Recent onset or incre postponement - terr investigat	rasing frequency may cause ms depend on history and	
	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity?	Mild/Low Grade NS* Action od response to medication Exclude	Moderate Recent onset or incre postponement - terr investigat	rasing frequency may cause ms depend on history and	
Life Individual Disability	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good 5 to 8 migraine headache days per month, good response of the service of the	Mild/Low Grade NS* Action od response to medication Nonse to medication Exclude not responsive to medication	Moderate Recent onset or incre postponement - terr investigat	rasing frequency may cause ms depend on history and	
Life Individual Disability	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good 5 to 8 migraine headache days per month, good response.	Mild/Low Grade NS* Action od response to medication Nonse to medication Exclude not responsive to medication	Moderate Recent onset or incre postponement - terr investigat	rasing frequency may cause ms depend on history and	
Life Individual Disability	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good 5 to 8 migraine headache days per month, good respondence than 8 migraine headache days per month, or not a condition in which the mitral valve does not function	Mild/Low Grade NS* Action od response to medication Nonse to medication Exclude not responsive to medication	Moderate Recent onset or incre postponement - terr investigat No adverse action - Decline	easing frequency may cause ms depend on history and ions performed	
Life Individual Disability	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good 5 to 8 migraine headache days per month, good response than 8 migraine headache days per month, or not a condition in which the mitral valve does not function Underwriting Considerations 1. Symptoms or treatment?	Mild/Low Grade NS* Action od response to medication Nonse to medication Exclude not responsive to medication In properly. Mild/Low Grade NS*	Moderate Recent onset or incre postponement - terr investigat No adverse action - Decline Moderate Table 2	sasing frequency may cause ms depend on history and cions performed Severe Table 6	
Individual Disability tral Valve Prolapse: Life	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good 5 to 8 migraine headache days per month, good respondered than 8 migraine headache days per month, or note than 8 migraine headache	Mild/Low Grade NS* Action od response to medication Nonse to medication Exclude not responsive to medication In properly. Mild/Low Grade NS* Action	Moderate Recent onset or incre postponement - terr investigat No adverse action - Decline Moderate Table 2 to	sasing frequency may cause ms depend on history and ions performed Severe Table 6 to	
Life Individual Disability tral Valve Prolapse:	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good 5 to 8 migraine headache days per month, good respondence than 8 migraine headache days per month, or not a condition in which the mitral valve does not function to the condition or treatment? 1. Symptoms or treatment? 2. Any valvular stenosis or insufficiency /	Mild/Low Grade NS* Action od response to medication Nonse to medication Exclude not responsive to medication In properly. Mild/Low Grade NS* Action e action Decline	Moderate Recent onset or incre postponement - terr investigat No adverse action - Decline Moderate Table 2 to Table 4	sasing frequency may cause ms depend on history and ions performed Severe Table 6 to	
Individual Disability itral Valve Prolapse: Life Individual Disability onoclonal Gammopathy of Undetermined Significance	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good 5 to 8 migraine headache days per month, good responding than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, good respondent to a condition in which the mitral valve does not function to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note than 8 migraine headache days per month, good respondent to a condition or note that a conditio	Mild/Low Grade NS* Action od response to medication Nonse to medication Exclude not responsive to medication exclu	Moderate Recent onset or incre postponement - terr investigat No adverse action - Decline Moderate Table 2 to Table 4 consideration	sasing frequency may cause ms depend on history and cions performed Severe Table 6 to Decline	
Individual Disability Iitral Valve Prolapse: Life	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good response to 8 migraine headache days per month, good response than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, good response than 8 migraine headache	Mild/Low Grade NS* Action od response to medication Nonse to medication Exclude not responsive to medication exclu	Moderate Recent onset or incre postponement - terr investigat No adverse action - Decline Moderate Table 2 to Table 4 consideration	sasing frequency may cause ms depend on history and cions performed Severe Table 6 to Decline	
Individual Disability itral Valve Prolapse: Life Individual Disability onoclonal Gammopathy of Undetermined Significant (MGUS)	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good response to 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, or note than 8 migraine headache days per month, good response to 8 migraine headache	Mild/Low Grade NS* Action Od response to medication Nonse to medication Exclude not responsive to medication In properly. Mild/Low Grade NS* Action Paction Mild/Low Grade Mild/Low Grade Mild/Low Grade Mild/Low Grade	Moderate Recent onset or incre postponement - terr investigat No adverse action - Decline Moderate Table 2 to Table 4 consideration consideration sive production of immunositolobulin is termed the M pro	Severe Table 6 to Decline globulin's referred to as a otein. If client was diagnosed	
Individual Disability Individual Disability Life Individual Disability Individual Disability	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good responsion of the second of	Mild/Low Grade NS* Action od response to medication Nonse to medication Exclude not responsive to medication Exclude not responsive to medication Mild/Low Grade NS* Action e action Decline fiogram < 3 years Individual of the excess onormally produced immunog Mild/Low Grade MGUS Only NS to	Moderate Recent onset or incre postponement - terr investigat No adverse action - Decline Moderate Table 2 to Table 4 consideration consideration sive production of immunositolobulin is termed the M pro	Severe Table 6 to Decline globulin's referred to as a otein. If client was diagnosed	
Individual Disability itral Valve Prolapse: Life Individual Disability onoclonal Gammopathy of Undetermined Significant	A category of headaches. Underwriting Considerations 1. Date of onset? 2. Type of treatment? 3. Frequency and severity? 4. Underlying cause? Fewer than 5 migraine headache days per month, good 5 to 8 migraine headache days per month, or now more than 8 migraine headache days per month, or now more than 8 migraine headache days per month, or now more than 8 migraine headache days per month, or now more than 8 migraine headache days per month, or now more than 8 migraine headache days per month, or now more than 8 migraine headache days per month, or now more than 8 migraine headache days per month, or now more than 8 migraine headache days per month, or now more than 8 migraine headache days per month, good respondent in which the mitral valve does not function work more than 8 migraine headache days per month, good respondent in which the mitral valve does not function work more than 8 migraine headache days per month, good respondent in which the mitral valve does not function work more than 8 migraine headache days per month, good respondent in which the mitral valve does not function work more than 8 migraine headache days per month, good respondent in which the mitral valve does not function in which the more more more more more more more mor	Mild/Low Grade NS* Action Od response to medication Nonse to medication Exclude not responsive to medication Exclude not responsive to medication Mild/Low Grade NS* Action Action Action Action Caccion Cacci	Moderate Recent onset or incre postponement - terr investigat No adverse action - Decline Moderate Table 2 to Table 4 consideration live production of immunoglobulin is termed the M pro	Severe Table 6 to Decline Globulin's referred to as a otein. If client was diagnosed Severe Multiple Myeloma	

Multiple Sclerosis:	Multiple Sclerosis (MS) is an inflammatory demyelin which is characterized by multifocal loss of myelin (to axons (the nerve fibers themselves).	_		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	1. Date of diagnosis?2. Current symptoms and/or treatment?	NS	Table 4	Table 8
LITE	(medication/s)? 3. Date of last attack? Frequency of	to Table 4	to Table 6	to Decline
	attacks?		Tuble 0	Decime
Individual Disability	All cases Decline	Action		
uscular Dystrophy:	A group of hereditary muscle disorders in which slov			
	Underwriting Considerations	Mild/Low Grade	Moderate Table C	Severe
Life	1. Date of diagnosis?	Table 2 to	Table 6 to	Decline
	2. Type?	Table 6	Decline	Decime
		Action	2 000	
Individual Disability	All cases Decline			
vasthenia Gravis:	Myasthenia Gravis is a chronic disease characterized by episodic and varying weakness of voluntary (skeletal) muscles. Clients diagnosed one year are a postpone.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life		NS	Table 4	
Lile	1. Date of diagnosis?2. Treatment (surgery, medications)?	to	to	Decline
	z. Treatment (Surgery, medications)?	Table 4	Decline	
Individual Disability		Action		
individual Disability	All cases Decline			
rcolepsy:	A syndrome of four components characterized by sle the occurrence of hallucinations on falling asleep or		, inability to move on falling	asleep or on awakening a
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Date of diagnosis?			
	2. Symptoms?	NS	Table 2	
Life	3. Any accidents, disability, time off	to	to	Decline
	work?	Table 2	Table 4	Decline
	4. Treatment (medications, response to	Table 2	Table 4	
	treatment?	Action		
	Diagnosed within last 2 years Decline	Action		
Individual Disability	Diagnosed within last 2 years Decline Diagnosed more than 2 years ago, mild symptoms, of the control of the		_	
edle Stick:	Accidental exposure to blood, tissues and/or body fl	luids.		
		Action		
Life	Less than 6 months: With documented evidence that the source patient is Without documented evidence of source patient state. More than 6 months: With documentation of the event and current negate. Otherwise = Postpone	atus = Postpone		nction testing = NS*
		Action		
Individual Disability	Current testing for Hepatitis B, Hepatitis C and HIV a Current testing for Hepatitis B, Hepatitis C and HIV a	•	•	
phrolithiasis (kidney stones):	A stone in the kidney or lower down in the urinary tr	ract.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	1. Number of attacks? 2. Treatment?	NS*	Table 2	Table 3 to T-LI- 4
	3. Additional factors (i.e. hypertension, abnormal	IND.	to Table 4	Table 2 to Table 4
	urinalysis)?		Table 4	
		Action		
	Any number of episodes of passed kidney stones wit	th no urinary tract abnormality	or damage No adverse ac	ction
Individual Disability	Any number of episodes of passed kidney stones wit		•	
Individual Disability	Any number of kidney stones currently present with		-	dverse action
	Any number of kidney stones currently present with	underlying urinary tract abnor	mality or damage Exclude	
	Any kidney stones that required an open surgical pro	ocedure Exclude		

Non-Hodgkin's Lymphomas:	There are two main types of lymphomas, Hodgkin's ly	mphoma and non-Hodgkin's	lymphoma (NHL).	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	Staging and pathology? Lymphoma type? Low or High Grade? Treatment with chemotherapy?			
Life	Radiation?	Table 2	Postpone at least 2 years	- "
	3. Diagnosis date? Date of remission if	to	then	Decline
	in remission?	Postpone	Flat Extra	
	4. Complications after treatment? Any			
	recurrences?			
		Action		
Individual Disability	Fully resolved within last 10 years Decline			
	Fully resolved more than 10 years ago Individual co	nsideration		
Non-Melanoma Skin Cancer Also Atypical Nevus Syndrome, Dysplastic Nevus Syndrome, Merkel Cell Tumor, Basal Cell Carcinoma, Squamous Cell Carcinoma):	Skin tumors and lesions other than melanoma, most o	commonly arising in sun-dan	naged skin.	
quamous cen carcinoma):	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	Underwriting Considerations 1. How many lesions?	iviliu/ Low Grade	iviouerate	Severe
Life	2. Do they have regular full body surface			
	skin examinations?	NS*	Flat Extra	Possible Decline
	3. Have all lesions been removed?			
		Action		
	Basal Cell Cancer skin lesions surgically removed, com	npliant with follow up No a	dverse action	
Individual Disability	Basal Cell Present or non-compliant Exclude			
mulviduai Disability	Dysplastic Nevi-No history of malignant melanoma-No			
	Merkel Cell CarcinomaRemoved/No metastasis - Exclude, Multiple or metastasis-Decline			
	Squamous Cell CarcinomaNo metastasis-fully remov	red, compliant with follow up	oNo adverse action	
Nobia Nassitia	A demonstrating inflammation of the entire name			
Optic Neuritis:	A demyelinating inflammation of the optic nerve.	Mild/Low Grado	Moderate	Sovoro
	Underwriting Considerations	Mild/Low Grade	ivioderate	Severe
Life	1. Date of onset?	NS	Pating based on und	orlying disorder, result of
Life	2. Underlying cause determined?3. Level of severity / impairment of vision?	to Table 3	_	erlying disorder, result of nd date of last attack
	4. Functional capacity?	No waiver of premium	investigations at	id date of last attack
	4. Functional capacity:	Action		
		1 10000		
Individual Disability	Episode within past 10 years, cause unknown Declir Episode more than 10 years ago, normal MRI, cause u With MRI abnormalities Decline		5 year benefit period	
Osteoarthritis:	A condition in which the protective cartilage on the en	nds of bones wears down. Co	ondition may be associated v	vith inflammation of soft
	ticcues			
	tissues.	Mild/Low Grado	Moderate	Covoro
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	Underwriting Considerations 1.Severity of disease?	-	NS	
Life	Underwriting Considerations 1.Severity of disease? 2. Associated with chronic pain?	NS*	NS to	Table 2
Life	Underwriting Considerations 1.Severity of disease? 2. Associated with chronic pain? 3. Type of treament?	-	NS to Table 2	
Life	Underwriting Considerations 1.Severity of disease? 2. Associated with chronic pain?	NS* (No waiver)	NS to	Table 2
	Underwriting Considerations 1.Severity of disease? 2. Associated with chronic pain? 3. Type of treament?	NS* (No waiver) Action	NS to Table 2 (No waiver)	Table 2 (No waiver)
Life Individual Disability	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent to	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me	NS to Table 2 (No waiver) tional concerns No adverse	Table 2 (No waiver)
	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent of Severe symptoms, daily or frequent use of narcotics.	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline	NS to Table 2 (No waiver) tional concerns No adverse	Table 2 (No waiver)
	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent to	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline	NS to Table 2 (No waiver) tional concerns No adverse	Table 2 (No waiver)
Individual Disability	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent of Severe symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline	NS to Table 2 (No waiver) tional concerns No adverse	Table 2 (No waiver)
Individual Disability	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent of Severe symptoms, daily or frequent use of narcotics.	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline d Exclusions	NS to Table 2 (No waiver) tional concerns No adverse	Table 2 (No waiver)
Individual Disability	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent Severe symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear.	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline d Exclusions Action	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Otosclerosis:	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent of Severe symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline d Exclusions Action uld be excluded for moderate	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Dtosclerosis: Life	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent Severe symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear. Typically no mortality impact - waiver of premium countries.	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline d Exclusions Action	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Dtosclerosis:	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent Severe symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear.	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline d Exclusions Action uld be excluded for moderate	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Dtosclerosis: Life	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent usevere symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear. Typically no mortality impact - waiver of premium countries.	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline d Exclusions Action uld be excluded for moderate	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Dtosclerosis: Life Individual Disability	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent usevere symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear. Typically no mortality impact - waiver of premium countries.	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline d Exclusions Action uld be excluded for moderate	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Dtosclerosis: Life Individual Disability Dvarian Cysts:	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent usevere symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear. Typically no mortality impact - waiver of premium countries. Present Exclude both ears Surgically treated, no residuals No adverse action	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline d Exclusions Action uld be excluded for moderate	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Dtosclerosis: Life	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent usevere symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear. Typically no mortality impact - waiver of premium countries. Present Exclude both ears Surgically treated, no residuals No adverse action	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me Decline d Exclusions Action ald be excluded for moderate Action Action	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Dtosclerosis: Life Individual Disability Dvarian Cysts:	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear. Typically no mortality impact - waiver of premium countries. Present Exclude both ears Surgically treated, no residuals No adverse action Cyst of the ovary.	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me Decline d Exclusions Action ald be excluded for moderate Action Action	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Dtosclerosis: Life Individual Disability Dvarian Cysts: Life	Underwriting Considerations 1. Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear. Typically no mortality impact - waiver of premium countries. Present Exclude both ears Surgically treated, no residuals No adverse action Cyst of the ovary. Typically no mortality impact if benign pathology confined to the currently symptomatic No adverse action	NS* (No waiver) Action latory medication no occupaluse of anti-inflammatory medication has been described as a constant of the constant of th	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)
Individual Disability Dtosclerosis: Life Individual Disability Dvarian Cysts:	1.Severity of disease? 2. Associated with chronic pain? 3. Type of treament? 4. Joint replacement? Infrequent minor symptoms, rare use of anti-inflamm Mild or moderate symptoms, occasional to frequent usevere symptoms, daily or frequent use of narcotics - After joint replacement or resurfacing, fully recovered. The over growth of bone in the middle and inner ear. Typically no mortality impact - waiver of premium countries. Present Exclude both ears Surgically treated, no residuals No adverse action Cyst of the ovary. Typically no mortality impact if benign pathology confirmation.	NS* (No waiver) Action atory medication no occupa use of anti-inflammatory me - Decline d Exclusions Action Id be excluded for moderate Action Action Firmed, no Polycystic Ovary S Action	NS to Table 2 (No waiver) tional concerns No adverse dication Exclude	Table 2 (No waiver)

acemaker (excluding defibrillator) :	A medical device that uses electrical impulses, deliver	red by electrodes contacting t	he heart muscles, to regulate	e the beating of the heart.	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	1. Date of initial pacemaker insertion?	NS	Table 2		
	2. Underlying disease that required the	to	to	Decline	
	pacemaker to be inserted? Table 2 Table 3				
Individual Disability		Action			
marriadar Bisasinty	All cases Decline				
ncreatitis:	Pancreatitis is characterized by inflammation and nec cases. Inflammation of the pancreas may be acute or If client had an acute attack within six months it woul	chronic. Acute pancreatitis o	ccurs in discrete episodes or	attacks followed by recove	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. How many episodes? Date of last	NS	Table 2	Table 6	
Life	episode? Frequency of episodes?	to	to	to	
	2. Any underlying cause?	Flat Extra	Table 6	Decline	
	3. Any medical or surgical treatment?		Tuble 0	Decime	
Individual Disability	Single episode within the last 2 years, or multiple episons Single episode more than 2 years ago, fully recovered			adverse action	
kinson's Disease:	Disease characterized by progressive rigidity of limbs speech, facial immobility and tendency to mild deme	ntia.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	1. Date of diagnosis?	Table 2	Table 4	Table 8	
0	2. Symptoms?	to	to	to	
	3. Treatment (medications)?	Table 3	Table 6	Decline	
Individual Disability		Action			
mulviduai bisability	All cases Decline				
ipheral Neuropathy:	Damage to the nerves of the brain or spinal cord, whi	ch is caused by either disease	s of or trauma to the nerve o	or the side-effects of syste	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. Date when symptoms began?	·			
	2. Type of treatment received?	NS	Table 3		
Life	3. Any underlying health conditions such	to	to	Decline	
	as Diabetes or Kidney disease?	Table 2	Table 8		
	4. Details of current symptoms?				
	т состоя станования в состоя в	Action			
Individual Disability	Fully recovered Exclude				
ipheral Vascular Disease (PVD and Peripheral Arter ease PAD):	Any disease or disorder of the blood vessels outside of	of the brain and heart.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. Date of diagnosis?				
Life	2. Results of any treadmill testing?	Table 2	Table 4	Table 10	
Life	3. Date and type of treatment?	to	to	to	
	4. Any tobacco use in the last year?	Table 4	Table 8	Decline	
	5. Other medical history?				
Individual Disability		Action			
	Individual consideration				
ycystic Kidney Disease:	An inherited disorder where multiple cysts develop in	n kidneys.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. Present diagnosis?				
	2. Age of client?				
Life	3. Family history?				
20	4. Treatment?	Tab	ole 6 to decline (depending o	n age)	
	5. Abnormal renal functions?				
	6. Additional factors (i.e. Hypertension, Hematuria,				
	Renal transplant, etc)?				
Individual Disability	All cases Decline	Action			
	All cases Decline				
ymyalgia Rheumatica:	An inflammatory disorder which courses	and stiffness mainly in the	ek chouldors arms him -	thighs	
	An inflammatory disorder which causes muscle pain a	· · · · · · · · · · · · · · · · · · ·			
	Underwriting Considerations 1. Date of diagnosis?	Mild/Low Grade	Moderate	Severe	
Life	1. Date of diagnosis?				
Life	2. Type of treatment?	NS	Table 2	Postpone	
	3. Has this condition resolved? If so,			•	
		•			
	when?				
Talabata - I Princi 199		Action			
Individual Disability	Fully recovered less than 1 year Decline Fully recovered 1 year or more No adverse action	Action			

Post Traumatic Stress Disorder:	A mental health disorder that occurs as a result of a	a traumatic ovent		
Post Traumatic Stress Disorder:			Modorato	Couoro
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Present diagnosis?			
Life	2. Severity?	NS	Table 4	
Life	3. Treatment?	to	to	Decline
	4. Recurrence?	Table 4	Table 8	
	5. Substance abuse?			
	6. Any hospitalizations?			
		Action		
Individual Disability	Diagnosed, or with any symptoms in the last 5 years	s Decline		
marvidual bisability	Fully recovered between 5 to 10 years ago Exclud	le with a short term benefit per	riod	
	Fully recovered more than 10 years ago No adver	se action		
regnancy:				
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
Life	1. Due date?			6
	2. Type of complication(s)?	NS*	Postpon	e until after birth
		Action		
		7.000		
	Currently pregnant without any significant current of	complications Exclude		
Individual Disability	Currently pregnant with significant current complications	ations Decline		
ilidividual Disability	Not currently pregnant with past history of gestatio	nal diabetes or single miscarria	ge, or elective C-Section	No adverse action
	Not currently pregnant, but with past history of pre	mature labor, pre-eclampsia, ir	ncompetent cervix, multiple	e miscarriages, or other similarly
	complicated prior pregnancies or with history of ce	rtain infertility treatments or u	nderlying conditions Excl	ude
Prostate Cancer:	The 2nd most common form of cancer is an abnorn		Is in the prostate glad, how	vever, unlike most other cancers,
Tostate carreers	usually does not grow uncontrollably and metastas	ize to other areas.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Date of diagnosis?			
	2. Stage?	NC	Postpone	
Life	3. Gleason Score and most recent PSA?	NS	2 - 3 Years	Dooling
	4. Type of treatment?	to	then	Decline
	5. Date of surgery or treatment?	Postpone	Flat Extra	
	6. Date of most recent follow up?			
		Action		
	Stage I, within the last 2 years Decline			
	Stage I, fully recovered, more than 2 years ago Ex	clude		
Individual Disability	Stage IIA, within the last 4 years Decline	iciade		
	Stage IIA, fully recovered more than 4 years ago I	Evolude		
	Higher stages or any diagnosis under age 50 Decli			
	Trighter stages of any diagnosis under age 50 Been			
Psoriasis:	A chronic autoimmune disease that appears on the	skin.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
1:4-	1. Severity?			
Life	2. Type of treatment?	NS*	Table 2	Rate for associated arthropath
	3. Any associated arthropathy?			'
		Action		
Individual Disability	All cases Exclude (additional rating possible for ce	ertain medications)		
Pulmonary Embolism:	A blockage in one or more arteries in the lungs usua	ally caused by blood clots that t	travel from another part of	the body, most commonly the
	legs.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe
	1. Date of occurrence?			
	2. Single or multiple episodes? If	NC	Table 2	
Life	multiple, when was last episode?	NS +o	Table 3	Doct
	3. Cause of the Embolism?	to	to	Postpone
	4. Type of treatment? When was	Table 2	Table 4	
	treatment stopped?			
		Action		
	Single episode within the last 6 months Decline			
Individual Disability	Single episode within the last of months = Decline Single episode fully recovered between 6 month an	d 2 years Exclude		
marriada Disasiiity	Single episode fully recovered more than 2 years			
	Multiple episodes Decline	daverse dediti		
	Interchipe episodes Decilie			

Raynaud's Disease:	A condition that causes fingers, toes, the tip of the			eratures or stress. More o	
	nuisance than a disability and not associated with a Underwriting Considerations	other diseases or health problems Mild/Low Grade	Moderate	Severe	
Life	 Diagnosed with Raynaud's Disease or Phenomenon? Date of diagnosis? Type of treatment? 	NS*	Table 2 to	Table 4 to	
	4. Date of last attack? Frequency of attacks?		Table 4	Decline	
	Activity and the second second	Action			
Individual Disability	Mild symptoms not needing treatment No adverse action Mild to moderate symptoms with treatment, or moderate symptoms Exclude Severe symptoms or secondary to another disease Individual consideration				
Reiter's Syndrome/Reactive Arthritis:		Inflammation of the joints, urinary tract, and eyes and often ulcerations of the skin and mouth brought on by an infection in another partitle body, usually the intestines, genitals, eyes, or urinary tract.			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	1. Date of first and last attack?2. Type of treatment?	NS*	NS to Table 2	Table 3 to Table 6	
		Action			
Individual Disability	Stable for at least 1 year, with no worse than mild Fully resolved 1 year or more ago, or with mild arth Others Decline		le		
Renal Failure:	The loss of kidney function where the kidney can neither acute or chronic and a number of diseases a			blood. Renal failure may	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	 Date of diagnosis? Stage of chronic kidney failure? (1-5) Type of treatment? 	NS	Table 2 to Table 4	Decline	
Individual Disability		Action			
,	All cases Decline				
Rheumatoid Arthritis:	An autoimmune form of arthritis that causes pain, fingers.	swelling, stiffness, and loss of fun	nction in any joint but is mos	t common in the wrist and	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. Date of diagnosis?2. Type of treatment?	NS*	Table 2	Table 4	
Life	3. What joints are affected?	to	to	to	
	4. How does it affect function, mobility,	Table 2	Table 3	Decline	
	and daily life?				
		Δction			
Individual Disability	All cases Decline	Action			
Individual Disability	All cases Decline	Action			
	The development of tiny clumps of inflammatory c is unknown.	ells in different areas of the body		•	
	The development of tiny clumps of inflammatory of is unknown. Underwriting Considerations		, usually the lungs, lymph no	des, eyes, and skin. The ca	
arcoidosis:	The development of tiny clumps of inflammatory of is unknown. Underwriting Considerations 1. Date of diagnosis?	ells in different areas of the body		•	
	The development of tiny clumps of inflammatory of is unknown. Underwriting Considerations 1. Date of diagnosis? 2. What organ's or body part's have been affected?	ells in different areas of the body	Moderate NS to	•	
arcoidosis:	The development of tiny clumps of inflammatory of is unknown. Underwriting Considerations 1. Date of diagnosis? 2. What organ's or body part's have been affected? 3. Type of treatment?	ells in different areas of the body Mild/Low Grade	Moderate NS	Severe	
Sarcoidosis:	The development of tiny clumps of inflammatory of is unknown. Underwriting Considerations 1. Date of diagnosis? 2. What organ's or body part's have been affected?	ells in different areas of the body Mild/Low Grade	Moderate NS to	Severe	
Sarcoidosis:	The development of tiny clumps of inflammatory of is unknown. Underwriting Considerations 1. Date of diagnosis? 2. What organ's or body part's have been affected? 3. Type of treatment? 4. When last experienced symptoms?	ells in different areas of the body Mild/Low Grade NS* Action	Moderate NS to	Severe	
Sarcoidosis:	The development of tiny clumps of inflammatory of is unknown. Underwriting Considerations 1. Date of diagnosis? 2. What organ's or body part's have been affected? 3. Type of treatment?	ells in different areas of the body Mild/Low Grade NS* Action ar of full recovery - Decline	Moderate NS to Table 4	Severe	

Seizure Disorder:	Seizures occur because of sudden, abnormal electrica and certain diseases. There are two main categories of involve much more or all of the brain. Epilepsy is recu	of seizures: Partial seizures inv	olve only a part of the brain		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	 Date of diagnosis? Cause of the seizure(s)? Type of seizure(s) experienced? Date of last seizure? Number of seizures per year? Type of treatment? Any lasting mental or physical effects from seizure(s)? 	NS to Table 3	Table 4 to Table 8	Decline	
	Hom scizurc(s):	Action			
Individual Disability iickle Cell Anemia:	Epilepsy 0-2 years since last seizure or change in seizure medicationDecline Epilepsy > 2 years since last seizure or change in seizure medicationNo adverse action Isolated seizure, seizure onset after age 40 or status epilepticus, othersIndividual consideration/Usually decline An inherited condition diagnosed in infancy in which misshaped red blood cells break apart more easily and block adequate blood flow throughout the body. This can cause severe pain and permanent damage to numerous vital organs. There is no cure but treatments can relieve pain and help prevent further problems. Sickle cell trait only can be considered for Best Rates.				
Life	Underwriting Considerations 1. Age at diagnosis? 2. Date of last attack? 3. Any complications?	Mild/Low Grade Table 2 to Table 4	Moderate Table 6 to Table 10	Severe Decline	
Individual Disability	Sickle cell anemia, all cases Decline Sickle cell trait, no other blood abnormality, no histor Sickle cell trait, with other blood abnormality, or any	•			
ogren Syndrome:	A systemic autoimmune disease in which immune cel associated with other connective tissue disorders suc			rs and saliva. May be	
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	1. Diagnosis?2. Any other diagnosis of Rheumatoid Arthritis or Lupus?	Sjogren's alone NS (No Waiver)	Table 2 to Table 4 (No Waiver)	Table 4 to Decline (No Waiver)	
Individual Disability	Diagnosed more than 5 years ago, mild symptoms, no Diagnosed within last 5 years or with worse than mild		ended Exclude		
kin Conditions (Dermatitis, Eczema, Latex Allergy):	Inflammations and/or irritation involving the skin. La	itex allergy may include respi	ratory symptoms.		
		Action			
Life	Typically no mortality impact - waiver of premium co	uld be excluded for severe cas	es		
Individual Disability	Dermatitis & Eczema- Occupational related, or severe Latex-skin reaction only, not severe, resolved with lat Latex-skin reaction only, not severe, resolved with lat Latex-Respiratory reaction, or severe symptoms or an	tex avoidance - single episode tex avoidance - recurrent episo	No adverse action		
eep Apnea:	Condition where there is a temporary cease in breath years, case can be rated at Mild/Low Grade.	ning, typically lasting less then	30 seconds. If regularly usin	g a CPAP for a minimum of 2	
Life	Underwriting Considerations 1. Date of diagnosis? 2. Results of any sleep study? 3. Type of treatment? (CPAP, weight loss)	Mild/Low Grade NS* to	Moderate Table 4 to Table 8	Severe Table 10 to Decline	
Lile	4. If using CPAP, date of 1st use and how often?	Table 4	Tuble 6	Decime	
Lile	4. If using CPAP, date of 1st use and how	Table 4 Action	radic o	Decime	

troke / TIA:	Event where there is an obstruction of blood flow ar commonly associated with widespread vascular dam blood pressure elevation but rather gradual damage Vascular Accident (CVA) which is permanent and Tra	nage from clogged arteries and to small arteries from long-st	hypertension. Strokes do no anding hypertension. There a	ot usually result from current		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Date of diagnosis/event? Type of Stroke? (CVA or TIA) Any bleeding or blood clots? What is the current cholesterol reading? How many occurrences and dates of occurrences? Any remaining effects such as paralysis? 	Table 2 to Table 4	Table 4 to Table 8	Decline		
	pararyarer	Action				
Individual Disability	Single episode, fully resolved more than 10 years ago	Any episode in the last 5 years Decline Single episode, fully resolved from 5 to 10 years ago, no residuals 100% rating with a 2 year benefit period Single episode, fully resolved more than 10 years ago, no residuals 75% rating with 5 year benefit period Multiple episodes or with residuals, or with co morbid diabetes, cardiovascular or renal disease, or uncontrolled hypertension Decline				
icide Attempt:	An attempt at ending one's life.	_				
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	1. Number of attempts?2. Date of last attempt?3. Drug and/or alcohol abuse?	NS with possible Flat extra (if history 5+ yrs ago)	Table 2 to Table 4 with Flat extra	PP/Decline		
		Action				
Individual Disability	Single suicide attempt within the last 5 years Decli Single suicide attempt, more than 5 years ago Indi Multiple suicide attempts Decline					
plassomia	An inherited blood disorder that results in anemia o	f varying degrees				
alassemia:	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Type of Thalassemia known? Results of most recent complete blood count? Iron and liver functions normal? Symptoms or complications? Treatment or blood transfusions? 	NS*		to Decline		
		Action				
Individual Disability	Thalassemia minor No adverse action Thalassemia major Decline Thalassemia intermedia Individual consideration, u	usually decline				
oracic Outlet Syndrome:	A collection of symptoms that appear to be caused be (collarbone) and the first rib.	by compression of the nerves a	and/or blood vessels in the ar	ea between the clavicle		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Date of diagnosis? Symptoms? Cause? 	Typically mild to moderate c excluded for moderate to se	ases no impact on mortality, v vere cases	waiver of premium may be		
	Action					
Individual Disability	Fully resolved less than 2 years ago Exclude Fully resolved 2 or more years ago No adverse act Present, mild symptoms, no effect on occupational of Present with moderate to severe symptoms or dutie	duties Exclude	cline			
rombocytopenia:	Disease caused by a deficiency of blood platelets.					
ombocytopella.	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Date of diagnosis? Treatment, past and current? Current platelet count? 	NS NS	Table 4 to Table 6	Decline		
		Action				
Individual Disability	0 - 2 years fully resolved Decline Underlying illness ruled out >2 years, platelet count out out, platelet count low Rate of the second consideration					

Thyroid Nodules/Goiter:	Abnormal, benign growths of the thyroid gland.					
<u> </u>	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Date of diagnosis and investigations completed? Pathology or size? Thyroid functioning normally? Symptoms or complications? 	NS*		d untreated could be postponed must be excluded		
		Action				
Individual Disability	Stable thyroid nodule, no further evaluation recomme Goiter, described as diffuse or nontoxic, asymptomati Goiter described as multinodular or toxic or with sym	ic No adverse action	Exclude			
Thyroiditis:	Inflammation of the Thyroid gland.					
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	1. Date of diagnosis? 2. Treatment?	NS*	NS	If present, Postpone		
		Action				
Individual Disability	Diagnosed less than 1 year ago Exclude Diagnosed 1 year or more ago, adequate control No					
<u>Fourette's Syndrome:</u>	Neurological movement begins age 2 to 16 and lasts t	hroughout life - Tics, blinkin	g, facial twitches, involuntar	y vocalizations.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Age of diagnosis? Degree of disease? Any other Psychiatric diagnosis? Any hospitalizations? How long on medications? 	> Age 8 NS (No Waiver)	Table 4 (No Waiver)	< Age 8 Postpone (No Waiver)		
	Action					
Individual Disability	Onset in childhood, fully resolved or very minimal sym Onset in childhood, mild, moderate or severe sympto Onset in adulthood, no co morbid psychiatric conditio	ms Decline	latric conditions No adver	se action		
Transient Global Amnesia:	Sudden onset episode of confusion which is self limiti	ng. More than 3 episodes, s	see Stroke / TIA			
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	1. Dates of episodes?2. Medication, past and current?	NS	NS	<6 months since last episode Postpone		
Individual Disability	Single episode, trauma related, fully recovered less the Single episode, trauma related, fully recovered betwee Single episode, trauma related, fully recovered more	en 2 and 4 years 25% ratiı than 4 years No adverse a	•	period		
	Multiple episodes or other than trauma related Dec	cline				
Tremor (Benign):	Involuntary rhythmical movements of any parts of the	e body.				
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	 Date of diagnosis? Type of tremor? Underlying cause? Details of occupation? Results of all investigations? 	NS*	NS*	Postpone until fully investigated		
	5. Nesares of an investigations:	Action				
Individual Disability	Mild tremor, stable for more than 5 years, infrequent Mild tremor, stable fore more than 5 years, infrequen	use of medication, no occu				
uharculosis:	Chronic recurrent infection in the lungs.					
<u>'uberculosis:</u>	Underwriting Considerations	Mild/Low Grade	Moderate	Severe		
Life	1. Date of diagnosis? 2. Type of treatment? 3. Treatment completion date?	NS*	Unde	r treatment; ostpone		
		Action				
Individual Disability	Positive TB test in the last 2 years with negative chest More than 2 years since positive TB test, with a negat Current, active TB Decline History of TB outside the lungs Individual considera	ive chest X-ray No adverse	e action			

	Disease that causes inflammation and sores (ulcers) Underwriting Considerations	Mild/Low Grade	Moderate Moderate	Severe	
	1. Date of diagnosis?	u/ Low Grade	moderate	3000	
	2. Age at diagnosis?				
Life	3. When was the last attack?	NS		Table 10	
LITC		to	Table 4	to	
	4. Typical symptoms?	Table 3		Decline	
	5. Medications, if any?				
	6. Date and type of treatment?				
		Action			
	Mild symptoms, less than 2 years since last attack				
	Mild symptoms, no steroid treatment, no anemia, 2 y		•	- ,	
	Mild symptoms, no steroid treatment, no anemia, >5		ude, 25% rating, 10 year ben	efit period	
Individual Disability	Moderate symptoms, less than 5 years since last atta				
	Moderate symptoms, occasional steroid treatment, i	solated past surgery 5 years o	or more since last attack Ex	clude 25% - 50% rating wit	
	short term benefit period				
	Severe, recurrent symptoms, or frequent use of stero	· ·		Decline	
	Others, including those treated with certain medicati	ons Individual consideration	n		
lve Disease:	Disease of the heart valve resulting in abnormal bloo				
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	1. Valve(s) involved?		NS	Table 4	
	2. Stenosis of insufficiencies /	NS*	to	to	
	regurgitation?		Table 4	Decline	
Individual Disability	Individual Co. 11. 11	Action			
	Individual Consideration				
cal Cord Nodules or Polyps:	Lesion(s) on the vocal cords or the larynx.				
Car Constitution of the Organia	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
	1. Date of Diagnosis?	iviiia/ 2017 Grade	Moderate	501010	
Life	2. Results of evaluation?	Must be fully evaluated, rati	ng then depends on cause ar	nd residual complications	
	3. Malignancy excluded?	Trase se rany evaluates, ran	g then depends on eddse di	Ta restauat complications	
	or mangratioy exchanges.	Action			
	Fully recovered or present with mild symptoms No	Fully recovered or present with mild symptoms No adverse action			
Individual Disability	Present with moderate to severe symptoms Exclude				
	Papilloma or dysplasia, present or in history Exclud				
	71 71				
ocal Cord Paralysis:	An inability to move the muscles of the vocal cords w	vhich may impact speech, swa	allowing and/or breathing.		
	Underwriting Considerations	Mild/Low Grade	Moderate	Severe	
Life	1. Date of Diagnosis?				
	2. Results of evaluation?	Must be fully evaluated, rati	ng then depends on cause ar	id residual complications	
	Action				
Individual Disability	Present or fully recovered less than 2 years Decline				
	Fully recovered, adequate work up 2 years or more -	- Exclude			
n Willebrands Disease:	Bleeding disorder resembling mild hemophilia.				
Life		Action			
Life	See Bleeding Disorders				
		Action			
	Mild symptoms, little or no prior bleeding issues 25	Mild symptoms, little or no prior bleeding issues 25% rating with an age 65 benefit period Moderate symptoms, but with a prior surgical history not resulting in any significant bleeding issues 25% rating with an age 65 benefit			
			•	ng with an age 65 benefit	
Individual Disability			•	ng with an age 65 benefit	
Individual Disability	Moderate symptoms, but with a prior surgical history	not resulting in any significal	nt bleeding issues 25% ration		
Individual Disability	Moderate symptoms, but with a prior surgical history period	not resulting in any significal	nt bleeding issues 25% ration		
Individual Disability	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his	not resulting in any significal	nt bleeding issues 25% ration		
Individual Disability	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period	not resulting in any significal	nt bleeding issues 25% ration		
	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period	not resulting in any significal tory or with a prior surgery sh - Decline	nt bleeding issues 25% rations on the bleeding issues	50% rating with a 10 year	
	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease -	not resulting in any significal tory or with a prior surgery sh - Decline	nt bleeding issues 25% rations on the bleeding issues	50% rating with a 10 year	
	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei	not resulting in any significal tory or with a prior surgery sh - Decline ther by binding or stapling, pr	nt bleeding issues 25% rations of calori	50% rating with a 10 year ies & nutrients.	
	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build?	not resulting in any significal tory or with a prior surgery sh - Decline ther by binding or stapling, pr	nt bleeding issues 25% rations of calori	50% rating with a 10 year ies & nutrients.	
	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery?	not resulting in any significant ory or with a prior surgery she Decline ther by binding or stapling, pr Mild/Low Grade	nt bleeding issues 25% rations of calorions absorption of calorions Moderate	50% rating with a 10 year ies & nutrients.	
	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease	not resulting in any significal tory or with a prior surgery sh - Decline ther by binding or stapling, pr	nt bleeding issues 25% rations of calori	50% rating with a 10 year ies & nutrients.	
eight Reduction Surgery:	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension,	not resulting in any significant resulting in any significant tory or with a prior surgery shaped by the prior surgery shaped by binding or stapling, prior by binding or stapling by binding or stapling by binding or stapling by binding or stapling by binding by binding or stapling by binding by b	eventing absorption of calorion Moderate Over 6 months Table 2	50% rating with a 10 year ies & nutrients. Severe > 6 months	
eight Reduction Surgery:	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea	o not resulting in any significant tory or with a prior surgery shape ther by binding or stapling, proceeding the by binding or stapling, procedure to the by binding or stapling, procedure to be below the by binding or stapling, procedure to be below to be be below to be be below to be below to be below to be be below to be belo	eventing absorption of calori Moderate Over 6 months Table 2 to	50% rating with a 10 year ies & nutrients.	
eight Reduction Surgery:	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, eigenvalues of surgery? 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea or cardiovascular disease?	not resulting in any significant resulting in any significant tory or with a prior surgery shaped by the prior surgery shaped by binding or stapling, prior by binding or stapling by binding or stapling by binding or stapling by binding or stapling by binding by binding or stapling by binding by b	eventing absorption of calorion Moderate Over 6 months Table 2	50% rating with a 10 year ies & nutrients. Severe > 6 months	
eight Reduction Surgery:	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea or cardiovascular disease? 4. Any complications of surgery?	o not resulting in any significant tory or with a prior surgery shape ther by binding or stapling, proceeding the by binding or stapling, procedure to the by binding or stapling, procedure to be below the by binding or stapling, procedure to be below to be be below to be be below to be below to be below to be be below to be belo	eventing absorption of calori Moderate Over 6 months Table 2 to	50% rating with a 10 year ies & nutrients. Severe > 6 months	
eight Reduction Surgery:	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, eigenvalues of surgery? 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea or cardiovascular disease?	or not resulting in any significant tory or with a prior surgery shape ther by binding or stapling, proceeding to the stapling of the stapling	eventing absorption of calori Moderate Over 6 months Table 2 to	50% rating with a 10 year ies & nutrients. Severe > 6 months	
eight Reduction Surgery:	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea or cardiovascular disease? 4. Any complications of surgery? 5. Any functional limitations?	o not resulting in any significant tory or with a prior surgery shape ther by binding or stapling, proceeding the by binding or stapling, procedure to the by binding or stapling, procedure to be below the by binding or stapling, procedure to be below to be be below to be be below to be below to be below to be be below to be belo	eventing absorption of calori Moderate Over 6 months Table 2 to	50% rating with a 10 year ies & nutrients. Severe > 6 months	
eight Reduction Surgery:	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea or cardiovascular disease? 4. Any complications of surgery? 5. Any functional limitations? Within 2 years of surgery Decline	or not resulting in any significant tory or with a prior surgery shape there by binding or stapling, proceeding the model of the by binding or stapling, procedure of the by binding or stapling or	eventing absorption of calori Moderate Over 6 months Table 2 to Table 3	50% rating with a 10 year ies & nutrients. Severe > 6 months PP	
eight Reduction Surgery: Life	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, eigenvalues of surgery? 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea or cardiovascular disease? 4. Any complications of surgery? 5. Any functional limitations? Within 2 years of surgery Decline Non-smokers between 2 and 5 years since surgery we	or not resulting in any significant tory or with a prior surgery shape there by binding or stapling, proceeding the model of the by binding or stapling, procedure of the by binding or stapling or	eventing absorption of calori Moderate Over 6 months Table 2 to Table 3	50% rating with a 10 year ies & nutrients. Severe > 6 months PP	
eight Reduction Surgery:	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea or cardiovascular disease? 4. Any complications of surgery? 5. Any functional limitations? Within 2 years of surgery Decline Non-smokers between 2 and 5 years since surgery was 2 year benefit period	or not resulting in any significant tory or with a prior surgery shape there by binding or stapling, proceeding. Mild/Low Grade Over 5 yrs NS to Table 2 Action	eventing absorption of calori Moderate Over 6 months Table 2 to Table 3	50% rating with a 10 year ies & nutrients. Severe > 6 months PP	
eight Reduction Surgery: Life	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea or cardiovascular disease? 4. Any complications of surgery? 5. Any functional limitations? Within 2 years of surgery Decline Non-smokers between 2 and 5 years since surgery was 2 year benefit period Non-smokers more than 5 years since surgery with fee	or not resulting in any significant tory or with a prior surgery shape there by binding or stapling, proceeding. Mild/Low Grade Over 5 yrs NS to Table 2 Action	eventing absorption of calori Moderate Over 6 months Table 2 to Table 3	50% rating with a 10 year ies & nutrients. Severe > 6 months PP	
eight Reduction Surgery: Life	Moderate symptoms, but with a prior surgical history period Moderate symptoms, but without a prior surgical his benefit period Severe symptoms or type 3 Von Willebrand disease - Involves bypassing a portion of the digestive tract, ei Underwriting Considerations 1. What is current build? 2. Date of surgery? 3. Any history of chronic disease including diabetes, hypertension, hyperlipidemia, obstructive sleep apnea or cardiovascular disease? 4. Any complications of surgery? 5. Any functional limitations? Within 2 years of surgery Decline Non-smokers between 2 and 5 years since surgery was 2 year benefit period	or not resulting in any significant tory or with a prior surgery shape to provide the prior by binding or stapling, provide the prior by binding or stapling, provide to the prior by binding or stapling, provide to the prior by binding or stapling, provide the prior binding or stapling, prior binding or stapling or stapling or stapling or stapling, prior binding or stapling or stapl	eventing absorption of calori Moderate Over 6 months Table 2 to Table 3	50% rating with a 10 year ies & nutrients. Severe > 6 months PP	

Volff-Parkinson White Syndrome: Life	Underwriting Considerations	Mild/Low Crado					
Life		Mild/Low Grade	Moderate	Severe			
Enc	1. Any heart disease?						
	2. Type of symptoms?	NS	Table 4	Postpone			
	3. Type of treatment?						
	Action						
	Incidentally seen on routine EKG, with no symptoms No adverse action						
Individual Disability	Diagnosed less than 1 year ago Decline						
	Diagnosed 1 year or more ago, well controlled with medication, no surgery done 25% rating with age 65 benefit period						
	Surgically treated within the past year Decline Surgically treated more than 1 year ago, no symptoms since procedure No adverse action						
	Surgically treated more than I year ago, no symptoms since procedure No adverse action						
		1					
	Non-Medica						
viation:							
	Underwriting Considerations	Low Risk	Intermediate Risk	High Risk			
		PNT with possible flat extra		Student pilots, No IFR,			
		Ages 25 to 65 IFR certified					
		w/ at least 300 hrs					
	1. Number of flying hours within last and next 12	experience and flying					
Life	months	between 25 to 250 hrs/yr					
	2. Type of aviation (Commercial, private, or military)	with no medical history.	experience with no	insufficient hours, significant			
	3. Type of aircraft	Commercial pilots in the	medical impairments	medical impairment.			
	7	U.S/Canada may qualify for					
		best rates s/t medical					
		history.					
Individual Disability	Delegate with most former. No otherwise action	Action					
	Private pilot, not for pay No adverse action	Private pilot, not for pay No adverse action					
line le la co							
<u>limbing:</u>	Und	Laur Biali	latarra dista Bish	ut-l- pt-l-			
	Underwriting Considerations	Low Risk	Intermediate Risk	High Risk			
	1. Type of climbing activity (i.e. rock climbing, ice	Trail climbing (trekking/ hiking) and artificial	Altitudes 13,000-23,000 ft	Extreme climbing, high altitude			
Life	climbing, trail climbing, etc).	Climbing walls/Indoor	in North America	climbing, bouldering, free solo			
	2. Altitude.	climbing wans/mdoor	NS with Flat extra.	climbing. Individual			
	3. Frequency.	available.	NS WILLI Flat Extra.	Consideration/Decline.			
Action							
Individual Disability	All cases Exclude						
riving Record:							
	Underwriting Considerations	Low Risk	Intermediate Risk	High Risk			
		No Dillo in look 5 coops and					
		No DUI's in last 5 years and					
Life		no more than one moving					
	1. Date and type of moving violations	violation in last 3 yrs-elite.					
	2. Any license suspensions	No DUI's in last 5 years and no more than 2 driving	3+ driving violations, no	4+ violations, multiple DUI's.			
	3. History of DUI/DWI	violations in last 3 years-	DUI's.	Decline			
	4. History of accidents	PPNT. No DUI's in last 3	NS with Flat extra	Decline			
		years and no more than 3					
		driving violations in the last					
		3 years-PNT.					
		5 years i wi.					
	Action						
Individual Disability	One or more moving violations Usually no adverse action						
	DUI, single episode, within the past year Decline						
	DUI, single episode, 1 to 2 years ago 50 - 75% rating with short term benefit period						
	DUI, single episode, more than 2 years ago, no alcohol criticism No adverse action						
	DUI, multiple episodes Decline						
<u> 1artial Arts:</u>	Underwitting County and	Levy Birl	Internet adda to Dt. I	ut-l- pt-l			
	Underwriting Considerations	Low Risk	Intermediate Risk	High Risk			
			NS with Flat Extra of \$2.50				
1:6-	14 T f	NS*	to \$5 per thousand	Decline			
Life	1. Type of combat sport?	143					
Life	1. Type of combat sport?2. Professional or Amateur?	NS	No waiver of premium				
Life	·		·				
	2. Professional or Amateur?	Action	·				
Life Individual Disability	·	Action	·				

Motor Sports:						
inotor Sports.	Underwriting Considerations	Low Risk	Intermediate Risk	High Risk		
Life	 Type of racing. Type of car. Speed of vehicle. Frequency of races. 	Vintage or Sports car racing using regular fuels and speed no greater than 125 mph with no moving violations. Preferred available.	Sprint cars, Sports car racing, Stock cars, Drift racing, Sand/Dune buggy. NS with Flat extra	Drag racing -jet powered fuel, inexperienced driver, multiple avocations, poor safety record, medical impairments. Individual Consideration.		
Individual Disability	Action					
	Participation in competitive racing Exclude					
Scuba Diving:						
<u> </u>	Underwriting Considerations	Low Risk	Intermediate Risk	High Risk		
Life	 Depth and frequency of dives? Purpose and location of diving? Any certificates? 	NS*	NS* with Flat Extra of \$2.50 to \$5 per thousand No waiver of premium	Individual Consideration		
	Action					
Individual Disability	Diving 100 feet or less No adverse action Diving more than 100 feet Exclude					
Sky Diving:						
	Underwriting Considerations	Low Risk	Intermediate Risk	High Risk		
Life	 Purpose and experience? Number of jumps per year? Any occupational or affiliated clubs? 	NS* with Flat Extra of \$3 to \$5 per thousand	NS* with Flat Extra of \$7.50 to \$10 per thousand	Decline		
Individual Disability	Action					
·	All cases Exclude					
Tobacco Use:						
	Underwriting Considerations	Low Risk	Intermediate Risk	High Risk		
Life	 Type of tobacco product. Frequency of tobacco use. Type of tobacco delivery device (if any). Date tobacco use discontinued. 	Elite-No tobacco use 60 months. PPNT-No tobacco use 48 months. PNT-No tobacco use 24 months. PPNT/PNT avail to cigars users s/t negative urine specimen.	NS-no cigarettes for 12 months. NS rates applies to tobacco products other than cigarettes. (i. e. chewing tobacco, nicotine patches, nicotine gum).	STD (i.e. cigarettes, electronic nicotine delivery devices, hookah) within the past 12 months.		
	Action					
Individual Disability	Use of tobacco, or nicotine delivery device, in last 12 months (not including cigars) Standard (nicotine) Cigar use once a month or less, current specimen negative for nicotine No adverse action (select) Cigar use more than once a month Standard (nicotine)					
	Financial					
Income Replacement	Non-working Spouse	Children	Estate	Protection		
Age 20-29 (30 X income) Age 30-39 (20 X income) Age 40-49 (15 X income) Age 50-59 (10 X income) Age 60+ (5 X income) Age 81+ Individual consideration	Age < 55-100% of amount inforce on working spou up to \$1M. 50% of amount in force on working spouse up to \$5M. Amount over \$5M will be given individual consideration.	children ages 0-4 yrs of 25%	Sales up to age 80 should generally be projected using a rate of 6% for a maximum of 75% of life expectancy to a maximum of 20 years. As a general practice, a 50% rate should be used to calculate an estate tax liability. Individua consideration will be given for clients age 81 and over.			