Impairments

The impairment information on the following pages has been provided to help give you a general idea of potential underwriting outcomes based on medical and non-medical life insurance underwriting.

By initially obtaining specific, detailed information, your underwriter will be able to provide the right quote quickly and easily.

Descriptions of possible underwriting outcomes represent tentative, non-binding assessments based on hypothetical parameters using our underwriting guidelines at the time of publication. Actual underwriting outcomes may possibly be more favorable than illustrated using available Healthy Lifestyle Credits and our Automatic Standard Approval Program (ASAP). We reserve the right to apply individual consideration to any case. All cases are subject to full underwriting, and assessments are subject to change based on actual file review. For more information, contact your home office underwriter.

The impairments table is set up as follows:

Impairment

The name of the impairment, including a short description. Conditions are listed alphabetically.

Risk factors	Typical requirements	Likely underwriting decision
The criteria the underwriter uses to classify the risk	Medical requirements the underwriter is likely to request in addition to the routine age and amount medical requirements For faster decision: These are the specific details to include in your application package to enable the underwriter to quickly and easily provide the right quote. This information may be used to determine appropriate APS acquisition, thereby expediting the underwriting process and limiting the need for subsequent requirement requests.	The risk classification or rating necessary for the impairment based on the factors and requirements presented. Many impairments outline a best- case scenario, typical case and worst-case rating.

Impairments / Medical

Alcohol abuse

(Includes alcoholism and problem drinking)

Risk factors

Typical requirements

For faster decision:

treatment.

APS, medical exam, MVR, blood

test, alcohol questionnaire,

inspection report selectively

Provide details of medical

Document any residential

such as continued

similar body, etc.

care/treatment including

dates and length of treatment.

• Outline any favorable aspects

employment, attendance in

Alcoholics Anonymous or

Requirements:

- Current age
- Amount of past and present alcohol consumption declared
- Any diagnosis of abuse or dependence
- Past history of treatment
- Results of all investigations, including liver enzymes and alcohol markers
- How long abstinent or consuming in moderation
- Any relapses
- Member of a self-help group such as Alcoholics Anonymous
- Treatment with medication
- Any co-morbid conditions, including any history of other substance abuse, driving offenses or participation in hazardous sports
- Any history of marital or job instability
- Any medical complications

Alzheimer's disease

Risk factors Typical requirements Likely underwriting decision All cases: Current age **Requirements:** Decline Age at onset of symptoms **APS**, Inspection Report selectively • Treatment, including any medications For faster decision: Activities of daily living Any neuropsychiatric testing Living independently such as cognitive or memory Type of assistance, if testing required Activity levels Judgment intact ADLs affected Stable course IADLs affected

Likely underwriting decision

Ratings depend primarily on applicant's age, time since last use and any co-morbid factors.

Alcoholism:

Best Case:

Standard (> six years since last consumption)

Worst Case: Decline

Problem drinking:

Best Case: Table 2-4 (over age 30 and mild)

Worst Case: Decline

Anemia

Risk factors

Typical requirements

- Type of anemia
- Severity/degree of anemia
- Cause of anemia, if known
- Treatment
- Blood test results
- Details of testing done and referrals to specialists/ hematologists (include dates, names of tests and doctors seen)

• Any concurrent impairment

Requirements:

APS

For faster decision:

- Results of all investigations and testing to include cause and/or source of bleeding
- Details of treatment
- Details of ongoing surveillance of the condition, including recent complete blood count (CBC)

Likely underwriting decision

Ratings depend on type of anemia and assume anemia is fully investigated and stable. Decisions can range from Preferred to Decline.

Iron deficiency anemia: Preferred possible for best-case scenario

Hemolytic anemia: Preferred possible for best-case scenario

Aneurysm

Risk factors

Medications

- Precise diagnosis
- Type or location of aneurysm
- Date of diagnosis
- Cause
- Size and stability of aneurysm
- Currently present
- Treatment
- Smoking history
- Presence of associated coronary artery disease, hypertension, cerebrovascular, other peripheral vascular or renal disease, or COPD
- Blood pressure control

Typical requirements

Requirements:

APS

For faster decision:

- All tests and details of ongoing surveillance
- Details of any lifestyle modifications
- Details of blood pressure and lipid control
- Presence of associated coronary artery disease, hypertension, cerebrovascular, other peripheral vascular or renal disease, or COPD
- Smoking history
- Presence or absence of symptoms

Likely underwriting decision

Can consider on a rated basis 6 to 12 months post-op depending on the type of aneurysm.

Abdominal:

No surgery: Best case is Table 6 provided diameter <5 cm, with no increase in size within last three years or since diagnosis

If diameter >5 cm: Decline

With surgery: Individual consideration

Cerebral:

No surgery: \$7.50 per \$1,000 if small, stable and no complications

Large: Decline

With surgery: Standard after two years

Thoracic:

No Surgery: Decline **With Surgery:** Table 4 after two years

Angina pectoris

Risk factors	Typical requirements	Likely underwriting decision
Refer to Coronary Artery Disease.		

Angioplasty

Risk factors	Typical requirements	Likely underwriting decision
Refer to Coronary Artery Disease.		

Apnea/sleep apnea

Risk factors	Typical requirements	Likely underwriting decision
 Current age Type of apnea (obstructive, central or mixed) Severity Treatment (CPAP or surgery) Compliance with treatment Date of last sleep study Current height/weight Presence of cardiovascular disease and/or risk factors including hypertension, arrhythmias Any associated overweight or obesity Smoking history 	 Requirement: APS For faster decision: Type, frequency, severity, and duration of symptoms Results of sleep study including, apnea index and degree of oxygen desaturation Treatment and compliance with treatment Any associated impairments History of motor vehicle or industrial accidents attributed to sleepiness 	 Mild disease and no complications: Preferred or Super Preferred possible Moderate disease untreated and no complications: Table 2-3 Moderate disease treated and compliant with therapy: Preferred possible Severe disease untreated and no complications: Decline Severe disease treated and compliant with therapy. Best case: Standard after two years compliance with treatment

Arteriosclerosis

Risk factors	Typical requirements	Likely underwriting decision
Refer to Coronary Artery Disease.		

Asthma

Risk factors

- Current age
- Date of diagnosis
- Current symptoms
- Frequency and severity of asthma attacks
- Type of medication and frequency of use
- Compliant with medications
- Hospitalizations or ER visits
- Limitations to activities
- Smoking history
- Occupational or environmental exposure
- Concurrent impairments such as COPD, psychiatric disorder, alcohol abuse, CAD

Typical requirements

Requirement:

APS

For faster decision:

- Results of investigations including pulmonary function tests
- Frequency of symptoms
- Duration and intensity of exacerbations
- Treatment and response to treatment
- Frequency of night-time symptoms
- Smoking history
- Time off work
- Level of activity

Likely underwriting decision

Minimal or mild asthma: Preferred or Super Preferred

Moderate: Standard to Table 2

Severe: Table 6 to Decline

Atrial fibrillation

Risk factors	Typical requirements	Likely underwriting decision
 Date of diagnosis and age at onset Age of applicant Frequency of attacks Associated symptoms and complications Risk factors for stroke Exercise tolerance Underlying cardiac and non-cardiac disease Full cardiac evaluation Paroxysmal vs. Chronic Treatment including use of anticoagulant medication 	Requirement: APS For faster decision: • Type of atrial fibrillation • Details of treatment • Copies of all cardiac Investigations • Current level of activity	 Found on examination, no investigation: Postpone Paroxysmal Atrial Fibrillation (PAF) with infrequent attacks: Standard Chronic Atrial Fibrillation: Table 2-6 Less favorable outcome for co-morbid complications

Barrett's esophagus

Risk factors	Typical requirements	Likely underwriting decision
 Current age Ongoing risk factors Results of all investigations including biopsy Stable course Medication/treatment Response to medication treatment Compliant with medical treatment and surveillance Complications (e.g., hemorrhage, perforation) 	 Requirement: APS For faster decision: Results of all investigations including biopsy Details of ongoing follow-up (e.g., endoscopy) Details of lifestyle modification (stop smoking and alcohol use) 	Best case: Preferred or Super Preferred if no dysplasia and good follow- up done on a regular basis Typical case: Standard to Table 2 Worst case: Decline

Blood pressure

Risk factors	Typical requirements	Likely underwriting decision
Refer to Hypertension.		

Bypass surgery

Risk factors	Typical requirements	Likely underwriting decision
Refer to Coronary Artery Disease.		

Cancer

Risk factors	Typical requirements	Likely underwriting decision
Refer to specific organ or type of cancer.		For all forms of cancer: Consideration for insurance begins once treatment has been completed, assuming the client is well followed.

Basal Cell Carcinoma/Squamous Cell Carcinoma

Risk factors	Typical requirements	Likely underwriting decision
 Date of diagnosis Pathology reports including confirmation of basal cell carcinoma Type of treatment Date treatment completed Confirmation that tumor has been removed completely Family history of atypical/ dysplastic nevi or dysplastic nevus syndrome Details of regular full body surface skin examinations Any recurrence or spread Ongoing risk factors such as multiple dysplastic nevi and a propensity to develop other skin cancers Any serious complications from treatment 	Requirement: APS Der faster decision: • Pathology report including post-operative • Details of ongoing follow-up • Details of lifestyle modification (sun screen, stop smoking)	Complete excision: Possible Preferred or Super Preferred

Breast

Risk factors	Typical requirements	Likely underwriting decision
 Date of diagnosis Type and stage of cancer Size of tumor Type of treatment Date treatment completed Any recurrence or spread Any serious complications from treatment 	Requirement: APS For faster decision: • Pathology report • Stage and grade of tumor • Details and date(s) of treatment, including any adjunct therapy (e.g., Tamoxifen) • Hospital reports • Details of follow-up (mammograms, bone scan, etc.)	Best case: Standard for carcinoma in situ after 2-3 years since treatment Typical case: Unable to consider until 2-3 years after completion of treatment (chemo or radiation), then possible Table rating and/or a flat extra depending on stage and grade Worst case: Decline

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Risk factors

Colon

Typical requirements

• Date of diagnosis

- Stage and grade of the tumor
- Any hereditary syndrome that may be associated with other types of cancer
- Family history of colon cancer types of cancer
- What treatment
- Length of remission
- Ongoing follow-up including colonoscopy results
- Any recurrence
- Any complications from treatment

rypical requirement

Requirement: APS

For faster decision:

- Pathology report and staging information
- Details and date(s) of treatment
- Hospital reports
- Details of follow-up (colonoscopy and tumor markers)

Likely underwriting decision

Best case: Standard after three years

Typical case:

Unable to consider until 2-3 years after completion of treatment (chemo or radiation), then possible Table rating and/or a flat extra depending on stage and grade

Worst case: Decline

Cancer:

Leukemia

Risk factors

- Current age
- Date of diagnosis
- Type of leukemia and stage of cancer
- Treatment
- Date treatment completed
- Any recurrence or secondary cancer

Typical requirements

Requirements:

APS, blood testing if current results are not available

For faster decision:

- Pathology reports
- Evidence of regular follow-up
- Hospital treatment reports

Likely underwriting decision

Acute lymphoid leukemia/ acute myeloid leukemia:

Best case: Standard

Typical case: Standard with a flat extra

Worst case: Decline

Chronic lymphoid leukemia/ hairy cell leukemia:

Best case: Table 4

Typical case: Table 8 – Decline

Worst case: Decline

Lung

Risk factors

- Current age
- Date of diagnosis
- Type of cell and stage of cancer
- Type of treatment
- Date treatment completed
- Any recurrence or spread
- Reduced/eliminated risk factors (e.g., smoking)
- Any concurrent impairment (e.g., emphysema or chronic bronchitis)
- Any serious complications from treatment

Typical requirements

Requirement: APS

For faster decision:

- Pathology report and staging
- Treatment and hospital report
- Evidence of regular follow-up (CT scans etc.)

Likely underwriting decision

Carcinoma (all types)

Stage 1: Best case: Standard after eight years

Typical case: Standard with a flat extra

Worst case: Decline if less than or equal to three years since primary treatment

Stage 2-3:

Best case: Standard after nine years

Typical case: Standard with a flat extra

Worst case: Decline if less than or equal to five years since primary treatment

Cancer:

Prostate

Risk factors Typical requirements Likely underwriting decision • Current age **Requirements:** If client is under age 70, rate class will depend on years • Date of diagnosis APS, blood profile to include PSA since primary treatment, the if current results are not • Type of treatment stage of cancer and Gleason available • Date treatment completed grade of the tumor. • Stage and Gleason Grade For faster decision: Best case: • Any recurrence or spread Pathology reports Standard Serial PSA levels including • Type of treatment Typical case: current PSA • Evidence of regular follow-up Standard with a flat extra • Any serious complications and PSA testing Worst case: from treatment

• Copies of PSA tests

Decline

Malignant melanoma

Risk factors	Typical requirements	Likely underwriting decision
 Date of diagnosis Type of cancer/tumor Depth and thickness of tumor Type of treatment Date treatment completed Any recurrence or spread Details of regular full body surface skin examinations Ongoing risk factors like multiple dysplastic nevi and a propensity to develop other skin cancers Any serious complications from treatment 	 Requirement: APS For faster decision: Pathology report Evidence of regular dermatology follow-up Hospital treatment reports 	Best case: Standard Typical case: Standard with a flat extra Worst case: Decline

Cancer:

Thyroid

Risk factors	Typical requirements	Likely underwriting decision
 Type of thyroid cancer (papillary, follicular, anaplastic, etc.) Pathology Age of applicant Type of treatment and date(s) performed Any remission and for how long Any recurrence Any complications from treatment 	Requirements: APS For faster decision: • Pathology report • Treatment and hospital report • Evidence of regular follow-up	Best case: Standard Typical case: Standard or Standard with a flat extra Worst case: Decline

Chronic obstructive pulmonary disease (COPD)

Risk factors	Typical requirements	Likely underwriting decision
 Current age Smoking history and current tobacco use Build, any current weight loss Severity of symptoms Degree of impaired respiratory function Speed of disease progression Alpha-1 antitrypsin deficiency or other biochemical abnormality Any concurrent impairment (e.g., CAD, cancer, malnutrition) Any hospitalization Any treatment with oxygen is a decline 	 Requirement: APS For faster decision: Pulmonary function tests (PFT), serial PFTs Details of lifestyle modification Level of activity 	Best case: Standard Typical case: Table 2-8 Worst case: Decline

Coronary artery disease

Risk factors	Typical requirements	Likely underwriting decision
 Current age Date of diagnosis and age at onset Severity of the disease (how many vessels and which ones) Current symptoms Treatment Medications Smoking history Any concurrent serious impairment Any history of congestive heart failure or arrhythmia Active lifestyle Blood pressure and cholesterol readings Family history 	 Requirements: APS, EKG (or TST) if current test is not available For faster decision: Cardiac test results (e.g., angiogram, recent stress tests, perfusion) Detailed list of medications Copies of lipid testing Details of any lifestyle change. Best ratings possible with testing including perfusion and stress echocardiograms within the past 12 months 	Unable to consider until six months post-surgery Best case: Standard Typical case: Table 2-8 Worst case: Decline

Crohn's disease

Risk factors	Typical requirements	Likely underwriting decision
 Current age Severity of the disease Frequency of flare ups Severity of symptoms Medication – ongoing oral steroid therapy Hospitalization Surgery Weight stable or loss Testing and follow-up Complications or concurrent impairments such as rheumatoid arthritis or other inflammatory disease 	 Requirement: APS For faster decision: Pathology reports Evidence of regular GI surveillance (colonoscopy) Details of hospitalization and hospital reports Stable weight Active lifestyle 	Best case: Standard Typical case: Standard - Table 5 Worst case: Table 6 - Decline

Diabetes

Risk factors

- Current age
- Date of diagnosis and age at onset
- Type of diabetes
- Treatment
- Medication
- Degree of control blood sugar readings
- Complications nephropathy or kidney disease, neuropathy, retinopathy, cardiovascular disease
- Current height and weight
- Blood pressure

Requirements:

Typical requirements

APS, blood (if not already required or current results not available)

For faster decision:

- Type of diabetes including age at onset
- Copies of specialist reports (neurologist, nephrologist, endocrinologist)
- History of blood sugar control

 copies of blood tests (incl.
 Hemoglobin A1c where
 possible)
- Details of risk factor modification
- Active lifestyle

Likely underwriting decision

Type 1

Also known as Insulin Dependent Diabetes Mellitus (IDDM)

Best case: Table 3-4

Typical case: Table 5-8

Worst case: Decline (complications, poor or uncontrolled)

Type 2

Also known as Non-Insulin Dependent Mellitus (NIDDM) or Adult Onset Diabetes

Best case: Standard

Typical case: Table 2-4

Worst case: Decline (complications, poor or uncontrolled)

Emphysema

Risk factors	Typical requirements	Likely underwriting decision
Refer to COPD.		

Epilepsy/seizure disorder

Risk factors	Typical requirements	Likely underwriting decision
 Age onset Compliance with medication Control of seizures Reason for the seizure activity Any alcohol use Any other significant medical conditions 	 For faster decision: Type of epilepsy Age diagnosed Duration of history Date of last seizure and number of seizures per year 	Best case: Standard Typical case: Table 2-6 Worst case: Decline

Gastric surgery for obesity

Risk factors	Typical requirements	Likely underwriting decision
 Pre-operative weight Current weight Any co-morbid conditions (such as diabetes, hypertension, coronary disease) Date of surgery Type of surgery Any surgical complications Outcome of surgery (weight loss, improvement of risk factors) 	Requirements: APS For faster decision: • Supply all medical reports relating to the surgical procedure and follow-up • Current weight	Unable to consider until 6 months after surgery Restrictive surgery (gastric banding or gastroplasty): 6 months to 3 years: Table 3 >3 years: Standard to Table 2 Malabsorptive surgery/ bypass: <1 year: Postpone 1-5 years: Table 4 >5 years: Standard to Table 2

Heart attack

Risk factors	Typical requirements	Likely underwriting decision
Refer to Coronary Artery Disease.		

Hepatitis **B**

Risk factors	Typical requirements	Likely underwriting decision
 Date of diagnosis Is this acute or chronic infection Laboratory results (liver function) If chronic, was a biopsy done Any alcohol usage or other medical conditions 	Requirement: APS For faster decision: • Laboratory results • Sonograms, CTs, biopsy results	Best case: Standard Typical case: Table 2-6 Worst case: Decline

Hepatitis C

Risk factors

- Duration of the disease
- Laboratory results , including liver function tests
- Has a biopsy been done
- Does the client use alcohol, and if so, amount per day

Typical requirements

Requirement: APS

For faster decision:

- Laboratory results, including liver function tests
- Biopsy results
- Sonogram and/or CT scan results

Likely underwriting decision

If treated with sustained viral response

Best case: Standard

Typical case: Standard to Table 3

Worst case: Decline - with complications including continued elevated liver enzymes or moderate liver disease on biopsy

Untreated

Best case: Table 3-4 Typical case: Table 5-8 Worst case: Decline

Hypertension

Risk factors	Typical requirements	Likely underwriting decision
 Current age Date of diagnosis Type of hypertension (essential or secondary to another impairment) Medication/treatment Response to medication treatment Current BP readings and history of readings for past 2 years (demonstrate stable course) Compliant with medical treatment and follow-up Any concurrent impairment (e.g., CAD, stroke, kidney disease, build) 	 Requirements: APS, para or medical exam, selectively For faster decision: Record of blood pressure readings Copies of any cardiac investigation Details of risk factor modification Active lifestyle 	Rating depends on severity of hypertension. May qualify for Preferred or Super Preferred if well- controlled and compliant with medication.

Liver function test

Risk factors

Typical requirements

• How many liver functions are outside the normal lab range?

- Is client taking any medications or using alcohol?
- Is there a medical condition that is causing the elevation in liver function?
- How long has this finding been monitored by the attending physician?
- Is this a new finding which has not been fully evaluated with additional testing?

Requirements:

APS, Hepatitis screens, all markers, selectively

For faster decision:

- All laboratory tests
- Any sonograms
- Details of medications being taken
- Amount of alcohol used
- Results of any investigations for elevated liver functions

Likely underwriting decision

Decision will depend on how many liver function results are outside the normal range, the degree of elevation, any other medical conditions, and any diagnosis for the elevated liver function finding.

Best case: Preferred or Super Preferred

Typical case: Standard to Table 4

Worst case: Decline

Myocardial infarction

Risk factors	Typical requirements	Likely underwriting decision
Refer to Coronary Artery Disease.		

Parkinson's disease

Risk factors	Typical requirements	Likely underwriting decision
 Current age Date of diagnosis Medication/treatment Response to medication treatment Severity of the disease History of falling or indications of dementia Compliant with medical treatment and follow-up Any concurrent impairment (e.g., depression) 	 Requirement: APS For faster decision: Details of type of Parkinson's Type of treatment Compliance and response to medication Severity of the disease Active and independent lifestyle (outline Activities of Daily Living) 	Best case: Standard Typical case: Table 2-4 Worst case: Table 5 – Decline

Peripheral artery disease (PAD)/peripheral vascular disease (PVD)

Risk factorsTypical requirementsLikely underwriting decision• Current age • Date of diagnosis • Medication/treatmentRequirements: APS, medical exam, insurance blood profile, EKG - selectivelyBest case: Standard• Response to medication treatmentFor faster decision: • Copies of any vascular and cardiac investigationTypical case: Table 2-4• Smoking status - if currently smoking this will have a greater impact on disease progression• Details of any ongoing symptoms• Morst case: Table 5 - Decline• Compliant with medical treatment and follow-up• Ankle-brachial index (ABI) score• Details of risk factor modification• Active lifestyle
 Date of diagnosis Medication/treatment Response to medication treatment Smoking status - if currently smoking this will have a greater impact on disease progression Compliant with medical treatment and follow-up Any concurrent impairment (e.g., CAD, CVD, diabetes, ApS, medical exam, insurance blood profile, EKG - selectively For faster decision: Copies of any vascular and cardiac investigation Details of any ongoing symptoms Ankle-brachial index (ABI) score Details of risk factor modification Active lifestyle Standard Typical case: Table 2-4 Worst case: Table 5 - Decline

Pulmonary nodule

Risk factors	Typical requirements	Likely underwriting decision
 Current age Date of diagnosis Size and number of nodules Any treatment Date treatment completed Benign pathology Reduced/eliminated risk factors (e.g., smoking) Any concurrent impairment (e.g., emphysema or chronic bronchitis) 	Requirement: APS For faster decision: • Copies of tests • Details of follow-up • Demonstrated stability of nodule(s)	Best case: Preferred possible Typical case: Standard Worst case: Decline

Rheumatoid arthritis

Risk factors	Typical requirements	Likely underwriting decision
 Severity of symptoms What medications are being taken Any limitations of daily activities No other significant medical condition(s) 	Requirement: APS For faster decision: Laboratory results	Best case: Preferred possible Typical case: Standard - Table 2 Worst case: Decline

Stroke

Risk factors	Typical requirements	Likely underwriting decision
 Current age Date of diagnosis and age at onset Current symptoms/extent of neurological deficit Cause of stroke Treatment Medications Number of strokes Smoking history Active lifestyle Blood pressure and cholesterol readings Any concurrent serious impairment 	Requirement: APS For faster decision: • Neurology workup (carotid duplex, MRI) • Current function (how active) • Lifestyle modifications	Best case: Table 4 Typical case: Table 4 with a flat extra Worst case: Decline

Transient ischemic attack (TIA)

Risk factors	Typical requirements	Likely underwriting decision
 Current age Date of diagnosis and age at onset Any neurological deficit Number of episodes Treatment Medications Smoking history Test results Active lifestyle Blood pressure and cholesterol readings Any concurrent serious impairment 	Requirement: APS For faster decision: • Neurology workup (carotid duplex, MRI) • Current function (how active) • Lifestyle modifications	Best case: Standard Typical case: Table 2-3 for single TIA, Table 4 with a flat extra for multiple TIAs Worst case: Decline

Ulcerative colitis

Risk factors	Typical requirements	Likely underwri
Current ageAge of onset	Requirement: APS	Best case: Standard
 Severity of the disease Frequency of flare-ups Severity of symptoms Date of last episode Extra-colonic complications 	 For faster decision: Pathology reports Evidence of regular GI surveillance (colonoscopy) Details of hospitalization and bospital reports 	Typical case: Standard to Tab Worst case: Table 6 to Declin

- Effect on ADLs
- Medication (ongoing oral steroid therapy)
- Hospitalization
- Surgery
- Weight stable or loss
- Testing and follow-up

- hospital reports
- Stable weight
- Active lifestyle

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Impairments / non-medical

Aviation

Risk factors

- Current age
- Pilot experience
- Flight ratings and type of license held
- Medical history
- Lifestyle
- Where they fly
- Type of aircraft flown
- Type of flying
- Purpose of flights and number of flying hours per year
- Medical history
- Lifestyle

Typical requirements

Requirement:

Aviation Statement

For faster decision:

- Overall experience
- Hours flown per year
- Pilot experience
- Flight ratings
- Aircraft
- Details of specialized flying

Likely underwriting decision

Best case: Preferred or Super Preferred possible*

Typical case: Standard*

Worst case: Aviation Exclusion Rider if available or Decline

*Flat extra may apply to base rating

Climbing and mountaineering

Risk factors	Typical requirements	Likely underwriting decision
 Current age Frequency Type of terrain: established trails Altitude/heights Location: North America/ Europe or elsewhere Medical history Lifestyle 	Requirement: Sport Statement, Foreign Travel questionnaire, if applicable For faster decision: • Overall experience • Frequency • Type of terrain • Difficulty of climbs	Best case: Preferred or Super Preferred possible* Typical case: Standard* Worst case: Hazardous Sports Exclusion Rider if available or Decline *Flat extra may apply to base rating

Driving

Risk factors

• Current age

• DWI (Multiple)

Accident (at fault)

• Types of infractions

• Frequency of infractions

• Other suspensions and

• Risk-taking avocations

number of suspensions

Typical requirements

Requirement:

MVR

For faster decision:

- Number and types of violations
- Date of last violation
- Date of last suspension, length of, and reason for suspension

Likely underwriting decision

Best case/typical case: Preferred or Super Preferred for infrequent, minor violations

Worst case: Decline

NOTE: A single DUI can be considered with a flat extra 0-1 year since violation. Standard is available after 2-3 years.

Motor vehicle racing

Risk factors

- Current age
- Type of vehicle/size of engine
- Type of fuel
- Frequency
- Speeds attained (average, highest)
- Type of course
- Location (outside U.S. or Canada)
- Concurrent avocations

Typical requirements

Requirements:

Sport Statement, Foreign Travel Questionnaire (if applicable)

For faster decision:

- Type of racing and frequency
- Speeds attained

Likely underwriting decision

Best case: Preferred or Super Preferred

Typical case: Standard to Standard with a flat extra

Worst case: Decline

Scuba diving Risk factors

Typical requirements

• Current age

- Experience including certification
- Depths and frequency of dives
- Medical history
- Lifestyle
- Dive location (e.g., lake, open ocean, beaches)
- Dive sites (e.g., wreck, salvage)
- Diving activities (e.g., search and rescue, caves, ice)
- Commercial diving

Requirement:

Avocation Questionnaire, Foreign Travel Questionnaire (if applicable)

For faster decision:

- Type of diving (location, site, activities)
- Experience
- Frequency

Likely underwriting decision

Best case/typical case: Preferred or Super Preferred

Worst case: Decline