



**PACIFIC LIFE**

Pacific Life Insurance Company



PACIFIC LIFE'S LIFE INSURANCE

# Underwriting Guidelines

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# 1

## Underwriting Overview

The primary purpose of life insurance is to provide financial protection from premature death. Financial protection is important to your clients, as is your ability to help ensure your client's application and underwriting process goes smoothly.

This guide\* provides insights into the clear, consistent underwriting methodology we use. We focus on the most meaningful factors to give you:

- Personalized evaluations
- Competitive offers
- Consistent decisions
- Quicker turnaround
- Fewer requirements

### **Clear, Consistent Communication**

Our goal is to provide better customer service and help ensure a higher placement ratio through focused communication that helps you understand our competitive position. Our strategy to improve the information you receive at every step of the application process is unfolding rapidly.

\* The underwriting guidelines in this brochure do not apply to the Promise product line.

*Life insurance is subject to underwriting and approval of the application and will incur monthly policy charges.*



## Underwriting Credit Program—Pacific Healthy Rewards



### Underwriting Credits, Best Offer First

All cases are automatically evaluated for an underwriting credit, which means your clients will always get our best offer first. If an underwriting credit applies, your client may benefit from an improvement of up to four risk classes.

Pacific Healthy Rewards (PHR) is an innovative, ground breaking approach to underwriting. In place of rigid height and weight charts, cholesterol ratios, blood pressure measurements, and impairment lists that do not allow holistic view of a proposed insured, the PHR program takes underwriting to a new level.

Any proposed insured who is a Standard health risk may earn their way to a preferred or better risk class by our proprietary outlook of optimized health and behavioral factors as drivers. Additionally, risks medically rated up to Table D (i.e. 4 tables or 200% of mortality) may be improved 1, 2, 3 or even 4 tables using PHR.

Before PHR, a proposed insured that had a risk class of standard due to their build, was prevented from a preferred risk class. With PHR, that proposed insured may have enough favorable items to move into preferred or better. Or if a proposed insured was kept out of preferred because of cholesterol level, but he or she had other optimized cardiovascular and other factors, then preferred or better may become available. That's the reward for having demonstrable healthy habits and favorable risk factors for those applying for our cash value life insurance products.

Here's how it works. Subject to having the available credits, proposed insureds ages 18-70 rated Table D or better, may be improved up to Standard; and if Standard, may be improved up to Super Preferred. For ages 71-75 if rated no worse than Table B, Standard is possible; and if Standard, may be improved up to Preferred Plus. At these older ages, as well as younger ages, Super Preferred is also available for those meeting our Super Preferred criteria as provided in the table below, regardless of the available credits they may or may not have.

The available credits are age-banded, with 28 potential credits for ages 18-49, 34 possible credits ages 50-70, and 36 available credits for ages 71-75.

**Preferred Risk Class Guidelines**

	<b>Super Preferred</b> NonSmoker Ages 18-75	<b>Preferred</b> NonSmoker Ages 76-85
<b>Tobacco</b>	No tobacco use in any form in the past 5 years*	Age 76 & above: no tobacco use in any form in the past 3 years*
	* The Occasional use of cigars or pipes may qualify only when there has been no cigarette smoking the past 5 years, the use is declared on the application and/or exam, the urinalysis is negative for cotinine, and all other criteria are met without exception.	
<b>Blood Pressure</b>	Up to 135/85 for all ages	Age 76 & above: up to 160/90
<b>Health History</b> (applies to all Preferred risk classes)	No associated health history with 20 or more debits, indicating higher mortality	
<b>Medical History</b> (applies to all Preferred risk classes)	No history of Diabetes, Coronary Artery Disease, or ratable Malignancy, even if a Standard Risk otherwise.  Treated Hypertension may qualify if well controlled for past 2 years  No drug or alcohol abuse	
<b>Family History</b> (applies to all Preferred risk classes)	No family deaths from Heart Disease, Hypertension, Cancer, or Diabetes under the age 50 in parent or siblings  No 2 deaths under age 60 from the same list as above	
<b>Electrocardiogram (EKG), Blood, Treadmill</b> (applies to all Preferred risk classes)	No debits on EKG, Blood, or Treadmill Exam	
<b>Driving History</b>	No driving under the influence (DUI), Driving while Intoxicated (DWI), or Reckless Driving within the last 5 years  No more than 2 moving violations within the last 3 years  No moving violation in the last 6 months	No Hazardous nonmedical features (e.g. drug/alcohol abuse)  No DUI, DWI, or Reckless Driving within the last 5 years
<b>Cholesterol Ratio</b>	Up to 5.5	Ages 76 & above: Up to 6.0
<b>All Other Blood Chemistry Test</b> (applies to all Preferred risk classes)	Within normal range	
<b>Height &amp; Weight</b>	Must be within the limits of Preferred chart	

\* Check Lifeline.PacificLife.com for availability of risk classes by product.

For ages 18-75 Preferred Plus & Preferred Risk classes are only available using Pacific Healthy Rewards Program.

## Male & Female Preferred Risk Class Height & Weight Chart

Risk Class	Super Preferred NonSmoker Ages 18-75	Preferred NonSmoker Ages 76-85
Height	Weight	
4'10"	137	160
4'11"	141	164
5'0"	145	170
5'1"	149	179
5'2"	153	183
5'3"	157	187
5'4"	161	191
5'5"	165	195
5'6"	169	199
5'7"	174	204
5'8"	180	210
5'9"	185	215
5'10"	190	220
5'11"	196	226
6'0"	202	232
6'1"	208	238
6'2"	215	245
6'3"	221	251
6'4"	227	257
6'5"	233	263
6'6"	240	270
6'7"	246	276
6'8"	252	282
6'9"	259	289
6'10"	265	295



**Approved Vendors and Services Provided**

Vendor Name	Contact Information	Services Provided
American Paramedical Systems, Inc. (APPS)	(800) 727-2101, (516) 822-6230 appslive.com	Paramed
Examination Management Services, Inc. (EMSI)	(800) 872-3674, emsinet.com	Paramed, Inspection Report (IR), Electronic Inspection Report
ExamOne	Customer Service & IR's (800) 768-2058 Parameds (877) 933-9261, examone.com	Paramed. IR
Insurance Medical Services Inc. (IMS)	(510) 962-9315 (877) 808-5533 www.imspamed.com	Parameds
JetStream	(310) 826-3759, jetstreamaps.com	Attending Physician Statement (APS)
LTCG	(888) 302-8291	Minnesota Cognitive Acuity Screen (MCAS) Cognitive Assessment
MediPro	(877) 268-1021, mediprodirect.com	Paramed
Parameds.com	(310) 826-3759, jetstreamaps.com	APS

Personal Physician Examinations for Ages 0-15 only:

To arrange a lab kit shipment to a personal physician, email [LabKITRequest@Pacificlif.com](mailto:LabKITRequest@Pacificlif.com)

**Important Payment Guidelines**

- Pacific Life will make direct payments only to the medical requirement providers that are contracted with Pacific Life (refer to Approved Vendors list).
- Life insurance producers or firms choosing to use medical requirement vendors not included on the Approved Vendors list will do so pursuant to their own business arrangements and only the cost of the requirement will be reimbursed excluding any procurement costs.

**Notes:** *The approved vendors listed above are not affiliated companies of Pacific Life Insurance Company.*



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## Approved Vendors and Services Frequently Asked Questions

### How do I order an Inspection or Motor Vehicle Report (MVR)?

- These requirements are ordered by Pacific Life upon receipt of the application. There is no action necessary by the firm or producer.

### Will Pacific Life share a copy of the APS with the firm or producer?

- No, Pacific Life will not share a copy of the APS with a firm or a producer.

### Will Pacific Life accept a paramedical exam from a non-approved Vendor?

- Paramedical services performed by non-approved Vendors are subject to approval from a Pacific Life underwriter. If approved, reimbursement of fees will be subject to rates and standards deemed acceptable to Pacific Life.
- Exams cannot be performed by a Primary Care Physician (PCP) except for on a proposed insured age 0-15.

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## Requirements for Reimbursements

### Repayment for costs incurred during the underwriting process is reimbursable, under the following conditions:

- A formal application for coverage was received
- Requirement was receipted and used as part of the underwriting decision process
- Requirement was necessary for the underwriter to make the decision
- Requirement is not a duplicate of information procured directly by Pacific Life
- Fee is within allowable amount for the type of requirement. Any APS over \$150 must have underwriter pre-approval.
- Reimbursement request submitted no later than six months after requirement receipt or formal application submission

### To request reimbursement, the following items should be submitted in email to

PLLe-Bill@pacificlife.com

- Policy Number
- Proposed Insured's Full Name
- Proposed Insured's Date of Birth
- Copy of Paid Invoice (Pacific Life will not pay the vendor directly)
- Receipt or Proof of Payment
- Fee pre-approvals from the underwriter if this is the first reimbursement request please provide a current W-9 form.

### *Please allow thirty days for processing all reimbursement requests*

## Life Insurance Medical Underwriting Requirements

- A reference guide of the medical underwriting requirements necessary based on the applicants age and the amount of life insurance applied for. Requirements are based on age as of nearest birthday.

Face Amount	Insured's Age					
	0-15	16-40	41-50 <sup>1</sup>	51-60 <sup>1</sup>	61-70 <sup>1</sup>	71 & Above <sup>1,2</sup>
0-1,000,000						
1,000,001-10,000,000						
10,000,001 and up						

  

	Juvenile Health History		Medical Examiner's Report + HOS + Blood Profile		Medical Examiner's Report + Med Plus <sup>2</sup> + HOS + Blood Profile
	Juvenile Medical + Home Office Specimen (HOS)		Medical Examiner's Report + HOS + Blood Profile + EKG		Medical Examiner's Report + Med Plus <sup>2</sup> + HOS + Blood Profile + Electrocardiogram (EKG)

For Policy Changes, additional underwriting requirements may be required for requested increases based on particular Product and Rider elections.

\* Issuance of the policy may depend upon answers to the health questions contained in the application.

## Premier LTC Rider Additional Underwriting Requirements

Premier LTC Rider Form #R15LTC, R15LTC SP or ICC15 R15LTC, ICC15 R15LTC SP, R16LTC, R16LTCV SP, or ICC16 R16LTC, ICC16 R16LTCV SP. Form number based on product and state of policy issue.

Issue Age	Underwriting Requirement
65-75 <sup>1</sup>	Completion of MCAS Cognitive assessment.

## Attending Physician Statement (APS)

Insured's Age	Death Benefit Amount	Note and Exclusions
0-17	\$250,000 +	<ul style="list-style-type: none"> <li>Risk Selection may request an APS at any time for cause.</li> <li>Routine visits generally include: employment, school, or insurance physicals, routine normal obstetrics gynecology (OB/GYN) related exams, and routine care for cold, flu, allergies, and minor accidental injuries.</li> <li>An APS can be ordered for up to a \$150 fee without underwriter approval.</li> <li>Recent visits within 3 months, reports may be needed for lesser amounts.</li> </ul>
18-50	Over \$3,000,000 within 2 years	
51-60	Over \$1,000,000 within 3 years	
61 & Above	All amounts	

<sup>1</sup> For ages 50+ APS required.

<sup>2</sup> For ages 71+ applying for LTC Rider do NOT complete the Med Plus.

## Additional Underwriting Requirements

Underwriting Requirements	Issue Age	Death Benefit Amount/Notes
Motor Vehicle Report	16+	\$100,000 & Up
Electronic Inspection Report	0-17	Consult Risk Selection
	18-69	\$5,000,000 - \$10,000,000
Inspection Report (IR)	0-17	Consult Risk Selection
	18-69	\$10,000,001 & Above <sup>3</sup>
	70+	\$5,000,000 & Above
Pharmacy History Report	All ages	\$0 & Up
Third-Party Financial Statements or Equivalent	All ages	\$10,000,001 & Above <sup>3</sup>
Smokers Only: Treadmill Exercise Stress Test (EST)	56-69	Single Life: Exceeds \$5,000,000 Joint Life: Exceeds \$10,000,000

## Age of Evidence

Age	Application	Exam (Paramed, MD Exam)	Blood Profile/HOS	EKG - Resting	EKG - Stress
0-70, Standard or Better Not by exception	6 months	12 months	12 months	12 months	24 months
0-70, other than above	6 months	6 months	6 months	12 months	24 months
71-90	6 months	6 months	6 months	12 months	24 months

## Additional Requirements for Medical Exams Over 90 Days

Exam Age	Certificate of Health (C of H)	Application, Med Examiner's Report, Health History	Pharmacy History Report	Attending Physician Statement (APS)
0-90 days	No	No	Underwriter Discretion	Underwriter Discretion
91-180 days	Yes	No	Underwriter Discretion	Underwriter Discretion
181 days-12 months	No	Yes	Yes	Ages 0-70: Underwriter Discretion Ages 71+: Yes

<sup>3</sup> Risk Selection may require an IR and/or 3rd party financial statements, tax returns or other, at or below these amounts when circumstances warrant it.

# 2

## Conditions Checklist

Your importance in the underwriting process cannot be overstated. Helping identify acceptable risks and qualified applicants will enhance the speed and quality of your clients' underwriting experience. A fully completed, accurate application helps keep the underwriting process as short as possible.

Before quoting an applicant, conduct a quick underwriting conditions pre-qualifying review.

See pages 6-7 and 9-25 for additional information.

### Here's what to look for:

- Proposed insureds should not be taking medications for conditions that are uninsurable.
- The proposed insured cannot have an uninsurable condition.
- Certain conditions will not be considered if they are within an unacceptable period of time.

### Red Flag Medications

The following medications denote a significant underlying disease. It is highly unlikely that we can offer life insurance if your client is taking any of the following medications:

Brand Name	Generic Name
Antabuse®	disulfiram
Aranesp®	darbepoetin alfa
Aricept®	donepezil hcl
Campral®	acamprosate calcium
Depade®	naltrexone
Epogen®	epoetin alfa
Exelon®	rivastigmine
Flolan®	epoprostenol sodium
Namenda®	memantine
Procrit®	epoetin alfa
Razadyne®	galantamine hydrobromide
Remodulin®	treprostinil sodium
ReVia®	naltrexone
Suboxone®	buprenorphine/naloxone
Tracleer®	bosentan
Ventavis®	iloprost
Vivitrol®	naltrexone



## Uninsurable Conditions / Conditions by Timeline

Applications for your clients with any of the following impairments should not be submitted.

Issue	Timeline
Abdominal aortic aneurysm corrected surgically	Within past 6 months
Alcoholism treatment (detoxification and/or inpatient alcohol program)	Within past 2 years or history of treatment and currently using or used within last year
Alzheimer's Disease/dementia	At any time
Bankruptcy (personal), Chapter 7 and 11	Not discharged or discharged < 1 year ago
Cancer treated with chemotherapy or radiation therapy	Within 12 months
Cirrhosis of the liver	At any time
Illegal drug use (other than marijuana)	Within 3 years
DUI/DWI (more than one)	Within 5 years
Gastric/intestinal bypass	Within 6 months
Heart attack	Within 6 months
Heart bypass surgery (CABG)	Within 3 months
HIV positive	At any time
Kidney failure/disease, on dialysis	Currently
Lung disorder, on oxygen	Currently
Mental disorder requiring hospitalization	Within 1 year
Organ transplant pending or received	Within 1 year
Probation/parole	Currently serving or ended < 1 year ago
Pregnant with complications (i.e., toxemia, eclampsia, pre-eclampsia)	Currently
Suicide attempt, one-time only	Within 1 year
Stroke (CVA)	Within 6 months
Valve replacement	Within 6 months

This list is not all inclusive, as other medical conditions and timelines could result in an additional underwriting charge or decline of coverage. If your client has a medical condition not listed here, please refer to the Impairment Guide section for further information.

# 3

## Standard Build Chart

**Juveniles – Ages 0-17:** Please call underwriting at (800) 800-7681 x8510 or email [PLQuickQuotes@PacifiLife.com](mailto:PLQuickQuotes@PacifiLife.com) (3 distinct build charts are available based on height, weight, months old thru age 16, and percentile for age and sex).

### Ages 18-90, Female & Male Standard Build Chart

*Note: Pacific Healthy Rewards (refer to page 5 for more details) may be used to improve ages 18-75 up to Super Preferred.*

Height (ft)	Height (in)	Weight (lb)
4'10"	58"	89 - 160
4'11"	59"	92 - 165
5'0"	60"	95 - 171
5'1"	61"	98 - 177
5'2"	62"	102 - 183
5'3"	63"	105 - 189
5'4"	64"	108 - 195
5'5"	65"	112 - 201
5'6"	66"	115 - 207
5'7"	67"	119 - 213
5'8"	68"	122 - 220
5'9"	69"	126 - 226
5'10"	70"	129 - 233
5'11"	71"	133 - 240
6'0"	72"	137 - 246
6'1"	73"	141 - 253
6'2"	74"	145 - 260
6'3"	75"	148 - 267
6'4"	76"	152 - 275
6'5"	77"	156 - 282
6'6"	78"	161 - 289
6'7"	79"	165 - 297
6'8"	80"	169 - 304
6'9"	81"	173 - 312
		<b>Body Mass Index (BMI)</b> <b>18.5 to 33.5</b>

# 4

## Impairment Guide

You can give your clients a more accurate quote if you alert them to additional information that may be needed if a listed impairment applies to them.

### Key points to keep in mind:

The severity of medical conditions varies among individuals, and individuals may have multiple impairments.

Underwriters will also review the functionality of applicants age 65 or older. This includes their cognition, mobility, and exercise capacity, weight change and nutritional status, social connectivity and degree of independent living.

If medical testing has been advised but not yet completed, the case may be declined, with reconsideration possible after the test results are available. Underwriters' offers depend on the merits of each case and we reserve the right for additional requirements for cause.

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed for Evaluation	Possible Underwriting Decision	
			Most Favorable Class Available for Non-tobacco users	Decline Probable
Alcohol Abuse History and Treatment	APS from treatment facility required when: Treatment completed > 2 years to 6 years ago	Motor Vehicle Report (MVR) Alcohol Questionnaire	Individual consideration Preferred may be available if recovered for more than 10 years	Alcoholism treated within 2 years OR Past history of treatment for alcoholism and use of alcohol within 2 years OR Currently taking Antabuse® or other anti-drinking medication
Alzheimer's Disease				Decline
Aneurysm, Aortic	Required for all cases		Depends on extent of disease and recovery Individual consideration	Surgical correction of abdominal aortic aneurysm within 6 months
Asthma	Required if: Hospitalized within 1 year Oral steroid used continually for more than 1 month in last year	Onset age Frequency, dates of attacks Emergency room or hospitalization dates Treatment Home oxygen use Smoking history	Preferred may be available if: Stable mild disease No hospitalizations No other lung conditions	Using oxygen routinely in the last month Unstable, poor control Severe disease Frequent hospitalization Intubation within 2 years
Blood Disorder	Required if: Male with anemia All platelet disorders (e.g., thrombocytopenia, ITP, thrombocytosis) Bone marrow biopsy Polycythemia Hemochromatosis	Diagnosis Blood counts and investigations Pathology reports from bone marrow biopsy	Varies by diagnosis and severity	Varies by diagnosis and severity
Bronchitis	Required if: Chronic bronchitis (more than 3 bouts per year) Hospitalized within 1 year		Preferred available	Using oxygen routinely in last month

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## Impairment Guide *continued*

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed for Evaluation	Possible Underwriting Decision	
			Most Favorable Class Available for Non-tobacco users	Decline Probable
Cancer	Required for all cancers except basal cell carcinoma	All records (surgery, oncology, pathology and recent follow-up) Type of cancer, stage, grade and recurrence Treatment types with dates completed	Individual consideration Preferred classes may be available for basal/ squamous cell of the skin Standard is generally the best class for non-skin cancers	Treatment with chemotherapy or radiation within 1 year Depends on cancer type and stage
Chest Pain	Required if: Currently being treated with nitroglycerine, Coumadin®, Plavix® Had cardiac events and procedures (e.g. coronary artery bypass, angioplasty PTCA)	All investigations for chest pain that required urgent medical care or were considered cardiac in nature	Varies by cause and severity of underlying impairment	Heart attack (MI) within 6 months Coronary artery bypass within 3 months
Chronic Lung Disease	Required if: Chronic bronchitis COPD (chronic obstructive pulmonary disease) Emphysema Sarcoidosis	Type of lung disorder Pulmonary function test results Chest X-ray or CT scan reports Treatment Smoking history	Varies by cause and severity of underlying impairment	Using oxygen routinely in the past month
Cirrhosis				Decline
Clotting Disorders	Required for all bleeding/ clotting disorders, including: Hemophilia Factor VIII or IX deficiency Factor V or Liden Von Willebrand's disease Prothrombin Mutation Antithrombin deficiency or Protein C or S deficiency	Details of bleeding or clotting history Investigations Hospitalizations Treatments	Varies by condition and control Standard may be available	With venous thromboembolism or thrombosis within the last 6 months
Colitis/Ileitis (Crohn's Disease, Regional Enteritis, Ulcerative Colitis, Ulcerative Proctitis)	Required if: Crohn's disease (regional enteritis) Ulcerative colitis	Age when diagnosed Extent of disease Frequency of attacks Most recent exacerbation Treatment	Varies by condition and control Preferred may be available for ulcerative proctitis Standard may be available for others	Severe attack within 1 year Surgery within 6 months
Coughing Up Blood	Required for all cases	Required for all cases	Ratings based on cause	Ratings based on cause
Dementia (includes Alzheimer's Disease)				Decline



Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed for Evaluation	Possible Underwriting Decision	
			Most Favorable Class Available for Non-tobacco users	Decline Probable
Depression	Required if: Bipolar disorder (manic depression) Attempted suicide more than 2 years ago Currently seeing a psychiatrist or psychologist	A phone interview may be requested for cases in which an APS is not required Treatment and details of control	Preferred may be available depending on severity and recovery (no current medications)	Depends on severity and control Hospitalized for psychiatric reason within 1 year Suicide attempt within 2 years With alcohol/drug abuse or treatment
Diabetes	Required for all cases	Type of diabetes Age when diagnosed Treatment and details of control	Varies by severity and control Standard may be available for type 2 if over age 50 with optimal control and no complications	Pregnant and has gestational diabetes
Dizziness/Fainting	May be required based on cause	Details required for all applicants age 65 and over	Rated for cause	
Drug Abuse History and Treatment	Required for all cases (other than marijuana)	MVR Drug Use Supplement	Individual consideration Preferred may be available if recovered for more than 10 years	Used illegal drugs (other than marijuana within 3 years)
Epilepsy/Seizures	Required if took medication for epilepsy/seizures within 5 years	Type of seizure Frequency of attacks Date of last seizure Treatment	Standard may be available	Petit mal (absence seizures) diagnosed within 6 months Grand mal (tonic clonic) diagnosed within 1 year
Gastric Bypass Surgery	Required if: Surgery/procedure was done within 1-3 years	Pre-operative and current weights Any complications from surgery	Individual consideration	Gastric bypass surgery within 6 months
Gastro-Intestinal Bleeding	Required for bleeding within 3 years except if caused by hemorrhoids		Rated for cause	
Headaches	Required if: Hospitalized within 1 year Disability due to headaches		Rated for cause Many may be eligible for Preferred	
Heart Disease Angina, Angioplasty, Bypass (Coronary Artery Disease, Coronary Bypass CABG)	Required for all cases	All cardiac history, consultations, tests and treatments	Standard may be available	Uninvestigated unstable angina Angioplasty surgery less than 1 month ago CABG less than 3 months ago Heart attack (MI) within 6 months

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## Impairment Guide *continued*

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed for Evaluation	Possible Underwriting Decision	
			Most Favorable Class Available for Non-tobacco users	Decline Probable
Arrhythmia/ Palpitations	Required for all cases	All cardiac history, consultations, tests and treatments	Preferred may be available if well controlled or recovered	Depends on severity and presence of other conditions
Heart Attack/ Myocardial Infarction (MI)	Required for all cases	All cardiac history, consultations, tests and treatments	Depends on severity Table 2 may be available	Depends on severity and presence of other conditions
Murmur, Mitral Valve Prolapse (MVP), Valve Surgery	Required for all cases except MVP with no valve problem	All cardiac history, consultations, tests and treatments	Preferred may be available if no other heart conditions	Heart valve surgery within 6 months
Hepatitis A, B and C	Required if Hepatitis C	Hepatitis screening tests will be included in the insurance lab tests for all those with a history of Hepatitis	Preferred may be available if fully recovered from Hepatitis A or B If fully recovered from Hepatitis C, Standard may be available	Depends on severity
Hypertension/High Blood Pressure	Required at underwriting discretion only for non-nicotine users ages < 56, face amounts < \$1,000,001 Required for all other		Rate classes vary by blood pressure levels (see page 6)	Uncontrolled blood pressure Associated with serious cardiovascular disease High blood pressure and currently pregnant
HIV (Human Immunodeficiency Virus)				Decline
Kidney Disease/Disorder	Required for all except kidney stones and/or kidney infection		Preferred may be available for kidney stones, infections and simple cysts	Kidney failure On dialysis Kidney transplant pending or received within 1 year Polycystic disease
Lupus (SLE)	Required for all cases	Type of lupus (discoid or systemic) Organs involved Treatment	Standard may be available for mildest cases	Depends on severity Systemic lupus with multiple organs involved
Mental Illness	Required if: Suicide attempt more than 2 years ago Currently seeing a psychiatrist/ psychologist Bipolar/manic depression Schizophrenia	Date of diagnosis Treatment Response to treatment Recurrence Current status Stability/control	Varies by cause and severity	Hospitalized for psychiatric reason within 1 year Suicide attempt within 1 year if one attempt only
Multiple Sclerosis (MS)	Required for all cases	Age at diagnosis Course of disease Response to treatment	Standard may be available for very stable, long-term disease	Depends on severity Rapidly progressive disease
Muscular Dystrophy	Required for all cases		Varies by condition and severity	

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed for Evaluation	Possible Underwriting Decision	
			Most Favorable Class Available for Non-tobacco users	Decline Probable
Neurological Disorders	Required for all cases		Varies by condition and severity	
Organ Transplant	Required for all cases		Kidney transplant recipients are rated at very high substandard rates Most other organ transplant recipients are uninsurable	On a transplant list or awaiting a transplant Received a transplant within 1 year
Pancreatitis	Required if: Had active pancreatitis 6 months to 5 years before application		Varies by underlying cause, severity, recurrence pattern and recovery Standard may be available	Active pancreatitis within 6 months Associated with alcohol or substance abuse
Paralysis	Required for all except Bell's Palsy	Cause of paralysis (disease or injury) Degree of injury and recovery Functional impairment Impairment of organs	Preferred may be available for Bell's Palsy, if fully recovered Others are rated according to severity with mild to high substandard rates	Paraplegia diagnosed within 6 months Quadriplegia
Parkinson's Disease	Required for all cases	Age at diagnosis Progression of disease Severity of disease Presence of dementia	Varies by age and severity Standard rates may be available for mild disease with onset at age 59 and older	Depends on severity Rapidly progressive disease Dementia is present
Peripheral Vascular Disease	Required for all except varicose veins	Degree of involvement Treatment Response to treatment Presence of risk factors and other conditions	Varies by severity and associated vascular conditions	
Pituitary Disorder	Required for all cases		Varies by condition and severity	
Pregnancy	Not required if: Normal pregnancy			Any complication of pregnancy (e.g., gestational diabetes, toxemia, eclampsia, pre-eclampsia)
Prostate Disorder	Required if: Prostate cancer PIN (prostate intraepithelial neoplasia) Prostate biopsy within 2 years	PSA test results All pathology and treatment records PSA testing will also be conducted during underwriting	Standard is best available for prostate cancer and PIN Preferred may be available for others	
Rheumatoid Arthritis (RA)	Required for all except osteoarthritis treated with NSAIDs (non-steroidal anti-inflammatories) only	Number of joints affected Severity Treatment Response to treatment Organs involved	Standard may be available	Depends on severity Extensive organ involvement (e.g., lungs, heart and joints) Severe disabling disease

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## Impairment Guide *continued*

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed for Evaluation	Possible Underwriting Decision	
			Most Favorable Class Available for Non-tobacco users	Decline Probable
Seizures/ Convulsions/ Epilepsy	Refer to Epilepsy/ Seizures			
Shortness of Breath	May be required based on cause		Rated for cause	
Skin Disorder	Required if: Melanoma Psoriasis with Arthritis (Psoriatic Arthritis) Squamous Cell Carcinoma		Rated for cause	
Sleep Apnea	Required from: Diagnosing physician and/ or treatment center if within 1 year All others at underwriting discretion	Sleep Studies before and after treatment Treatment type Response to treatment Motor Vehicle Report	Preferred may be available for well- controlled, mild cases	Uncontrolled, severe cases Multiple motor vehicle accidents Suspended driver's license due to sleep apnea
Stroke CVA (Cerebral Vascular Accident) CVD (Cerebral Vascular Disease) TIA (Transient Ischemic Attack or mini-stroke)	Required for all cases	Age at diagnosis Severity of stroke Residual impairment Risk factor control Co-existing diseases Recurrent episodes	Standard may be available if fully recovered or if TIA	Depending on cause, severity and recovery CVA within 6 months TIA, brain aneurysm or A-V malformation within 6 months
Sugar, Protein or Blood in Urine	May be required based on cause			Underwrite for cause
Suicide Attempt	Required if suicide attempt occurred more than 2 years ago		Rate for underlying cause, severity and response to treatment	Suicide attempt within 1 year if one attempt only
Thyroid Disorder	Required for thyroid cancer		Could be rated if cancer involved	
Tuberculosis (TB)	Required if: Treatment completed within 1 year TB not confined to lungs		Standard available for fully recovered cases	Currently being treated for TB
Tumor, Mass, Lump	Required for: All brain tumors/ cancers All cancers/ malignant tumors Not required for: Basal cell carcinoma	Diagnosis of condition Pathology reports of all biopsies Results of all tests Diagnoses	Rated for cause	Treated with chemotherapy or radiation within 1 year
Ulcer/Gastritis	Required for: Bleeding ulcer within 1 year Barrett's Esophagus	Diagnosis of condition Pathology reports of all biopsies Results of all tests	Rate for cause and severity	If associated with alcohol abuse



# 5

## Non-Medical Risks

Non-Medical Risks			
Risk	Questionnaire	Possible Underwriting Decision	
		Most Favorable Class Available	Decline Probable
Aviation (Private piloting)	Aviation Questionnaire	Best class available if qualifies medically and provided aviation aspect is Standard without flat extra.	Aviation Exclusion Rider (AER) for: History of alcohol/substance abuse or treatment History of driving under the influence or while intoxicated (DUI or DWI) Bipolar disorder, major depression, psychosis Coronary artery disease (CAD), heart attack, pacemaker, valve replacement, history of angina or arrhythmia Insulin-dependent diabetes Epilepsy/seizure disorder Untreated sleep apnea Stroke/Transient Ischemic Attack (TIA) Age 71+
Bankruptcy	Financial Questionnaire		Any bankruptcy that has not yet been discharged for > 1 year or payment plan confirmed
Criminal Activity			If committed a major felony or more than 1 felony; if currently on parole or probation, or if less than or equal to 1 year since discharge
Driving History		Best class available if qualifies medically and motor vehicle records assessed Standard.	More than 1 DUI/DWI in the past 5 years Multiple significant traffic violations depending on age of applicant and number and timing of infractions
Hazardous Occupation or Avocation	Avocation Questionnaire	Best class available if qualifies medically and Avocation or Occupation assessed Standard	BASE jumping, wing diving
Travel or Residence, Foreign	Travel only: Future Foreign Travel Questionnaire Foreign Residence also include Wealthy Global Citizen Questionnaire and copy of Passport and Visa	No rating for past travel No rating for travel of < 2 consecutive weeks Special state guidelines may apply Application, requirements and delivery must be completed in the U.S. For foreign Residence best class available for Class A Countries – See LifeLine for Country Class list	Countries classified as X on Country Class list and/or Countries designated Alert Level 4 per U.S. Department of State Travel Advisory

# 6

## Financial Underwriting Guidelines

Financial underwriting is a key part of the underwriting process. Underwriting can go faster and more smoothly if you submit the case with a fully completed application, explanatory cover letter and documentation supporting the amount of insurance applied for. A cover letter should include:

- Reason for the life insurance
- How the amount applied for was determined
- Total amount of life insurance on the insured's life with all companies
- Pending life insurance application
- Life insurance to be replaced
- Reason for unusual or complex ownership and beneficiary designations

With your cover letter please include the illustrations or quote and financial statements to help demonstrate the need for life insurance.

Use the following financial guidelines.<sup>4</sup> The facts of each case will determine how much coverage we offer. You may use these guidelines to help your clients and to determine the information we need in order to evaluate the case.



<sup>4</sup> The information in these financial guideline charts are intended as a guideline only and are subject to individual financial review and assessment of each case.

## Personal Life Insurance<sup>5</sup>

Purpose	Parameters													
Income Replacement	The allowable amount of life insurance is a function of earned income multiplied by an age-linked factor.	<b>Example</b> Your 60-year-old client earning \$100,000 annually may qualify for a \$1.5 million policy (15 x \$100,000 = \$1.5 million).												
	Age	Factor												
	20–30	40												
	31–55	70 - Age = Factor												
	56–60	15												
	61–65	10												
	66–75	5												
76+	individual consideration													
Estate Preservation	We calculate the allowable death benefit amount for estate preservation in one of two ways. For estates of \$5 million and over (single) and \$10 million and over (married), we use the Estate Preservation Formula below. For estates below that amount, we use the Estate Preservation Table below.	<b>Example</b> Your clients, a couple ages 60 and 56, with a current net worth of \$10 million may qualify for a maximum of \$13.2 million of life insurance using the Estate Preservation Formula.*												
	<b>Estate Preservation Formula</b>													
	For estates of \$5 million and over (single) and \$10 and over (married), the maximum death benefit amount is calculated by compounding the client’s current net worth using a reasonable growth rate, over a number of years equal to 75% of the (younger) client’s life expectancy, not to exceed 25 years. (For example, for a life expectancy of 28 years, 75% of 28 = 21 years, which is less than 25 years.) The compounded amount is reduced by the federal estate tax exemption <sup>6</sup> and the result is then multiplied by the expected estate tax rate <sup>7</sup> to determine the allowable death benefit amount.													
	<b>Estate Preservation Table</b>													
	<ul style="list-style-type: none"><li>Calculates the amount of death benefit reasonably expected to cover estate settlement costs for estates valued below federal estate tax exemption amounts.<sup>6</sup></li><li>The allowable amount is based on a percentage of the current estate value. For example, someone with a current estate value of \$3 million would qualify for \$1,050,000 (\$3 million x 35% = \$1,050,000).</li></ul>													
	Refer to table immediately below.													
	<table><tr><th>CURRENT ESTATE VALUE (SINGLE OR MARRIED)</th><th>DEATH BENEFIT AMOUNT % OF CURRENT ESTATE VALUE</th></tr><tr><th>Assumes No Growth</th><th>Assumes No Growth</th></tr><tr><td>\$5,000,000 plus</td><td>40%</td></tr><tr><td>\$3,000,000 - \$4,999,999</td><td>35%</td></tr><tr><td>\$1,000,000 - \$2,999,999</td><td>30%</td></tr><tr><td>&lt;\$1,000,000</td><td>0%</td></tr></table>	CURRENT ESTATE VALUE (SINGLE OR MARRIED)	DEATH BENEFIT AMOUNT % OF CURRENT ESTATE VALUE	Assumes No Growth	Assumes No Growth	\$5,000,000 plus	40%	\$3,000,000 - \$4,999,999	35%	\$1,000,000 - \$2,999,999	30%	<\$1,000,000	0%	
CURRENT ESTATE VALUE (SINGLE OR MARRIED)	DEATH BENEFIT AMOUNT % OF CURRENT ESTATE VALUE													
Assumes No Growth	Assumes No Growth													
\$5,000,000 plus	40%													
\$3,000,000 - \$4,999,999	35%													
\$1,000,000 - \$2,999,999	30%													
<\$1,000,000	0%													

\* The younger insured’s life expectancy of 28 years is multiplied by 75% = 21 years, which is less than 25 years. So, the clients’ \$10 million current estate value is multiplied by 3.4 (the compound factor for a 6% reasonable growth rate over 21 years = \$34 million. A \$10 million<sup>3</sup> federal estate tax exemption is deducted and the result is then multiplied by an expected 55% federal estate tax rate<sup>4</sup> = \$13.2 million allowable death benefit amount

\* The younger insured's life expectancy of 28 years is multiplied by 75% = 21 years, which is less than 25 years. So, the clients' \$10 million current estate value is multiplied by 3.4 (the compound factor for a 6% reasonable growth rate over 21 years = \$34 million. A \$10 million<sup>3</sup> federal estate tax exemption is deducted and the result is then multiplied by an expected 55% federal estate tax rate<sup>4</sup> = \$13.2 million allowable death benefit amount.

<sup>5</sup> Deferred compensation, split-dollar plans, and pension plans given by an employer are all considered "perks" and are all included in the personal insurance, subject to the Income Replacement and Estate Protection parameters.

<sup>6</sup> Federal estate tax exemption refers to the original \$5 million exemption amount (for an individual) and \$10 million (for a married couple) as provided for in the American Taxpayer Relief Act of 2012, without regard to any indexing for inflation or any temporarily doubling of the exemption resulting from the Tax Cuts and Jobs Act of 2017.

<sup>7</sup> The expected estate tax rate used as 55%, which takes into account the potential for both state and federal estate taxes.

# 6

## Financial Underwriting Guidelines *continued*

### Personal Life Insurance<sup>5</sup>

Purpose	Parameters
<b>Asset Repositioning</b>	<p>Individuals who have accrued money in both qualified (401k, IRA, etc.) and nonqualified (Savings, Certificates of Deposit (CDs), etc.) accounts, and choose to convert those funds into life insurance products. When underwriting the death benefit requested, we will apply our existing guidelines for income replacement (only to their earned income), estate preservation, and debt repayment. Any existing insurance may reduce the amount of allowable new death benefit. To be considered, the applicant should have a minimum net worth of \$1 million. In addition, we'll review the applicant's ability to pay the premium using the Affordability guidelines in the section below.</p> <p><b>Affordability</b></p> <p>As part of the financial review for all cases, we determine if the applicant can afford to pay the premiums for the requested coverage using the following guidelines. In the event the death benefit is justified based on the applicant's financials but the affordability guidelines are not met, the death benefit applied for may be reduced.</p> <ul style="list-style-type: none"> <li>No more than 20% of earned income can be used to pay annual premiums</li> </ul> <p>The following guidelines will be used when liquid assets are used to pay premiums:</p> <ul style="list-style-type: none"> <li>Under Age 59½: Up to 40% of their liquid net worth. Qualified plans (401(k), 403(b), 457, IRA or Roth IRA) cannot be used as a funding source nor can they be used to factor into the client's liquid net worth.</li> <li>Ages 60-69: Up to 30% of their liquid net worth. Qualified plans may be considered in factoring into the client's net worth and as a funding source.</li> <li>Ages 70+: Up to 20% of their liquid net worth. Qualified plans may be considered in factoring into the client's net worth and as a funding source.</li> </ul>
<b>Income Replacement and Estate Protection</b>	<ul style="list-style-type: none"> <li>The total amount of insurance cannot exceed the greater of amounts determined under Income Replacement or Estate Protection.</li> </ul> <div> <p><b>Example</b></p> <p>Using the two examples on the previous page, the maximum amount of personal insurance would be \$13.2 million.</p> </div>
<b>Charitable Coverage</b>	<ul style="list-style-type: none"> <li>The life insurance amount is based on the insured's ability to contribute and established record of giving.</li> <li>Personal insurance needs should already be met.</li> <li>Use the amount of annual giving, multiplied by the corresponding factor in the Income Replacement table on previous page.</li> </ul> <div> <p><b>Example</b></p> <p>Your 55-year-old client who annually gives \$10,000 to a favorite charity may qualify for a \$150,000 policy (15 x \$10,000 = \$150,000).</p> </div>
<b>Homemaker Spouse Coverage</b>	<ul style="list-style-type: none"> <li>An unemployed spouse may qualify for coverage using the Income Replacement factors above, using his/her age, and 50% of the working spouse's income.</li> <li>Consideration is based on the couple's joint net worth, the insurance in place on the income-earning spouse, and the total life insurance on both.</li> </ul>
<b>Juvenile Coverage*</b>	<ul style="list-style-type: none"> <li>All siblings are similarly insured.</li> <li>The parent should have a minimum of two times (and preferably four times) the life insurance as that proposed on the child.</li> <li>Consideration is given to the purpose of coverage and the family's net worth. Cover letters are strongly recommended when the amount of insurance is greater than \$50,000.</li> </ul> <div> <p><b>Example</b></p> <p>Your clients, a couple with a \$1 million policy each, may qualify for \$250,000 juvenile insurance for each of their children.</p> </div>

\* Coverage only as permitted by individual state laws.

## Business Life Insurance

Purpose	Parameters
Key Person	<ul style="list-style-type: none"> <li>Used to indemnify the company against the loss of an employee whose skills and contributions are critical to the firm.</li> <li>In most cases, use a factor of five to ten times the individual's annual income to determine the amount permitted. Age, level of managerial or technical experience, unique and special skills, and prior track record of success are considerations in determining the factor used.</li> </ul>
Buy-Sell/Stock Redemption	<ul style="list-style-type: none"> <li>It is expected that all owners of the business should be covered, commensurate with their ownership percentages.</li> <li>Establish the value of the business using the net income of the business over the past two to three years. Multiply it by a factor between five and 10 (the viability of the business is used to determine the factor used). Then multiply by the percentage of the business owned by the individual.</li> </ul>
Debt Repayment	<ul style="list-style-type: none"> <li>The business usually owns the policy, and the death benefit is assigned to the lending institution.</li> <li>The sum of insurance should not exceed 80% of the loan value.</li> <li>The sum of the key person coverage plus business loan coverage cannot exceed 150% of the key person limits.</li> </ul>

### Example

Your client, who owns 20% of a business, that has shown a steady growth over the past five years and has a net income of \$2 million, may qualify for a \$4 million policy (2 million x 10 x 20% = \$4 million).

## Financial Underwriting Requirements

Issue Age	Amount Underwritten	Requirement
0-17 18-69	Consult Risk Selection \$5,000,000-\$10,000,000	<b>Express Report:</b> No contact with the proposed insured. Includes searches of four databases: <ul style="list-style-type: none"> <li>National Tips and Leads (criminal court records)</li> <li>Social Security number verification (confirmation that the number belongs to the proposed insured and not someone deceased)</li> <li>Credit check</li> <li>Prescription database search</li> </ul>
0-17 18-69 70+	Consult Risk Selection \$10,000,001 & Up* \$5,000,000 & Up	<b>Inspection Report:</b> Includes interview with the proposed insured and others (CPA, attorney, banker, business associates, etc.), credit check, and search of court records. May be used to satisfy third-party financial statement requirement when CPA/accountant is interviewed. May verify the income and net worth, for amounts within our retention.
All ages	\$10,000,000 & Up*	<b>Third-Party Financial Statement:</b> CPA/accountant-signed statements that verify current net worth and income over the last three years (information provided by the CPA/accountant without supporting documents does not constitute a third-party financial statement). Tax returns may be required on a case-by-case basis.

\* Underwriting may require inspection reports, tax returns, and/or third-party financial statements, at or below these amounts, when circumstances warrant it.

## TIP:

Want to reduce the need for follow up questions during the underwriting process? Include these tools when submitting an application to provide an early "total picture" of your client:

- **Cover Letter Template (15-30296)**
- **Financial Questionnaire (15-15518)**

**Go to [Lifeline.PacificLife.com](http://Lifeline.PacificLife.com) to access these time-saving tools.**

### Temporary Insurance Application and Agreement (TIA)\*

We offer temporary insurance coverage to protect your client during the underwriting process. Temporary insurance provides a limited amount of life insurance coverage, for a limited period of time, subject to Terms and Conditions.

Terms & Conditions	
<b>TIA Requirements</b>	<ul style="list-style-type: none"> <li>• All questions on TIA Application must be answered “no”</li> <li>• Forms must be signed and dated by the insured(s) and Producer</li> <li>• Must be dated the same date as the Life Application/ Life Ticket and Check/Electronic Funds Transfer (EFT) form</li> <li>• Minimum initial premium must be submitted with the completed Life Application and TIA form</li> </ul>
<b>Age Limits</b>	The proposed insured (s) must be 15 days old and not over age 70.
<b>Date Coverage Begins</b>	<ul style="list-style-type: none"> <li>• Temporary life insurance coverage will begin on the date TIA application was signed but only if a request for life insurance policy has been initiated, and payment is received</li> </ul>
<b>Date Coverage Terminated (90 day maximum)</b>	<p>TIA will terminate automatically on the earliest of:</p> <ul style="list-style-type: none"> <li>• 30 days from date of TIA if a required telephone interview or medical examination is not completed and received</li> <li>• Anyone of the following scenarios: <ul style="list-style-type: none"> <li>◦ 90 days from date on TIA application</li> <li>◦ The date any policy is offered in connection with TIA</li> <li>◦ 5 days after the date Pacific Life mails notice of termination of coverage under TIA and refunds the full payment associated with TIA</li> </ul> </li> </ul> <p>Pacific Life reserves the right to terminate a TIA under the following circumstances:</p> <ul style="list-style-type: none"> <li>• Pacific Life determines that the proposed insured is not insurable as a standard risk at the time of the Life Application or medical examination, if later</li> <li>• There are any errors or omissions on the current Life Application</li> </ul>
<b>Maximum Amount of Coverage:</b>	<p><b>Single Life:</b> Policy face amount up to \$1,000,000</p> <p><b>Joint Life:</b> Policy face amount up to \$1,500,000</p> <p>If the proposed insured has more than one TIA in effect, the maximum aggregate coverage under any and all TIAs is \$1,000,000 or \$1,500,000 for joint insurance applications.</p>

\* TIA coverage is not available in Kansas.



## Reinsurance Limits

Single Life Cash Value Insurance – Fully Underwritten			
All Tables through Table H			
Issue Age	PL Retention <sup>8</sup>	Autobind <sup>8,9,10</sup>	Jumbo <sup>11</sup>
0 – 19	20,000,000	10,000,000	65,000,000
20 – 65	20,000,000	45,000,000	65,000,000
66 – 70	20,000,000	32,500,000	65,000,000
71 – 75	20,000,000	25,000,000	65,000,000
76 – 80	10,000,000	15,000,000	65,000,000
81 – 85	2,500,000	5,000,000 (Thru Table D)	30,000,000 (Thru Table D)
86 – 90	2,500,000	No Autobind (Standard Only)	N/A (Standard Only)

Joint Survivor Life (JSL) Cash Value Insurance – Fully Underwritten			
Issue Age	PL Retention <sup>8</sup>	Autobind <sup>8,9,10</sup>	Jumbo <sup>11</sup>
20 – 65	25,000,000	40,000,000	65,000,000
66 – 70	25,000,000	32,500,000	65,000,000
71 – 75	25,000,000	25,000,000	65,000,000
76 – 80	15,000,000	15,000,000	65,000,000
81 – 85*	5,000,000	5,000,000 (Thru Table D)	30,000,000 (Thru Table D)
86 – 90**	5,000,000	No Autobind (Standard Only)	N/A (Standard Only)

For JSL, if one life is uninsurable, use Single Life Cash Value Life Insurance (Fully Underwritten) limits on the healthy life to determine retention and autobinding limits.

\* For ages 81–85, Substandard Table Ratings higher than D are considered uninsurable.

\*\* For ages 86–90, Substandard Table Ratings higher than Standard are considered uninsurable.

<sup>8</sup> Retention and Autobind are reduced by 50% for cases involving aviation unless an Aviation Exclusion Rider (AER) is used. Please note that AER is not permitted with Joint cases.

<sup>9</sup> For all policies: Autobind is not permitted for team members, managers, and coaches in the NFL, NBA, MLB, or NHL.

<sup>10</sup> For all policies: Autobind is reduced by 50% for entertainers.

<sup>11</sup> Jumbo is defined as the total of all life insurance policies (inforce and applied for with all companies).

Pacific Life, its affiliates, their distributors and respective representatives do not provide tax, accounting or legal advice. Any taxpayer should seek advice based on the taxpayer's particular circumstances from an independent tax advisor or attorney.

*Pacific Life is a product provider. It is not a fiduciary and therefore does not give advice or make recommendations regarding insurance or investment products.*



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