

FIELD UNDERWRITING GUIDE



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I. MISSION STATEMENT

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

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

- We will respond to all field inquiries, acknowledging a telephone call within three business hours.
- An underwriting determination will be made within 24 hours of receipt of the “Final Medical Requirement.”

II. PREQUALIFICATION

The Underwriting area can be contacted directly at 888-604-7296 (press prompt 3) between the hours of 8 a.m. and 6 p.m. Eastern time to prequalify an applicant for Long Term Care Insurance or to answer underwriting inquiries.

III. PREPARING YOUR CLIENT FOR THE UNDERWRITING PROCESS

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

An underwriting process brochure entitled “Our Underwriting Process” (LTC-1590) has been created to assist you in preparing your client for the above programs. It is essential that your client receives this brochure during the sales process, as this will set your client’s expectations and ensure favorable results.

In some instances, we may request a motor vehicle report, pharmacy profile, or information from the Medical Information Bureau to further evaluate insurability.

IV. PROCEDURES FOR ACCEPTING APPLICATIONS FROM NON-ENGLISH SPEAKING APPLICANTS

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

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

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

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

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

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

V. APPLICATION SUBMISSION

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

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

The Underwriting Department will not process an application if the:

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

VI. UNDERSTANDING OUR PHILOSOPHY AND APPROACH TO COGNITIVE SCREENING

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

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

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

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

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

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

Milliman USA, a leading actuarial firm, performed an independent study indicating: "The MCAS shows improved expected LTC Insurance profitability compared to any other cognitive screen on the basis of claims savings and increased premiums alone."

VII. UNDERWRITING REQUIREMENTS

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

Criteria

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

Programs

Paramedical Examination

This is an exam that is scheduled with a John Hancock appointed paramed examiner at our expense that typically takes place at the applicant's home, in the room where the applicant is most comfortable. The exam includes a review of the applicant's medical history, a blood pressure reading, a pulse check, height and weight readings, and a urine specimen.

If the applicant chooses to see their physician for an examination, as opposed to a John Hancock appointed examiner, we will reimburse the applicant a maximum of \$100 for the examination. In this instance, you will need to provide the applicant with the examination form which can be obtained on our website. The exam results and billing statement should be forwarded to:

John Hancock Life Insurance Company
Retail Long Term Care Underwriting
200 Berkeley Street, B5
Boston, MA 02117

M.D. Examination

This is an exam that is scheduled with a John Hancock appointed physician at our expense and must be performed in the physician's office. The exam includes an examination of the heart, nervous, and respiratory systems, in addition to blood pressure readings, a pulse check, height and weight readings, and a urine specimen. Blood studies and an EKG are not required.

If the applicant chooses to see their physician for an examination, as opposed to a John Hancock appointed physician, we will reimburse the applicant a maximum of \$100 for the examination. In this instance, you will need to provide the applicant with the examination form which can be obtained on our website. The exam results and billing statement should be forwarded to:

John Hancock Life Insurance Company
Retail Long Term Care Underwriting
200 Berkeley Street, B5
Boston, MA 02117

Telephonic Interview

This is a phone conversation between a Nation's CareLink nurse and the applicant consisting of standardized medical questions. The questions focus on their medical history, medications, symptoms they may have, lifestyle, and daily activities such as meal preparation, transportation, bathing, and toileting. We'll ask the applicant the names of their doctors, and we'll ask them to participate in a brief memory exercise. A nurse from Nation's CareLink will call the applicant to conduct the interview. If the applicant receives the call at a time that's inconvenient for them, the nurse will reschedule the interview. It's important that the applicant chooses a quiet time and place for their interview to ensure more favorable results. The interview usually takes 30 minutes, depending on the extent of their medical history. After the applicant completes the interview, they may receive a customer satisfaction survey allowing John Hancock to evaluate the quality of their experience.

UNDERWRITING REQUIREMENTS (continued)

Medical Records

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

Personal Interview (On-site)

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

Medical Information Bureau (MIB)

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

Prescription Profiles

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

UNDERWRITING REQUIREMENTS (continued)

AGES 55 and YOUNGER

Criteria	Paramed w/Urine	M.D. Exam w/Urine	Telephone Interview	Personal Interview	Medical Records
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP 			✓		
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP 			✓		✓
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP 	✓				
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP 		✓	✓		
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 					✓
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 			✓		✓
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 	Applicant must have undergone a complete physical exam prior to application submission.				
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 	Applicant must have undergone a complete physical exam prior to application submission.				
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 					✓
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 					✓
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 	✓				
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 		✓			

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

UNDERWRITING REQUIREMENTS (continued)

AGES 56–64

Criteria	Paramed w/Urine	M.D. Exam w/Urine	Telephone Interview	Personal Interview	Medical Records
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP 			✓		
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP 			✓		✓
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP 		✓			
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP 		✓	✓		
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 					✓
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 			✓		✓
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 	Applicant must have undergone a complete physical exam prior to application submission.				
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 	Applicant must have undergone a complete physical exam prior to application submission.				
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 					✓
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 					✓
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 		✓			
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 		✓			

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

UNDERWRITING REQUIREMENTS (continued)

AGES 65–69

Criteria	Paramed w/Urine	M.D. Exam w/Urine	Telephone Interview	Personal Interview	Medical Records
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP 			✓		
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP 			✓		✓
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP 		✓			
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP 		✓	✓		
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 					✓
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 			✓		✓
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 	Applicant must have undergone a complete physical exam prior to application submission.				
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • History of a significant medical condition as stated below* 	Applicant must have undergone a complete physical exam prior to application submission.				
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 					✓
<ul style="list-style-type: none"> • Has consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 				✓	✓
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Not applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 		✓			
<ul style="list-style-type: none"> • Has not consulted PCP within 18 months • Applying for 10 yr. or Lifetime BP • Non-English Speaking or Hearing Impaired 		✓		✓	

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

UNDERWRITING REQUIREMENTS (continued)

AGES 70+

Criteria	Paramed w/Urine	M.D. Exam w/Urine	Telephone Interview	Personal Interview	Medical Records
• Has consulted PCP within 18 months				✓	✓
• Has not consulted PCP for 18 months				✓	✓
• Has not consulted PCP for 3+ years		✓		✓	

VIII. UNDERWRITING REQUIREMENTS FOR CHRISTIAN SCIENTIST

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

Christian Science Sanitariums do not perform nursing services by the same standards as general western medical and nursing practices. Their premise is that healing is a result of prayer, and therefore their care does not fall into the categories of skilled, intermediate, or custodial. For this reason, these facilities, and their treatments do not meet our policy eligibility criteria. Christian Science nursing principles, as described above, also apply to home health care practice. Again, policy criteria for eligibility and treatment would not be satisfied. While we do not discriminate against members of the Christian Science religion, it should be clear that when applying for coverage any Christian Science care would not be covered under our long term care policies. Although if they choose to receive long term care services from providers and facilities that meet policy criteria, we will cover them.

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

IX. UNDERWRITING RISK CLASSIFICATIONS BY PRODUCT

Advantage Gold (NY Partnership Only)

Preferred

Select

Class 1 (30% increase)

Class 2 (75% increase)

Custom Care, Essential Care, Family Care

Preferred*

Select

Class 1 (25% increase)

Class 2 (50% increase)

*Preferred rates not available for this product, effective 1/1/04, with the exception of Florida and California for all benefit periods except Lifetime.

Custom Care II, Essential Care II, Family Care II

Preferred

Select

Class 1 (25% increase)

Class 2 (50% increase)

X. UNDERWRITING GUIDELINES

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

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

CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
Achilles Tendonitis: Inflammation of the achilles tendon (the tendon that connects the muscles of the calf to the heel)	Preferred
Acoustic Neuroma: A benign tumor of the auditory nerve Surgically removed, no residual other than hearing loss, no seizures	Preferred
Untreated, current seizure activity, balance disturbance or falls, inoperable tumors	Decline
Acromegaly: A chronic metabolic disorder that results in gradual enlargement of body tissues including the bones of the face, jaw, hands, feet, and skull	Decline
Actinic Keratosis: A pre-malignant lesion of the skin	Preferred
Adams-Stokes Medically treated or with successful pacemaker implant >3 months, no underlying cardiac conditions Symptomatic with episodes of shortness of breath, fainting, syncope or ejection fraction <40%	Select Decline
Addison's Disease: An endocrine or hormone disorder which occurs when the adrenal glands do not produce enough of the hormone cortisol or aldosterone Stable, well controlled, no complications, on <10mg steroids >24 months	Select
Adult Day Care Services: Current	Decline
AIDS: A disease of the immune system that fails to fight infection	Decline
Alcohol Consumption >4 oz. liquor, 16 oz. wine, or 4 beers per day	Decline
Alcoholism: A chronic illness marked by consumption of alcohol at a level that interferes with physical or mental health, social, family, or occupational responsibilities Abstinence <18 months, normal blood studies, no complications Abstinence >18 months, normal blood studies, no complications Abstinence >18 months, chronic treatment with an antialcoholic (e.g., antabuse) Alcohol abuse with detox admission, current abstinence <18 months Alcohol abuse with detox admission, current abstinence >18 months Alcohol abuse with multiple hospitalizations and/or detox admission and current abstinence <36 months	Postpone 18 months Select Individual Consideration Postpone 18 months Select Postpone 36 months

* Substandard risk classifications are only eligible for 2–6 year benefit periods.

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

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

CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
	<p>Alcoholism (continued)</p> <p>Alcohol abuse with multiple (three or more) hospitalizations and/or detox admission and current abstinence >36 months</p> <p>History of alcohol abuse with current fatty liver or abnormal liver function tests</p> <p>History of alcoholism with cirrhosis</p>	<p>Class 1 w/180 E.P. or Class 2*</p> <p>Decline</p> <p>Decline</p>
	<p>Allergic Rhinitis: Inflammation, predominantly in the nose and eyes, that occurs after exposure to airborne particles</p>	Preferred
	<p>Allergies: An acquired, abnormal immune response to a substance that does not normally cause a reaction in most people</p>	Preferred
	<p>Alopecia: Absence or loss of hair</p>	Preferred
	<p>Alzheimer's Disease: A slowly progressive form of dementia</p>	Decline
♥	<p>Amaurosis Fugax: Temporary loss of vision in one eye due to insufficient blood flow to the retina</p>	Refer to Transient Ischemic Attack
	<p>Amputation: Removal of a limb, part, or organ</p> <p>Due to trauma or congenital, independent, single limb, >12 months</p> <p>Due to trauma or congenital, 2 limbs</p> <p>Due to disease</p>	<p>Select — Class 1*</p> <p>Decline</p> <p>Decline</p>
	<p>Amyotrophic Lateral Sclerosis (ALS): A disorder causing progressive loss of control of voluntary muscles due to the destruction of nerves in the brain and spinal cord</p>	Decline
	<p>Anemia: A blood disorder characterized by the decreased ability of the red blood cells to provide adequate oxygen supplies to body tissues</p> <p>Compensated, well controlled, normal stable blood studies >6 months</p> <p>Abnormal blood studies</p> <p>Etiology unknown</p> <p>Chronically abnormal blood studies</p> <p>Due to disease</p> <p>Aplastic, >12 months, normal stable blood studies</p>	<p>Select — Preferred</p> <p>Postpone 6 months</p> <p>Postpone 6 months</p> <p>Individual Consideration</p> <p>Refer to disease</p> <p>Select</p>

* Substandard risk classifications are only eligible for 2–6 year benefit periods.

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

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

CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
<p>♥ Aneurysm: A bulge in the wall of an artery</p> <p>Abdominal-aortic, new onset, <6 months</p> <p>Abdominal-aortic, symptomatic, <6 months</p> <p>Abdominal-aortic, surgically repaired, full recovery <6 months</p> <p>Abdominal-aortic, surgically repaired, full recovery >6 months</p> <p>Abdominal-aortic, unoperated, monitored w/routine follow-ups >6 months, <5 cm with no growth</p> <p>Abdominal-aortic, unoperated, monitored w/routine follow-ups >6 months, >5 cm or with progression</p> <p>Cerebral, surgically repaired, fully recovered, no neurological deficit, <12 months</p> <p>Cerebral, surgically repaired, fully recovered, no neurological deficit, >12 months</p> <p>Cerebral, unrepaired, or inoperable</p> <p>Thoracic, new onset <6 months</p> <p>Thoracic, symptomatic <6 months</p> <p>Thoracic, surgically repaired, asymptomatic >6 months</p> <p>Thoracic, unoperated, stable, monitored w/routine follow-ups >6 months, <5 cm w/no growth</p> <p>Thoracic, unoperated, stable, monitored w/routine follow-ups >5 cm, or w/growth or unfavorable location</p> <p>Thoracic, inoperable location</p>	<p>Postpone 6 months</p> <p>Decline</p> <p>Postpone 6 months</p> <p>Select</p> <p>Select w/90 day E.P.</p> <p>Decline</p> <p>Postpone 12 months</p> <p>Select</p> <p>Decline</p> <p>Postpone 6 months</p> <p>Decline</p> <p>Select</p> <p>Select w/90 day E.P.</p> <p>Decline</p> <p>Decline</p>
<p>Angina: Pain, heaviness, pressure, or discomfort in the chest</p> <p>Musculoskeletal-related</p> <p>History of no underlying heart disease, asymptomatic</p> <p>Well controlled on prescription medications, no underlying heart disease</p> <p>Symptomatic</p> <p>New onset</p>	<p>Preferred</p> <p>Preferred</p> <p>Preferred</p> <p>Decline</p> <p>Postpone 6 months</p>

* Substandard risk classifications are only eligible for 2–6 year benefit periods.

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

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

CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
	<p>Ankylosing Spondylitis: A chronic inflammatory disease that affects the joints between the vertebrae of the spine, and the joints between the spine and the pelvis that eventually causes the affected vertebrae to fuse or grow together</p> <p>Asymptomatic, treatment-free, no limitations</p> <p>Mildly symptomatic, treated with anti-inflammatories, no limitations</p>	<p>Select</p> <p>Class 1*</p>
	<p>Anorexia Nervosa: An eating disorder associated with a distorted body image and marked fasting</p>	Decline
	<p>Anxiety: A feeling of apprehension or fear that lingers</p> <p>Situational or new onset, no medications</p> <p>Treated with single medication</p> <p>Treated with 2 or more medications</p> <p>Symptomatic</p>	<p>Preferred</p> <p>Select</p> <p>Refer to Depression</p> <p>Decline</p>
	<p>Appendectomy: Surgical removal of the appendix</p>	Preferred
	<p>Arterious Venous Malformation (AVM): A tangle of blood vessels in the brain</p>	Decline
	<p>♥ Arteritis (temporal, giant cell): Inflammation of an artery</p> <p>New onset, stable, treatment-free <24 months</p> <p>Stable, treatment-free >24 months</p> <p>Unstable, requiring treatment</p>	<p>Postpone 24 months</p> <p>Select</p> <p>Decline</p>
	<p>○ Arthritis (excluding Osteo, Rheumatoid, and Degenerative): Inflammation of a joint</p> <p>Mild, treated with non-prescription medications</p> <p>Mild, symptomatic, treated with 1 anti-inflammatory</p>	<p>Preferred</p> <p>Select</p>
	<p>□ Asbestosis: A lung disease</p>	Refer to Chronic Obstructive Pulmonary Disease
	<p>○ Aseptic Necrosis: A condition resulting from the temporary or permanent loss of blood supply to the bones</p> <p>Surgically repaired, no limitations, no progression of disease >6 months</p>	Select

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
□	Asthma: A respiratory disease marked by attacks of breathing difficulty, wheezing, and coughing	
	Seasonal, short-term treatment, controlled	Select — Preferred
	Chronic, regular treatment, stable, normal pulmonary function tests	Select
	Chronic oral steroid use	Decline
	Frequent hospitalizations, oxygen use, multiple exacerbations, multiple medications	Decline
	Ataxia: Defective muscular coordination that manifests when voluntary muscular movements are attempted	
	<12 months, etiology unknown	Postpone 12 months
♥	Atrial Fibrillation: A rapid, irregular heart rhythm	
	New onset <6 months	Postpone 6 months
	Cardioversion >6 months, single successful cardioversion, normal sinus rhythm, no cardiac history	Select
	Well controlled on oral medications, normal sinus rhythm >6 months, no cardiac history	Select
	Chronic, well controlled on Coumadin >12 months	Class 1*
	Recurrent cardioversion, chronic uncontrolled	Decline
	Atrial Flutter: An irregularity of the heartbeat in which the contractions of the atrium exceed in number those of the ventricle	See Atrial Fibrillation
	Atrophic Vaginitis: Inflammation of the vagina following menopause	Preferred
	Atrophy (Brain): A decrease in size or wasting of the brain	
	Ages 70 and over, no associated conditions or symptoms, normal cognitive screen, mild and normal for age	Select
	<70 or with any associated conditions, symptoms, or abnormal cognitive screen	Decline
	Attention Deficit Disorder (ADD): A condition characterized by a developmentally inappropriate level of attention, concentration, activity, and distractibility	
	Stable >3 months, compliant with <2 medications, active lifestyle, no behavioral changes	Select
	Basal Cell Skin Cancer: A malignant skin tumor involving cancerous changes of the skin cells	Preferred
	Bell's Palsy: A disorder involving sudden facial drooping and decreased ability to move the face	Preferred

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	<p>Bipolar/Manic Disorder: A mood disorder characterized by mood swings from mania (exaggerated feeling of well-being) to depression</p> <p>New onset <12 months</p> <p>Well controlled on 1–3 medications >12 months</p> <p>Treated with 4 or more medications</p> <p>Uncontrolled</p> <p>History of psychiatric hospitalization >24 months</p> <p>History of electroconvulsive shock therapy</p>	<p>Postpone 12 months</p> <p>Class 1 w/90 day E.P.*</p> <p>Decline</p> <p>Postpone 24 months</p> <p>Class 2 w/90 day E.P.*</p> <p>Decline</p>
	Bladder Infection: An infection of the urinary bladder	Preferred
<input type="checkbox"/>	Bronchiectasis: A respiratory disorder with abnormal destruction and widening of the large airways	Refer to Chronic Obstructive Pulmonary Disease
<input type="checkbox"/>	<p>Bronchitis: A respiratory disorder with inflammation of the bronchi, the main air passages to the lungs</p> <p>Mild, well controlled on <3 prescription medications, stable, normal pulmonary function tests</p> <p>Mild, short-term steroid use, stable, normal pulmonary function tests</p> <p>Moderate, intermittent steroid use, stable, normal pulmonary function tests</p> <p>Uncontrolled or recent hospitalization</p> <p>Chronic, daily steroid use, or reduced pulmonary function tests</p>	<p>Select</p> <p>Select</p> <p>Select — Class 1*</p> <p>Postpone 3 months</p> <p>Decline</p>
	Buerger's Disease: A chronic circulatory disease that leads to obstruction of the blood vessels of the hands and feet	Decline
	Bulimia: An illness of uncontrolled episodes of overeating, usually followed by self-induced vomiting	Decline
	Bunion: Defined when the big toe angles toward the second toe, resulting in inflammation and pain	Preferred
	Bursitis: An acute or chronic inflammation of the fluid-filled sac (bursa) that lies between tendon and skin or between tendon and bone	Preferred
	Calculi (Renal): A condition in which one or more stones are present in the kidney	Preferred

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
<p>Cancer (Internal): An uncontrolled growth of abnormal cells which have mutated from normal tissue</p> <p>Stage I & II, surgery- and treatment-free (chemo, radiation), full recovery, no complications</p> <hr/> <p>Stage III, surgery- and treatment-free (chemo, radiation), full recovery, no complications, >12 months</p> <hr/> <p>Stage IV, metastatic, >3 positive lymph nodes, or multiple cancers</p> <hr/> <p>Recurrent, surgery- and treatment-free (chemo, radiation), full recovery, no complications</p>	<p><12 months: Select w/365 day E.P.</p> <p>>12 months: Select w/180 day E.P.</p> <p>>24 months: Select</p> <hr/> <p>>12 months: Select w/365 day E.P.</p> <p>>24 months: Select w/180 day E.P.</p> <p>>36 months: Select</p> <hr/> <p>Decline</p> <hr/> <p>Class 1 or Select >36 months w/180 day E.P.*</p>
<p>Cancer (Prostate): An uncontrolled growth of abnormal cells which have mutated from normal tissue</p> <p>Stage I & II, surgery- and treatment-free (chemo, radiation), or stable with hormone manipulation therapy, PSA level <1.0, no complications</p> <hr/> <p>Stage III, surgery- and treatment-free (chemo, radiation), or stable with hormone manipulation therapy, PSA level <1.0, no complications, >6 months</p> <hr/> <p>Recurrent, surgery- and treatment-free (chemo, radiation), full recovery, or stable with hormone manipulation therapy, PSA level <1.0, no complications, >24 months</p> <hr/> <p>Stage IV, metastatic (>3 positive lymph nodes) or multiple cancers</p>	<p><6 months: Select w/365 day E.P.</p> <p>>6 months: Select w/180 day E.P.</p> <p>>12 months: Select</p> <hr/> <p>>6 months: Select w/365 day E.P.</p> <p>>12 months: Select w/180 day E.P.</p> <p>>24 months: Select</p> <hr/> <p>Class 1 or Select w/180 day E.P.*</p> <hr/> <p>Decline</p>

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♥	Cardiomyopathy: A disorder affecting the heart muscle, which usually results in inadequate heart pumping	
	Mild, stable, asymptomatic >12 months, ejection fraction >40%	Select
	History of heart transplant >60 months	Class 1 w/365 day E.P.*
	History of congestive heart failure or symptomatic	Decline
♥	Carotid Artery Disease: A circulatory condition characterized by narrowing or stenosis of the carotid artery in the neck	
	Asymptomatic, no progression for 24 months, mild-moderate stenosis <50%	Select — Class 1*
	Asymptomatic, no progression for 24 months, moderate-moderately severe stenosis 50–70%	Class 2 w/90 day E.P.*
	Symptomatic or >70% stenosis	Decline
	Endarterectomy >6 months, currently asymptomatic	Select
	Endarterectomy >6 months, currently symptomatic	Decline
	With diagnosis of Diabetes and >25% stenosis	Decline
With tobacco use	Decline	
	Carotid Bruit: A murmur heard in the carotid artery in the neck area	
	No underlying circulatory disease	Preferred
	Underlying circulatory disease	Refer to disease
	Cataract: A cloudy or opaque area in the lens of the eye	
	No visual impairment	Preferred
	Surgery anticipated/recommended	Preferred
	Cerebral Palsy: A group of disorders characterized by loss of movement or loss of other nerve functions	Decline
	Cerebral Vascular Disease: A vascular disease of the brain, including abnormalities of the vessels, blood flow, or quality of flow	
	Evidence of white matter changes, small vessel disease, ischemic changes, microvascular changes, lacunar infarcts	Decline

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	Cervicitis: Inflammation of the uterine cervix	Preferred
	Charcot-Marie-Tooth: A slowly progressive disorder that results in wasting of muscles	Decline
	Chemotherapy Treatments: Current	Decline
	Cholecystectomy: Surgical removal of the gallbladder	Preferred
	Cholecystitis: Inflammation of the gallbladder	Preferred
	Cholelithiasis: The presence of gallstones in the gallbladder	Preferred
	Chronic Fatigue Syndrome: A condition of prolonged and severe tiredness or fatigue that is not relieved by rest and is not directly caused by other conditions	
	New onset <24 months	Postpone 24 months
	Asymptomatic, treated w/anti-inflammatory medication >24 months	Select w/90 day E.P.*
	Asymptomatic w/Fibromyalgia or depression, treated w/ <3 medications	Select — Class 1 w/90 day E.P.*
	Symptomatic, treated w/narcotics, steroid treatment, or limited activities	Decline
<input type="checkbox"/>	Chronic Obstructive Pulmonary Disease: A respiratory disease process that decreases the ability of the lungs to perform ventilation	
	Recent flare <3 months	Postpone 3 months
	Exacerbation requiring hospitalization <6 months	Postpone 6 months
	Mild, treatment-free, seen radiographically	Select
	Mild, <4 medications, normal and stable baseline pulmonary function tests, >65% FEV ¹ , >75% FVC	Select
	Mild, incidental finding, no history of treatment or other respiratory disorders, smoker	Select — Class 1*
	Moderate, <4 medications, normal and stable baseline pulmonary function tests, >60% FEV ¹ , >70% FVC	Class 1 w/90 day E.P.*
	Moderate-severe, <4 medications, stable baseline pulmonary function tests, >50% FEV ¹ , >60% FVC	Class 2*
	Symptomatic, severe, daily steroid use, multiple hospitalizations, oxygen use, FEV ¹ <50%, FVC <60%	Decline
	Mild with history of treatment or other respiratory disorders, smoker	Decline

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	Cirrhosis: A chronic liver disease where the liver is scarred and no longer functions properly	Decline
	Cirrhosis (Primary Biliary Cirrhosis): An inflammation of the bile ducts resulting in narrowing and obstruction of the flow of bile, causing damage to the liver cells Normal stable laboratory results >12 months	Class 1*
	Colitis (excluding ulcerative): Inflammation of the large intestine	Preferred
	Confusion: Not being aware of or oriented to time, place, or person Current or etiology unknown	Decline
	Asymptomatic, now resolved >12 months w/normal neuropsychological workup	Preferred
	Normal neuropsychological workup w/abnormal MRI/CT	Decline
♥	Congestive Heart Failure: A condition where the heart loses its ability to pump blood efficiently Asymptomatic, single event >6 months, treatment-free w/ejection fraction >45%	Select w/90 day E.P.
	Diagnosed as chronic, symptomatic, severe, recurrent	Decline
	Conjunctivitis: Inflammation or infection of the membrane lining the eyelids	Preferred
	Cor Pulmonale: Enlargement or failure of the right ventricle due to pulmonary hypertension	Decline
	Corneal Impairment: An impairment affecting the cornea, the curved transparent covering at the front of the eye No visual loss	Preferred
	Transplant >3 months, no vision impairment	Preferred
♥	Coronary Artery Disease: Narrowing of the coronary arteries that supply blood to the heart Asymptomatic >3 months, mild, <75% stenosis	Select
	Symptomatic <3 months	Postpone 3 months
	With angioplasty/stent, asymptomatic, >3 months (under age 75), <75% stenosis	Select
	With angioplasty/stent, asymptomatic, >6 months (age 75 and over), <75% stenosis	Select
	With angioplasty/stent, unstable, symptomatic	Decline
	History of angina, well controlled on prescription medication(s), >3 months (under age 75)	Select w/90 day E.P.

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
<p>♥ Coronary Artery Disease (continued)</p> <p>History of angina, well controlled on prescription medication(s), >6 months (age 75 and over)</p> <p>History of bypass, asymptomatic, >3 months (under age 75), <75% stenosis</p> <p>History of bypass, asymptomatic, >6 months (age 75 and over), <75% stenosis</p> <p>Single heart attack, controlled with medication, >3 months (under age 75), <75% stenosis</p> <p>Single heart attack, controlled with medication, >6 months (age 75 and over), <75% stenosis</p> <p>Multiple heart attacks (3 or more)</p> <p>Stenosis >75% and/or ejection fraction <40%</p> <p>With diagnosis of Diabetes and with stenosis >25% or in more than 1 vessel</p>	<p>Select w/90 day E.P.</p> <p>Select</p> <p>Select</p> <p>Select w/90 day E.P.</p> <p>Select w/90 day E.P.</p> <p>Decline</p> <p>Decline</p> <p>Decline</p>
<p>Crest: A diffuse connective tissue disease characterized by changes in the skin, blood vessels, skeletal muscles, and internal organs</p>	<p>Decline</p>
<p>Crohn's Disease: A chronic inflammatory disease that can affect any part of the gastrointestinal tract</p> <p>New onset, recent exacerbation/flare <6 months</p> <p>Asymptomatic, treatment-free >6 months</p> <p>Asymptomatic, medically managed, no flares within 2 years</p> <p>Medically managed with occasional flares >6 months</p> <p>Chronic steroid treatment</p> <p>Colostomy, fully recovered, independent management >6 months</p> <p>Chronic, ongoing treatment with frequent flares, severe, end stage, multiple surgeries, weight loss, incontinence</p>	<p>Postpone 6 months</p> <p>Select</p> <p>Select</p> <p>Class 1 w/90 day E.P.*</p> <p>Decline</p> <p>Class 1 w/90 day E.P.*</p> <p>Decline</p>
<p>Crutches: Current use</p>	<p>Decline</p>
<p>Cushing's Syndrome: An endocrine disorder caused by prolonged exposure of the body's tissues to the hormone cortisol, or by excessive use of cortisol or other steroid hormones</p> <p>Asymptomatic, no complications, on <10 mg steroids >24 months</p> <p>Symptomatic, complications, untreated, or >10 mg steroids daily</p>	<p>Class 1*</p> <p>Decline</p>
<p>Cystic Fibrosis: An inherited disease that affects the respiratory and digestive systems</p>	<p>Decline</p>

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	Cystitis: An infection or inflammation of the urinary bladder or urethra	Preferred
	Cyst (Benign): A closed sac or pouch of tissue which can be filled with air, fluid, pus, or other material	Preferred
	Cystocele: A bladder hernia that protrudes into the vagina	Preferred
	D&C (Dilation and Curettage): A surgical procedure that expands the cervical canal of the uterus so that the surface lining of the uterine wall can be scraped	Preferred
♥	Deep Venous Thrombosis: A condition where there is a blood clot in a deep vein	
	Single event >6 months	Select
	Recurrent events >12 months	Select — Class 1*
	>3 episodes, functional limitations or Greenfield filter placement	Decline
○	Degenerative Disc Disease: The gradual deterioration of the disc between the vertebrae	
	Diagnosed on x-ray (incidental finding), asymptomatic, no prior treatment	Preferred
	Mild, symptomatic, on non-prescription medications	Select
	Mild, symptomatic, on prescription medications	Select
	Moderate, asymptomatic, on <3 medications	Select
	Moderate, symptomatic, on <3 medications	Select — Class 1*
	Moderate, asymptomatic, status post-Physical Therapy <6 months	Postpone 6 months
	Moderate, asymptomatic, status post-Physical Therapy >6 months	Select — Class 1*
	Moderate, symptomatic, status post-Physical Therapy <6 months	Postpone 6 months
	Moderate, symptomatic, status post-Physical Therapy >6 months	Class 1 — Decline*
	Moderate, symptomatic, status post-injections <6 months	Postpone 6 months
	Moderate, symptomatic, status post-injections >6 months	Class 1 — Decline*
	Moderate, asymptomatic, status post-injections <6 months	Postpone 6 months
	Moderate, asymptomatic, status post-injections >6 months	Select w/90 day E.P.
	Age 74 or younger, surgically treated >6 months, normal range of motion, no limitations or assistive devices	Select — Class 1*

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
○	Degenerative Disc Disease (continued) Age 75 or older, surgically treated >12 months, normal range of motion, no limitations or assistive devices Daily narcotics, chronic pain, neurological deficit, radiculopathy, or surgery recommended or multiple spinal surgeries	Select — Class 1*
○	Degenerative Joint Disease	Refer to Osteoarthritis
	Dementia: Cognitive deficit, including memory impairment	Decline
	Depression: A mental disorder marked by altered mood New onset, no medical treatment >3 months Situational, asymptomatic, treatment-free >6 months Undiagnosed Well controlled on 1–2 medications >3 months Well controlled on 3 medications >6 months	Preferred Preferred Postpone until diagnosis established Select — Class 1* Class 1 — Class 2*
	Dermatitis: A skin inflammation	Preferred
	Detached Retina: A condition where the retina becomes completely or partially detached	Preferred
♥	Diabetes: A lifelong disease of high blood sugar caused by too little insulin, resistance to insulin, or both New onset, uncontrolled, or change in treatment <6 months Diet control, Glycohemoglobin A1C <7.6 Diet control, Glycohemoglobin A1C >7.6, <8.0 Diet control, Glycohemoglobin A1C >8.0 Well controlled on 1–2 medications, Glycohemoglobin A1C <7.6 Treated w/1–2 oral medications, Glycohemoglobin A1C >7.6, <8.0 Well controlled on 3 or more oral medications, Glycohemoglobin A1C <8.0 Well controlled on 1–25 units of insulin, Glycohemoglobin A1C <7.6 Treated w/1–25 units of insulin, Glycohemoglobin A1C >7.6, <8.0	Postpone 6 months Select Class 1* Decline Select Class 1* Class 1* Select Class 1

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
♥	Diabetes (continued) Treated w/1–25 units of insulin, Glycohemoglobin A1C >8.0 Well controlled w/26–49 units of insulin, w/ no diabetic complications, Glycohemoglobin A1C <7.6 Treated w/26–49 units of insulin, w/ no diabetic complications, Glycohemoglobin A1C >7.6, <8.0 Treated w/26–49 units of insulin, w/ no diabetic complications, Glycohemoglobin A1C >8.0 History of neuropathy, untreated retinopathy, blindness, amputation, neuropathic ulcers, TIA, carotid artery disease >25%, peripheral vascular disease >25%, single-vessel coronary artery disease >25%, or multi-vessel coronary artery disease Juvenile/Type I Diagnosed as Brittle Tobacco use within past 12 months	Decline Class 1 Class 2 Decline Decline Decline Decline
	Diverticulitis: An inflammation of an abnormal pouch in the intestinal wall, usually found in the colon Asymptomatic, medically managed, no exacerbations/flare-ups, >6 months Hospitalization, fully recovered, asymptomatic, >6 months	Preferred Preferred
	Diverticulosis: An asymptomatic, abnormal pouch in the intestinal wall	Preferred
	Down's Syndrome: A chromosome abnormality resulting in moderate to severe mental retardation and other abnormalities	Decline
	Drug Dependency: Use of any habit-forming drug for purposes other than those for which it is normally intended, or in a manner or quantities other than directed Drug-free >24 months, no limits to activities Ongoing drug use or cognitive impairment	Select Decline
	Dupuytren's Contracture: A painless thickening and contracture of tissue beneath the skin on the palm of the hand	Preferred
	Dwarfism: Abnormally short stature with abnormal body proportions, caused by a deficiency of growth hormone	Decline

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	Dyspepsia: Imperfect or painful digestion (indigestion)	Preferred
	Dysphagia: Inability or difficulty swallowing	Preferred
♥	Edema: Excessive build-up of fluid in the tissues, or an increase in tissue mass	Refer to underlying cause
	Ehlers-Danlos Syndrome: An inherited disorder of the elastic connective tissue	Decline
□	Emphysema: A lung disease which involves damage to the air sacs in the lungs	Refer to Chronic Obstructive Pulmonary Disease
♥	Endocarditis: Inflammation of the lining membrane of the heart Acute, single episode, <6 months	Postpone 6 months
	Single episode, treatment-free, complete recovery, >6 months	Select
	Recurrent episodes	Decline
	Epstein-Barr: The virus responsible for infectious mononucleosis and is associated with the development of non-Hodgkin's lymphoma in patients with immune compromise >24 months, complete recovery, no residuals	Select
	Esophagitis: Inflammation of the esophagus	Preferred
	Esophageal Stricture: A narrowing of the esophagus, causing swallowing difficulties Asymptomatic, dilation w/good results (<2 dilations within a 12 month period), stable weight, no dysphagia	Select
	Asymptomatic, 2–3 dilations within a 12 month period, stable weight, no dysphagia	Class 1 — Class 2*
	Multiple or frequent need for dilation (>4 dilations within a 12 month period)	Decline
	Esophageal Varicies: A dilation of an esophageal vein	Decline
	Fatty Liver: An accumulation of fat within the liver cells Asymptomatic, treatment-free, normal liver function tests, occasional or no alcohol use	Select
	Abnormal liver function tests or daily alcohol use	Decline
	Feeding Tube: Current	Decline
	Felty's Syndrome: A disorder characterized by rheumatoid arthritis, an enlarged spleen, a decreased white blood cell count, and recurrent infection	Decline

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	Fibrocystic Breast Disease: Common, benign breast changes	Preferred
○	Fibromyalgia: Chronic pain in muscles and soft tissues surrounding joints	
	New onset, diagnosis, or recent flare <6 months	Postpone 6 months
	Asymptomatic, treatment-free	Select
	Asymptomatic, mild, treated w/single medication	Select
	Asymptomatic, mild, treated w/2 medications	Class 1*
	Symptomatic, on chronic steroids or multiple meds, dependent in ADLs, chronic fatigue or pulmonary compromise	Decline
	Fissure/Fistula (Anal): A linear ulcer on the margin of the anus	Preferred
	Foot Drop: Foot weakness or paralysis	Refer to underlying cause
	Forgetfulness: Inability to remember something previously known or learned	
	Current or etiology unknown	Decline
	Asymptomatic, now resolved >12 months w/normal neuropsychological workup	Select
	History of forgetfulness consistent w/age	Decline
	Normal neuropsychological workup w/abnormal MRI/CT indicating atrophy	Decline
○	Fractures: Sudden breaking of a bone	
	Fully recovered, treatment-free, normal range of motion, no history of osteoporosis, non-weight-bearing location (wrist, finger, arm, toe)	Preferred
	Fully recovered, treatment-free, normal range of motion, no history of osteoporosis, weight-bearing location (hip, femur, pelvis, tib-fib, humerus) >12 months	Preferred
	PT, OT, or surgery >12 months, weight-bearing (hip, femur, pelvis, tib-fib, humerus)	Preferred
	Multiple fractures (3 or more)	Decline
	Gallstones: Calculus formed in the gallbladder or bile ducts	Preferred
	Gastric Bypass/Stapling/Banding: Surgical alteration of the stomach	
	Asymptomatic, complete recovery, no limitations <24 months	Postpone 24 months
	Asymptomatic, complete recovery, no limitations >24 months	Select
	Due to disease	Refer to disease

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
	<p>Gastritis: An inflammation of the lining of the stomach</p> <p>Controlled with medical management</p>	Preferred
	<p>Glaucoma: A condition of increased pressure inside the eye</p> <p>No visual impairment</p>	Preferred
	<p>Progressive visual loss, or hospitalization for complications of blindness</p>	Decline
	<p>Glomerulonephritis: A group of kidney diseases caused by inflammation of the internal kidney structures</p> <p>Acute, fully recovered, normal kidney function tests, no kidney damage</p>	Select
	<p>Chronic, abnormal kidney function tests</p>	Decline
	<p>Glucose Intolerance: A state of blood sugar control that is abnormal but not diagnosed as Diabetes</p>	Refer to Diabetes
	<p>Goiter: Enlargement of the thyroid gland that is not associated with inflammation or cancer</p>	Preferred
	<p>Gout: A disease marked by uric acid deposits in the joints, causing painful arthritis especially in the joints of the feet and legs</p> <p>Well controlled on diet or single medication</p>	Preferred
	<p>Well controlled on 2 medications</p>	Select
	<p>Graves' Disease: Overactivity of the thyroid gland</p>	Preferred
	<p>Guillain-Barre Syndrome: A disorder involving progressive muscle weakness or paralysis</p> <p>No residuals or recurrence >24 months</p>	Select
	<p>Chronic, recurrent, or relapsing symptoms, residual weakness, muscle atrophy, functional impairment</p>	Decline
	<p>Hayfever: Inflammation of the nasal mucosa due to an allergic reaction</p>	Preferred
	<p>Headache: Pain in the head</p>	Preferred
	<p>Hearing Impairment: Decreased ability to hear</p>	Preferred
♥	<p>Heart Attack: A condition when an area of heart muscle dies or is damaged because of an inadequate supply of oxygen to that area</p>	Refer to Coronary Artery Disease

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	<p>Heart Block: A condition in which the signal from the heart's upper to lower chambers is impaired or doesn't transmit</p> <p>First-degree AV Block, asymptomatic, treatment-free, no underlying cardiac conditions</p> <p>Second-degree AV Block, asymptomatic, no underlying cardiac conditions</p> <p>Second-degree AV Block, asymptomatic, medically treated, no underlying cardiac conditions</p> <p>Third-degree AV Block, medically treated or with successful pacemaker implant >3 months, no underlying cardiac conditions</p> <p>Symptomatic with episodes of shortness of breath, dizziness, syncope, or ejection fraction <40%</p>	<p>Preferred</p> <p>Select</p> <p>Select</p> <p>Select</p> <p>Decline</p>
	<p>Heartburn: A burning sensation in the throat just below the breastbone, caused by reflux of acid contents of the stomach into the esophagus</p>	<p>Preferred</p>
♥	<p>Heart Murmur: An abnormal sound in the heartbeat</p> <p>Functional, no treatment</p>	<p>Preferred</p>
♥	<p>Heart Valve Replacement: Surgery to replace a diseased heart valve</p> <p>Valve replaced, repaired, reconstructed, asymptomatic >6 months</p> <p>Unstable or symptomatic</p> <p>Valve replacement with restenosis</p>	<p>Select — Class 1*</p> <p>Decline</p> <p>Decline</p>
	<p>Hematuria: Blood in the urine</p>	<p>Refer to underlying cause</p>
	<p>Hemochromatosis: A genetic disease that results in excess iron deposits throughout the body</p> <p>New onset or abnormal blood studies <6 months</p> <p>Mild, stable normal blood studies, on maintenance phlebotomy, w/routine follow-ups</p> <p>Complications, organ or joint involvement, or abnormal blood studies</p>	<p>Postpone 6 months</p> <p>Select</p> <p>Decline</p>
	<p>Hemophilia: A hereditary bleeding disorder in which it takes a long time for the blood to clot and abnormal bleeding occurs</p> <p>Asymptomatic, stable blood studies >18 months</p> <p>Symptomatic, continued steroid or antineoplastic treatment, weight loss, or abnormal blood studies</p>	<p>Select</p> <p>Decline</p>
	<p>Hemorrhoids: Enlarged veins in the lower portion of the rectum or anus</p>	<p>Preferred</p>

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	<p>Hepatitis: An inflammation of the liver</p> <p>Type A, normal blood studies, in remission >3 months</p> <p>Type B, normal blood studies, in remission >3 months</p> <p>Type C, normal blood studies, in remission >12 months</p> <p>Chronic, active or autoimmune</p>	<p>Select</p> <p>Select</p> <p>Class 1*</p> <p>Decline</p>
	<p>Hernia: The protrusion of an organ or a part of an organ through the wall of the cavity that normally contains it</p>	<p>Preferred</p>
	<p>Herpes Zoster: An acute, localized infection, causing painful blistering eruptions</p>	<p>Preferred</p>
	<p>Hodgkin's Disease: A malignancy found in the lymph nodes, spleen, liver, and bone marrow</p> <p>Complete remission stage III and IV, stable blood studies, asymptomatic, treatment-free >36 months</p> <p>Complete remission, stage I and II, stable blood studies, asymptomatic, treatment-free >12 months</p>	<p>Class 1 w/90 day E.P.* or Select w/180 day E.P.</p> <p>Select w/180 day E.P.</p>
	<p>Home Health Care Services: Current</p>	<p>Decline</p>
	<p>Hunter's Syndrome: A hereditary disease that causes a characteristic facial appearance and abnormal function of multiple organs</p>	<p>Decline</p>
	<p>Huntington's Disease: An inherited condition characterized by abnormal body movements, dementia, and psychiatric problems</p>	<p>Decline</p>
	<p>Hydrocephalus: A disorder associated with excessive fluid in the brain</p>	<p>Decline</p>
♥	<p>Hypercholesterolemia: An excessive amount of cholesterol in the blood</p> <p>Well controlled on 1 prescription medication</p> <p>Well controlled on 2 prescription medications</p>	<p>Preferred</p> <p>Select</p>
♥	<p>Hypertension/White Coat Syndrome: Higher than normal blood pressure</p> <p>Prehypertension, untreated, readings between 120/80 and 139/89</p> <p>Well controlled on one single-action medication, average readings <140/90</p> <p>Well controlled on a dual-action medication, average readings >130/80</p>	<p>Select</p> <p>Preferred</p> <p>Preferred</p>

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♥	Hypertension/White Coat Syndrome (continued)	
	Well controlled on 2–3 medications including dual-action medications, average yearly readings <160/90	Select — Class 1*
	New onset or uncontrolled <3 months	Postpone 3 months
	Poor medical compliance or frequent medication changes	Postpone 3 months
	Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone	Preferred
	Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone	Preferred
	Hysterectomy (non-cancerous): Surgical removal of the uterus	Preferred
	Idiopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet counts resulting from platelet destruction by the immune system	
	Stable platelet counts >24 months, asymptomatic, treatment-free	Class 1*
	History of splenectomy >24 months with normal platelet counts	Select — Class 1*
	Chronic, daily corticosteroids, progressive weight loss, or abnormal blood studies	Decline
	Incontinence: The inability to retain urine or feces	
	Stress, urinary, well-controlled with exercise or medication	Preferred
	Requiring protective undergarments	Individual Consideration
	Urge and fecal	Decline
	Intravenous (IV) Treatments: Current	Decline
	Irritable Bowel Disease: A condition of abnormally increased, spontaneous movement of the small and large intestine	
	Quiescent, stable, medically managed	Preferred
	Severe, end-stage, multiple surgeries, or weight loss	Decline
○	Joint Replacement: The replacement of a joint	
	Treatment-free, no assistive devices >3 months	Select
	Ongoing PT, limited activity, use of assistance devices >2 medications	Decline
	Kidney Failure: Failure of the kidney to perform its essential functions	Decline

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	Kidney Stones: A condition in which one or more stones are present in the kidney or the urethra	Preferred
	Kidney Transplant: A surgical procedure where a healthy kidney is implanted into a person with kidney disease or failure	
	Asymptomatic, stable renal function, normal blood studies >36 months	Class 1 — Class 2*
	Symptomatic, abnormal renal function or blood studies, renal failure	Decline
	Labyrinthitis: An ear disorder involving inflammation of the canals of the inner ear, resulting in dizziness	
	Stable, well controlled with medications	Preferred
	Evidence of neurological symptoms, hospitalization	Postpone 6 months
	Lactose Intolerance: An intolerance to milk and some dairy products	Preferred
○	Laminectomy: The surgical process of removing the lamina (the bony roof of the spinal cord)	
	Age 75 or older, treatment-free, no assistive devices, normal range of motion >12 months	Select
	Age 74 or younger, treatment-free, no assistive devices, normal range of motion >6 months	Select
	Hospitalization for symptoms post-surgery, mild parasthesis, or radiculopathy	Decline
	Daily narcotic use, currently undergoing PT or OT, muscle weakness, or wasting	Decline
	Laryngitis: Inflammation of the larynx	Preferred
	Leukemia: A malignancy of the blood-forming cells in the bone marrow	
	Hairy cell	Decline
	Acute lymphocytic or acute/chronic myelogenous, new diagnosis or abnormal blood studies	Decline
	Acute lymphocytic or acute/chronic myelogenous, complete remission, no clinical evidence of disease, stable blood studies, treatment-free >60 months	Class 1*
	CLL stages 0, I, II, new onset or abnormal blood studies <24 months	Postpone 24 months
	CLL stages 0, I, II, stable blood studies >24 months treatment-free	Class 1*
	CLL stages III or IV	Decline
	Leukopenia: A blood disorder characterized by an abnormal decrease of white blood cells	Preferred

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	Lou Gehrig's Disease: A disorder causing progressive loss of control of muscles due to destruction of nerve cells in the brain and spinal cord	Decline
○	Lumbar Strain/Sprain: A sudden stressful injury to the lower back, causing stretching or tearing of the muscle, tendons, or ligaments of the lower back	
	Stable with non-steroidal anti-inflammatories, no history of PT or OT	Preferred
	Symptoms of paresthesia, weakness, or wasting, or currently undergoing PT or OT	Postpone 6 months
	Lupus (Systemic Lupus Erythematosus): A chronic, inflammatory auto-immune disorder that may affect organ systems including the skin, joints, and internal organs	Decline
	Lupus (Discoid): A chronic disease of the skin characterized by remissions and exacerbation of a scaling, red, macular rash	
	New onset or diagnosis <12 months	Postpone 12 months
	>12 months, no oral medication, firm diagnosis	Select
	Lyme Disease: A multi-system disorder caused by bacteria transmitted by a tick	
	Asymptomatic, independent, treatment-free, no neurological or cardiac involvement	Preferred — Select
	Symptomatic, neurological, or cardiac impairment	Decline
	Lymphedema: Swelling that occurs due to a lymphatic obstruction (a blockage of the lymph vessels, which drain fluid from tissues throughout the body)	
	Primary lymphedema, no ulcerations, no limitations	Select
	Current or recurrent ulcerations, multiple prescriptions (>2), limited mobility	Decline
	Lymphoma: A usually malignant lymphoid tumor or growth	
	New onset or diagnosis (stages I and II) <12 months	Postpone 12 months
	Complete remission, treatment-free, stable blood studies and renal functions, stage I and II >12 months	Select w/180 day E.P. or Class 1 w/90 day E.P.*
	New onset or diagnosis (stages III and IV) <48 months	Postpone 48 months
	Complete remission, treatment-free, stable blood studies and renal functions, stage III and IV >48 months	Select w/180 day E.P. or Class 1 w/90 day E.P.*

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<p>Macular Degeneration: A disorder that affects the macular (the central part of the retina) causing decreased visual acuity and possible loss of central vision</p> <p>New onset <12 months</p> <p>One eye, non-progressive >12 months</p> <p>Bilateral, no deterioration in vision, completely independent >12 months</p> <p>Progressive visual loss, or existing neurological symptoms</p> <p>Legally blind, independent >24 months</p>	<p>Postpone 12 months</p> <p>Select</p> <p>Select</p> <p>Decline</p> <p>Class 1 — Class 2*</p>
<p>Macular Hole: An abnormal opening which forms in the center of the macular over weeks to months</p>	<p>Refer to Macular Degeneration</p>
<p>Major Depression: A recurrent emotional state characterized by feelings of persistent sadness, worthlessness, rejection, loss of hope, and loss of interest in usual activities</p>	<p>Refer to Bipolar</p>
<p>Marfan Syndrome: A hereditary disorder of the connective tissues that affects the skeletal system, cardiovascular system, eyes, and skin</p>	<p>Decline</p>
<p>Marie Strumpell Disease: A disease of the connective tissue that results in the inflammation of the joints in the spine known as Ankylosing Spondylitis</p>	<p>Decline</p>
<p>Melanoma: A malignant, darkly pigmented mole or tumor of the skin</p> <p>Disease- and treatment-free, Clark's Level 1</p> <p>Disease- and treatment-free, Clark's Level 2–3</p> <p>Disease- and treatment-free >24 months, Clark's Level 4</p> <p>Active melanoma, positive lymph nodes, recurrent, metastatic, or abnormal blood studies</p> <p>Clark's Level 5</p> <p>History of multiple episodes, complete recovery</p>	<p>Select</p> <p><12 months: Select w/180 day E.P. >12 months: Select</p> <p>>24 months: Select w/365 day E.P. >36 months: Select w/180 day E.P. >48 months: Select</p> <p>Decline</p> <p>Decline</p> <p>Individual Consideration</p>

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<p>Memory Loss: The inability to remember or recall bits of information or behavioral skills</p> <p>Current or etiology unknown</p> <p>Asymptomatic, now resolved >12 months w/normal neuropsychological workup</p> <p>History of benign memory loss, now resolved w/normal neuropsychological workup >12 months</p> <p>History of memory loss consistent with age</p> <p>Normal neuropsychological workup w/abnormal MRI/CT indicating atrophy</p>	Decline	
	Select	
	Select	
	Decline	
	Decline	
<p>Meniere's Disease: A disorder of the inner ear characterized by abnormal sensation of movement, loss of hearing in one or both ears, or noises and ringing</p> <p>Mild, stable, treatment-free or single medication</p> <p>Mild, stable on 2 medications</p> <p>Diagnosis and treatment underway, hospitalization, or neurological symptoms</p>	Preferred	
	Select	
	Postpone 6 months	
<p>Meningitis: An infection which causes inflammation of the membranes covering the brain and spinal cord</p> <p>Completely recovered, treatment free >12 months</p> <p>Active, chronic, or current treatment</p>	Select	
	Decline	
<p>Meningioma: A slow-growing tumor that originates in the tissue of the brain</p> <p>Single tumor diagnosed <12 months</p> <p>Single tumor >12 months, asymptomatic, non-progressive, no neuro deficit</p> <p>Single tumor >12 months, s/p resection, asymptomatic, no re-growth, no neuro deficit</p>	Postpone 12 months	
	Select	
	Select	
<p>Menopausal Symptoms: Symptoms that occur during menopause, such as hot flashes, skin flushing, and mood changes</p> <p>Treated with a single medication with no prior diagnosis of depression</p> <p>Diagnosis of depression prior to menopausal symptoms, treated with an antidepressant</p>	Preferred	
	Select	
<p>Mental Retardation: Below average general intellectual function with associated deficits in adaptive behavior that occurs before age 18</p>	Decline	

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

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<p>Narcolepsy: A sleep disorder associated with uncontrollable sleepiness and frequent daytime sleeping</p> <p>Asymptomatic and controlled >12 months</p>	Select
<p>Recent onset, flare of symptoms, hospitalization, or injury, or disability secondary to narcoleptic episode</p>	Decline
<p>Neurogenic Bladder: A urinary bladder problem in which there is abnormal emptying of the bladder; it may empty spontaneously or may not empty at all</p>	
<p>Completely independent, no complications >12 months</p>	Select
<p>Independent use of catheter >12 months, <2 urinary tract infections within a 12 month period</p>	Class 1*
<p>>3 UTIs within a 12 month period, chronic antibiotic or narcotic pain reliever, incontinence requiring protective undergarments</p>	Decline
<p>Neuropathy: A disease of the nerves</p>	
<p>Etiology unknown or workup underway <6 months</p>	Postpone 6 months
<p>Mild, nonlimiting, nonprogressive</p>	Select
<p>Mild, nonlimiting, nonprogressive, on medication</p>	Select — Class 1*
<p>Progressive, uncontrolled, or use of adaptive devices</p>	Decline
<p>Related to disease</p>	Refer to disease
<p>Polyneuropathy</p>	Decline
<p>Nursing Home Services: Current</p>	Decline
<p>Obsessive Compulsive Disorder: An anxiety disorder characterized by the presence of obsessions or compulsions</p>	
<p>New onset or uncontrolled, <6 months</p>	Postpone 6 months
<p>Asymptomatic, <3 medications, >6 months</p>	Select — Class 1*
<p>Chronic, uncontrolled, limited activities</p>	Decline
<p>Occupational Therapy: Current</p>	Decline
<p>Optic Neuropathy: A pathological change in the optic nerves of the eye or the blood supply to them</p>	
<p>Stable >6 months, no systemic involvement, or no visual impairment</p>	Select — Class 1*

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	Optic Neuropathy (continued) Progressive, systemic involvement, visual impairment Due to disease	Decline Refer to disease
	Organic Brain Syndrome: Any of a large group of acute and chronic mental disorders associated with brain damage or impaired cerebral function	Decline
○	Osteoarthritis: A chronic musculoskeletal disease causing deterioration of the joint cartilage and the formation of new bone at the margins of the joints Asymptomatic, treatment-free Mild, symptomatic treated with 1 anti-inflammatory medication History of joint replacement, treatment-free, no assistance devices >3 months History of PT or OT >6 months Recurrent or ongoing PT or OT Multiple intra-articular injections, severe, or chronic narcotic treatment	Select Select Select w/90 day E.P. Select w/90 day E.P. Decline Decline
○	Osteomyelitis: An acute or chronic bone infection Asymptomatic, complete recovery for 6 months Symptomatic or residuals	Select Decline
	Osteopenia: A thinning of the bones, typically the stage before true osteoporosis Preventative treatment, asymptomatic	Preferred
○	Osteoporosis: The progressive loss of bone density and thinning of bone tissue Mild, stable bone densities (-2.5 to -3.0) under treatment Moderate, weight-bearing location (pelvis, hip) or spine, stable bone density studies (-3.1 to -3.5), under treatment Moderate, stable bone density studies (-3.1 to -3.5), under treatment, w/1 related fracture >12 months Moderate to severe, weight-bearing location (pelvis, hip) or spine, stable bone density studies (-3.6 to -4.0), under treatment	Select Class 1* Class 1 w/90 day E.P.* Class 2 w/180 day E.P.*; 3 year maximum benefit period

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○	Osteoporosis (continued)	
	Severe, non-weight-bearing location (wrist, forearm) stable bone density studies (>-4.0), under treatment	Class 1*
	Severe, weight-bearing location (pelvis, hip) or spine, stable bone density studies (>-4.0), under treatment	Decline
	Multiple fractures	Decline
	Oxygen: Current use	Decline
○	Paget's Disease: A bone disease that involves bone destruction and re-growth that results in deformity	
	Of breast	Refer to Cancer (Internal)
	Of bone, seen radiographically, no symptoms and normal Alk Phos levels >12 months	Select
	Active, evidence of fractures with bone pain, elevated Alk Phos levels	Decline
	History of fracture, w/complete recovery, treatment-free >24 months	Select
○	Pancreatitis: An inflammation or infection of the pancreas	
	New onset <6 months	Postpone 6 months
	Asymptomatic, complete recovery >6 months	Select
	Chronic, active, or abnormal blood studies	Decline
	Panic Disorder: Repeated, unpredictable attacks of intense fear, accompanied by severe anxiety symptoms in the body that may last from minutes to hours	
	New onset, treatment-free	Preferred
	Well controlled on single medication	Select
	Well controlled on 2 or more medications	Refer to Depression
	Symptomatic, or uncontrolled, or resulting in limitations	Decline
	Paralysis/Paresis: Temporary suspension or permanent loss of function, especially loss of sensation or voluntary motion	
	Single partial limb, due to trauma, no limitations >12 months	Class 1 w/90 day E.P.*
	Two limbs, complete single limb	Decline
	Due to disease	Decline

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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION
	Paraplegia: Paralysis of the lower portion of the body and of both legs	Decline
	Parkinson's Disease: A chronic nervous disease characterized by a fine, slowly spreading tremor and difficulty with walking, movement, and coordination	Decline
	Paroxysmal Supraventricular Tachycardia: A rapid heart rhythm that occurs inside the atria and occurs sporadically	
	Asymptomatic, treatment-free, no underlying cardiac conditions	Preferred
	Asymptomatic, treated with single medication	Select
	Successful pacemaker implant >3 months, asymptomatic, no underlying cardiac conditions	Select
	Symptomatic, or ejection fraction <40%	Decline
♥	Pericarditis: Inflammation of the pericardium, the sac covering the heart	
	Acute, single episode <6 months	Postpone 6 months
	Single episode, treatment-free, complete recovery >6 months	Select
	Recurrent episodes	Decline
♥	Peripheral Vascular Disease: A circulatory disease of the peripheral blood vessels that is characterized by narrowing and hardening of the arteries that supply blood to the legs and feet	
	Asymptomatic, no claudication, mild, >3 months, favorable dopplers	Select
	Asymptomatic, no claudication, mild, under treatment with an anti-coagulant, favorable dopplers	Select
	History of femoral bypass, asymptomatic >6 months, favorable dopplers	Select
	History of femoral bypass, asymptomatic, under treatment with an anti-coagulant >6 months, favorable dopplers	Select — Class 1*
	History of femoral bypass, symptomatic w/occasional claudication, treated with an anti-coagulant	Decline
	With tobacco use	Decline
	With diagnosis of Diabetes and >25% stenosis	Decline
	Pharyngitis: Inflammation of the pharynx	
	Superficial	Preferred

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	<p>Physical Therapy: Rehabilitation concerned with the restoration of function and the prevention of disability following disease, injury, or loss of a body part</p> <p>Current treatment for bursitis, tendonitis, carpal tunnel syndrome, or a non-weight-bearing fracture</p>	Select
	<p>Pituitary Tumor: A growth that arises in the pituitary gland</p> <p>Benign, stable, <12 months</p>	Postpone 12 months
	<p>Benign, stable, treatment-free >12 months</p>	Preferred
	<p>Pneumonia: An inflammation of the lungs caused by an infection</p> <p>Complete recovery</p>	Preferred
	<p>Polycystic Kidney Disease: An inherited kidney disorder that enlarges the kidneys and interferes with their function because of multiple cysts on the kidneys</p> <p>Normal kidney function, no kidney damage</p>	Select
	<p>Abnormal kidney function or progressive</p>	Decline
	<p>Polycythemia Vera: A blood disorder characterized by abnormal increase in red blood cells resulting from increased blood cell production by the bone marrow</p> <p>New onset or abnormal blood studies <12 months</p>	Postpone 12 months
	<p>Normal blood studies, on maintenance phlebotomies >12 months</p>	Select
	<p>Normal blood studies >12 months, under treatment with ongoing fatigue or chronic anemia</p>	Decline
	<p>Neurological complaints, progression to Leukemia, or weight loss</p>	Decline
○	<p>Polymyalgia Rheumatica: A disorder of unknown cause, usually afflicting persons over the age of 50, involving pain and stiffness in the hip and shoulder area</p> <p>New onset, recent flare <12 months</p>	Postpone 12 months
	<p>Asymptomatic, in remission and treatment-free >12 months</p>	Select
	<p>Asymptomatic, on chronic low-dose steroids (<10 mg daily) >12 months</p>	Select — Class 1*
	<p>Active, symptomatic, daily narcotic use, muscle weakness or wasting</p>	Decline

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○	Polymyositis: A systemic connective tissue disease, characterized by inflammation and degeneration of the muscles	
	Asymptomatic, in remission, treatment-free >12 months	Select
	Active, chronic steroid use, currently undergoing PT or OT, or muscle weakness or wasting	Decline
	Polyps (Benign): A growth that projects, usually on a stalk; commonly found in vascular organs such as the nose, uterus, colon, and rectum	Preferred
	Post Polio Paralytic Syndrome: A variety of musculoskeletal symptoms and muscular atrophy that create new difficulties with activities of daily living 25 to 30 years after the original attack of acute paralytic poliomyelitis	Decline
	Post Traumatic Stress Syndrome: A psychiatric illness that can occur following a psychologically traumatic event that is generally outside the range of usual human experience	
	New diagnosis or uncontrolled <6 months	Postpone 6 months
	Asymptomatic, <3 medications, >6 months	Select — Class 1*
	Premature Atrial Contractions (PACs): An early or premature heartbeat originating from the atria	
	Asymptomatic, no underlying cardiac condition, treatment-free	Preferred
	Asymptomatic, treated with single medication	Select
	Premature Ventricular Contractions (PVCs): An early or premature heartbeat originating from the ventricle	
	Asymptomatic, no underlying cardiac condition, treatment-free	Preferred
	Asymptomatic, treated with single medication	Select
	Prolapsed Bladder: Falling or sliding of the bladder from its normal position	Preferred
	Prostatic Hypertrophy (Benign): A non-malignant enlargement of the prostate due to excessive growth of prostatic tissue	Preferred
	Prostatism: Any condition of the prostate that interferes with the flow of urine from the body	Preferred
	Psoriatic Arthritis: Arthritis associated with psoriasis	Refer to Rheumatoid Arthritis
	Psychosis: A general term referring to a loss of contact with reality	Decline

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☐	Pulmonary Embolism: A blockage of an artery in the lungs by a blood clot or an unknown substance	
	Single event, no complications, <12 months	Postpone 12 months
	Single event, no complications, >12 months	Select
	Recurrent, fully recovered, >12 months	Select — Class 1*
☐	Pulmonary Fibrosis: A respiratory condition of unknown cause, characterized by scarring, thickening, and inflammation of the deep lung tissues	
	Localized, incidental finding on chest x-ray, normal pulmonary function tests, no underlying chronic lung disease >6 months	Select
	Hospitalization or respiratory problems, normal pulmonary function tests, <6 months	Postpone 6 months
	Hospitalization or respiratory problems with normal pulmonary function tests, >6 months	Select — Class 1*
	Active pulmonary disease, abnormal pulmonary function tests, oxygen use or heart failure	Decline
	Pulmonary Hypertension: A chronic and deadly disease characterized by increased pulmonary pressure and right-sided heart failure	
	Incidental finding by echocardiogram, asymptomatic, treatment-free, pulmonary pressure <35%	Select — Class 1*
	Symptomatic, under treatment, or pulmonary pressure >35%	Decline
	Quadriplegia: Paralysis of all four extremities and usually the trunk, caused by injury to the spinal cord	Decline
	Quad Cane: Current	Decline
	Radiation Treatments: Current	Decline
	Raynaud's Phenomenon: Sporadic attacks of blood vessel spasms resulting in interruption of blood flow to the fingers, toes, ears, and nose, caused by exposure to the cold or strong emotions	
	Asymptomatic, treatment-free	Preferred
	Stable, treated with 1–2 medications, no systemic involvement	Select — Class 1*
	Treated with 3 or more medications	Decline
	Rectocele: Protrusion or herniation of the posterior vaginal wall with the anterior wall of the rectum through the vagina	Preferred
	Respirator: Current use	Decline

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	<p>Respiratory Infection: An infection occurring in the organs involved in breathing</p> <p>Acute event, no underlying pulmonary disease</p>	Preferred
	<p>Restless Leg Syndrome: A sleep disorder characterized by leg discomfort during sleep, which is only relieved by frequent movements of the legs</p> <p>New onset, well controlled on single medication</p>	Select
	Well controlled on 2 medications	Class 1*
	3 or more medications	Decline
	<p>Retinitis Pigmentosa: A progressive degeneration of the retina in the eye that affects night vision and peripheral vision</p> <p>New onset <12 months</p>	Postpone 12 months
	One eye, non-progressive >12 months	Select
	Bilateral, no deterioration in vision, completely independent >12 months	Class 1*
	Progressive visual loss, or existing neurological symptoms	Decline
	Legally blind, independent, >24 months	Class 1 — Class 2*
○	<p>Rheumatoid Arthritis: A chronic, inflammatory, systemic disease that primarily affects the joints and surrounding tissues but also affects other organ systems within the body</p> <p>Asymptomatic, normal range of motion, treatment-free, no assistance devices, no joint replacement</p>	Select
	Asymptomatic, on non-steroidal maintenance medications	Select — Class 1* w/90 day E.P.
	Asymptomatic, on chronic steroidal therapy, <6 mg daily, no limitations	Class 1*
	Asymptomatic, 2–3 flares per year on non-steroidal maintenance medications and steroid taper only	Class 1 — Class 2* w/90 day E.P.
	Asymptomatic, on non-steroidal maintenance medications with chronic steroids	Decline
	History of joint replacement, treatment-free, no assistance devices >6 months	Select w/90 day E.P.
	History of joint replacement, on non-steroidal maintenance medications, no assistance devices >6 months	Select — Class 1* w/90 day E.P.

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○	Rheumatoid Arthritis (continued) Severe joint deformity, chronic/daily steroid treatment, multiple joint replacements (>2), or current PT or OT	Decline
	Juvenile diagnosis	Decline
	Rhinitis: Inflammation of the nasal mucosa	Preferred
	Sarcoidosis: A disease of unknown cause in which inflammation consisting of granulomas occurs in lymph nodes, lungs, liver, eyes, skin, and other tissues New onset <12 months	Postpone 12 months
	Asymptomatic, normal pulmonary function >12 months	Select — Class 1*
	Multiple sites	Decline
	Schizophrenia: A group of psychotic disorders characterized by disturbances in thought, perception, affect, behavior, and communication lasting longer than 6 months	Decline
	Schwannoma: A benign tumor situated in the hearing canal Surgically removed, no residuals other than hearing loss, no seizures >3 months	Preferred
	Untreated, current seizure activity, balance disturbance or falls, inoperable tumors	Decline
	Sciatica: A condition involving impaired movement and/or sensation in the leg, caused by damage to the sciatic nerve Asymptomatic, normal range of motion, treatment-free >12 months	Preferred
	Scleroderma: A diffuse connective tissue disease characterized by changes in the skin, blood vessels, skeletal muscles, and internal organs	Decline
	Scleroderma Morphea: A localized form of scleroderma that affects the skin with no internal organ involvement Localized to the skin w/biopsy confirmation, no internal organ involvement	Preferred
	Scoliosis: A lateral (away from the middle) or sideways curvature of the spine Mild, asymptomatic and treatment-free	Preferred
	Mild, symptomatic, on prescription medication	Select
	Moderate, on <3 medications	Select — Class 1*

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<p>Scoliosis (continued)</p> <p>Moderate, asymptomatic, status post-Physical Therapy <6 months</p> <p>Moderate, asymptomatic, status post-Physical Therapy >6 months</p> <p>Moderate, symptomatic, status post-Physical Therapy <6 months</p> <p>Moderate, symptomatic, status post-Physical Therapy >6 months</p> <p>Moderate, asymptomatic, status post-injections <6 months</p> <p>Moderate, asymptomatic, status post-injections >6 months</p> <p>Moderate, symptomatic, status post-injections <6 months</p> <p>Moderate, symptomatic, status post-injections >6 months</p> <p>Mild to moderate with osteoporosis of the spine, stable bone density studies (-3.1 to -3.5)</p> <p>Mild to moderate with osteoporosis of the spine, stable bone density studies (>3.5)</p> <p>With any pulmonary compromise</p>	<p>Postpone 6 months</p> <p>Select w/90 day E.P.</p> <p>Postpone 6 months</p> <p>Class 1 — Decline*</p> <p>Postpone 6 months</p> <p>Select w/ 90 day E.P.</p> <p>Postpone 6 months</p> <p>Class 1 — Decline*</p> <p>Class 1 — Decline*</p> <p>Decline</p> <p>Decline</p>
<p>Scooter: Current use</p>	<p>Decline</p>
<p>Seizure Disorder: A sudden violent, uncontrollable contraction of a group of muscles</p> <p>New onset or episode <12 months</p> <p>Well controlled, seizure-free, normal EEG/MRI, >12 months</p> <p>Ongoing or uncontrolled seizure activity</p>	<p>Postpone 12 months</p> <p>Select</p> <p>Decline</p>
<p>Shy-Drager Syndrome: A degenerative disorder characterized by progressive damage to the autonomic nervous system, muscle tremor and rigidity, and other widespread neurologic losses</p>	<p>Decline</p>
<p>Sick Sinus Syndrome: A form of bradycardia in which the sinoatrial node (the heart's natural pacemaker) is not functioning as it should</p> <p>Successful pacemaker implant >3 months, asymptomatic, no underlying cardiac conditions</p> <p>Syncopal or near-fainting episodes, shortness of breath, dizziness, weakness</p>	<p>Select</p> <p>Decline</p>
<p>Sickle Cell Anemia: An inherited chronic blood disease in which the red blood cells function abnormally and break down, causing recurrent painful episodes</p>	<p>Decline</p>

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	<p>Sinus Bradycardia: Abnormally slow sinus rhythm</p> <p>Asymptomatic, treatment-free, no underlying cardiac condition</p> <p>Successful pacemaker implant, asymptomatic, no underlying cardiac condition</p> <p>Symptomatic with episodes of shortness of breath, dizziness, syncope, or ejection fraction <40%</p>	<p>Preferred</p> <p>Select</p> <p>Decline</p>
	<p>Sinus Tachycardia</p> <p>Asymptomatic, treatment-free, no underlying cardiac condition</p> <p>Successful pacemaker implant, asymptomatic, no underlying cardiac condition</p> <p>Symptomatic, shortness of breath, dizziness, syncope, ejection fraction <40%</p>	<p>Preferred</p> <p>Select</p> <p>Decline</p>
	<p>Sinusitis: Inflammation of the sinus</p>	<p>Preferred</p>
	<p>Sjogren's Syndrome: A systemic, inflammatory disorder characterized by dry mouth, decreased tearing, and other mucous membranes often associated with auto-immune rheumatic disorders</p> <p>Asymptomatic, treatment-free</p> <p>Stable, treated with 1–2 medications, no systemic involvement</p>	<p>Preferred</p> <p>Select — Class 1*</p>
<input type="checkbox"/>	<p>Sleep Apnea: Repeated, prolonged episodes of cessation of breathing during sleep</p> <p>Mild, treatment compliance, stable pulmonary function tests</p> <p>Respiratory compromise or failure, non-compliance, oxygen use</p>	<p>Select</p> <p>Decline</p>
	<p>Social Security Disability Benefits: Currently receiving</p>	<p>Decline</p>
	<p>Spastic Colon: A condition of abnormally increased spontaneous movement of the small and large intestine, generally exacerbated by emotional stress</p>	<p>Preferred</p>
	<p>Speech Therapy: Current</p>	<p>Decline</p>
	<p>Spina Bifida: A congenital disorder where the backbone and spinal cord do not close before birth</p>	<p>Decline</p>
	<p>Spina Bifida (Occulta): Asymptomatic and treatment-free since diagnosis</p>	<p>Select</p>
	<p>Spinal Cord Injury: An injury to the spinal cord</p>	<p>Decline</p>
<input type="checkbox"/>	<p>Spinal Stenosis: A narrowing of the lumbar or cervical spine canal, which causes compression on nerve roots</p> <p>Asymptomatic, mild, normal range of motion, treatment-free >12 months</p>	<p>Select</p>

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□	Spinal Stenosis (continued)	
	Symptomatic, mild-moderate, w/anti-inflammatory medication	Select
	Symptomatic, mild-moderate, status post-steroid injections or PT, >6 months	Select — Class 1*
	Symptomatic, severe on chronic treatment	Decline
	History of laminectomy, disketomy, or spinal fusion, post-op excellent response, <75 years old, >6 months	Select
	History of laminectomy, disketomy, or spinal fusion, post-op excellent response, >74 years old, >12 months	Select
	History of laminectomy, disketomy, or spinal fusion, w/residuals or neurological deficit	Decline
□	Spondylolisthesis: Forward slippage of a lumbar vertebra on the vertebra below it	Refer to Spinal Stenosis
	Squamous Cell Carcinoma (disease- and treatment-free): A malignant skin tumor involving the middle portion of the epidermal skin layer	
	Localized to the skin w/biopsy confirmation, no internal organ involvement	Preferred
	Of an internal organ	Refer to Cancer (Internal)
	Stairlift: Current use	Decline
♥	Stroke (CVA): Occurs when the blood supply to any part of the brain is interrupted, resulting in the death and loss of brain function and tissue	Decline
	Subdural Hematoma: A collection of blood on the surface of the brain	
	New onset	Postpone 12 months
	Complete recovery, no limitations or cognitive deficits	Select
	Diagnosed as chronic, with residual limitations or cognitive deficit	Decline
	Surgery: Recommended or anticipated	
	Minor or day surgery recommended for hernia, gallbladder, cataracts, or bunions	Select
	Syncope: A transient loss of consciousness due to inadequate blood flow to the brain	
	Benign, vasovagal >3 months	Preferred
	Due to disease	Refer to disease
	Unknown etiology or recurring	Decline

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	Tendonitis: Inflammation of a tendon	Preferred
	Tennis Elbow: Inflammation of the muscles of the forearm, or their tendons near the origin on the humerus (bone of the upper arm)	Preferred
	Thrombocytopenia (Essential): A blood disorder characterized by an increase in the number of blood platelets	
	New onset or abnormal blood studies <18 months	Postpone 18 months
	Stable platelet counts, asymptomatic >18 months	Class 1*
	Abnormal blood studies or evidence of progression to Leukemia	Decline
	Tobacco Use	
	Abstinence >12 months	Preferred
	Abstinence <12 months	Select
	Tourette's Syndrome: A disorder characterized by repetitive muscle movements and vocal outbursts	Decline
	Transient Global Amnesia: A memory disorder seen in middle-aged and elderly persons; characterized by an episode of amnesia and bewilderment that lasts for several hours; person is otherwise alert and intellectually active	
	Asymptomatic, single episode, no cognitive or physical abnormalities, >12 months	Class 1 w/90 day E.P.*
	Two or more episodes	Decline
	♥ Transient Ischemic Attack: A brain disorder caused by temporary disturbance of blood supply to an area of the brain, resulting in a sudden, brief decrease in brain functions	
	Asymptomatic, single episode, no cognitive or physical abnormalities, >12 months	Class 1 w/90 day E.P.*
	TIAs (2 or more)	Decline
	With diagnosis of Diabetes	Decline
	Transverse Myelitis: A neurological disorder caused by inflammation across both sides of one level, or segment, of the spinal cord	Decline
	Tremor: An involuntary type of shaking movement	
	Benign, essential, intention or familial, independent in IADLs or ADLs, non-progressive, negative neurological workup	Select

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	<p>Tremor (continued)</p> <p>Benign, essential, intention or familial, independent in IADLs or ADLs, non-progressive, absent neurological workup, >12 months</p> <p>Benign, essential, intention or familial, independent in IADLs or ADLs, negative neurological workup, on Inderal</p> <p>Benign, essential, intention or familial, independent in IADLs or ADLs, absent neurological workup, >12 months, on Inderal</p> <p>Benign, essential, intention or familial, w/IADLs or ADLs dependency</p> <p>Benign, essential, intention or familial w/progression or treatment with an anti-Parkinson's medication or a neurostimulator implant</p>	<p>Select</p> <p>Select</p> <p>Select</p> <p>Decline</p> <p>Decline</p>
<input type="checkbox"/>	<p>Tuberculosis: A contagious bacterial infection; the lungs are primarily involved, but the infection can spread to other organs</p> <p>Acute episode, normal pulmonary function tests, >6 months</p> <p>Hospitalization for respiratory problems or active disease, normal pulmonary function tests, >6 months</p> <p>Underlying disease, reduced pulmonary function tests, or oxygen use</p>	<p>Select</p> <p>Select — Class 1*</p> <p>Decline</p>
	<p>Tumor (Benign): excluding brain and pituitary tumors: A spontaneous growth of tissue which forms an abnormal mass</p>	<p>Preferred</p>
	<p>Ulcerative Colitis: A chronic, episodic, inflammatory disease of the large intestine and rectum characterized by bloody diarrhea</p> <p>New onset, recent exacerbation or flare, <6 months</p> <p>Asymptomatic, medically managed no exacerbations/flares, >6 months</p> <p>Asymptomatic, medically managed w/occasional bowel obstructions/flares, >6 months</p> <p>Colostomy, ileostomy, fully recovered w/independent management >6 months</p> <p>Chronic steroid therapy, frequent exacerbations/flares, multiple surgeries, weight loss, surgery recommended, or incontinence</p>	<p>Postpone 6 months</p> <p>Select</p> <p>Class 1 w/90 day E.P.*</p> <p>Class 1 w/90 day E.P.*</p> <p>Decline</p>
	<p>Ulcer Disease (Gastric, Duodenal, Esophageal): An erosion or open sore in the lining of the duodenum, the stomach, or the esophagus</p> <p>* Stable, asymptomatic</p> <p>Recurrent symptoms, GI bleed, or hospitalization, >6 months</p>	<p>Preferred</p> <p>Select — Class 1*</p>

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	<p>Urethral Stricture: An abnormal narrowing of the urethra</p> <p>Asymptomatic, treatment-free, no recurrent urinary tract infections</p> <p>Independent use of a catheter >12 months, <2 urinary tract infections within a 12 month period</p> <p>Treated w/ <3 dilations within a 12 month period, stable, no recurrent urinary tract infections or incontinence</p> <p>Treated w/multiple dilations (>2) within a 12 month period, stable, no recurrent urinary tract infections or incontinence</p> <p>Recurrent urinary tract infections, incontinence, surgery recommended or anticipated, chronic daily antibiotic treatment</p>	<p>Preferred</p> <p>Class 1*</p> <p>Select</p> <p>Class 1*</p> <p>Decline</p>
	<p>Urinary Tract Infection: An infection of the urinary tract</p>	Preferred
	<p>Valvular Heart Disease: The heart valves can malfunction either by leaking (valve regurgitation) or by failing to open adequately (valve stenosis); either problem can seriously interfere with the heart's ability to pump blood</p> <p>Mild, asymptomatic, treatment-free</p> <p>Moderate, asymptomatic</p> <p>Moderate-severe, asymptomatic</p> <p>Severe, symptomatic, surgery recommended, or associated with atrial septal defect</p>	<p>Preferred</p> <p>Class 1*</p> <p>Class 2* — Decline</p> <p>Decline</p>
♥	<p>Varicose Veins: Enlarged, twisted, painful superficial veins resulting from poorly functioning valves</p> <p>No underlying vascular disease</p> <p>Vein stripping, completely recovered</p> <p>Venous stasis ulcer, completely healed, asymptomatic, treatment-free, >3 months</p> <p>Non-healing ulcers, recurrent ulcers, or claudication</p>	<p>Preferred</p> <p>Preferred</p> <p>Select</p> <p>Decline</p>
	<p>Ventricular Fibrillation: A rapid and irregular heartbeat arising from the lower chambers of the heart</p> <p>New onset <3 months</p> <p>Successful defibrillator implant >3 months, asymptomatic, ejection fraction >45%, no underlying cardiac conditions</p> <p>Uncontrolled, episodes of chest pain, shortness of breath, syncope or near syncope, dizziness, or ejection fraction <40%</p>	<p>Postpone 3 months</p> <p>Select</p> <p>Decline</p>

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

CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
<p>Ventricular Tachycardia: A rapid heartbeat originating from the lower chambers of the heart</p> <p>New onset <3 months</p> <p>Successful defibrillator implant >3 months, asymptomatic, ejection fraction >45%, no underlying cardiac conditions</p> <p>Uncontrolled, or episodes of chest pain, shortness of breath, dizziness, syncope or near-syncope, or ejection fraction <40%</p>	<p>Postpone 3 months</p> <p>Select</p> <p>Decline</p>
<p>Vertebral Basilar Insufficiency: Insufficient blood flow to the back parts of the brain</p>	<p>Decline</p>
<p>Vertigo: A feeling of faintness or lightheadedness, making it difficult to maintain balance while standing or sitting</p> <p>New onset <3 months</p> <p>Asymptomatic >3 months</p> <p>Due to disease</p> <p>Cause unknown or current symptoms</p>	<p>Postpone 3 months</p> <p>Preferred — Select</p> <p>Refer to disease</p> <p>Decline</p>
<p>Visual Loss</p> <p>Congenital, single eye, completely independent</p> <p>Congenital, both eyes, completely independent</p> <p>Due to disease</p>	<p>Select</p> <p>Select — Class 1*</p> <p>Refer to disease</p>
<p>Von-Hippel-Lindau: A rare, genetic multi-system disorder characterized by the abnormal growth of tumors in certain parts of the body</p>	<p>Decline</p>
<p>Von Willebrand's Disease: A congenital bleeding disorder</p>	<p>Decline</p>
<p>Waldenstrom's Macroglobulinemia: A cancer of white blood cells known as B lymphocytes</p>	<p>Decline</p>
<p>Walker: Current use</p>	<p>Decline</p>
<p>Wegener's Granulomatosis: A rare disorder which causes inflammation of blood vessels in the upper respiratory tract, lungs, and kidneys</p>	<p>Decline</p>
<p>Wenicke-Korsakoff Syndrome: A brain disorder involving loss of specific brain functions, due to a thiamine deficiency that commonly accompanies habitual alcohol use</p>	<p>Decline</p>
<p>Wheelchair: Current use</p>	<p>Decline</p>

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- Represents a respiratory co-morbid condition.
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CONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
<p>Whipple's Disease: A rare disorder with widespread symptoms that causes malabsorption (inadequate absorption of nutrients from the intestinal tract)</p>	Decline
<p>Worker's Compensation Disability Benefits: Currently receiving</p>	Decline
<p>Wilson's Disease: An inherited disorder where there is excessive amounts of copper in the body, which causes a variety of effects including liver disease and damage to the nervous system</p>	Decline
<p>Wiscott-Aldrich Syndrome: An immunodeficiency disorder of both T- and B-cells characterized by thrombocytopenia, eczema, and recurrent infections</p>	Decline
<p>Wolf Parkinson-White Syndrome: Episodes of rapid heart rate (tachycardia) caused by abnormal electrical pathways (circuits) in the heart.</p>	
<p>Asymptomatic, treatment-free >12 months</p>	Preferred
<p>Asymptomatic >3 months, medically treated, no underlying cardiac conditions</p>	Select
<p>Asymptomatic >3 months, treated with radio frequency or catheter ablation, no underlying cardiac conditions</p>	Select
<p>Uncontrolled, episodes of chest pain, shortness of breath, syncope or near-syncope, dizziness, or ejection fraction <40%</p>	Decline
<p>Xeroderma Pigmentosa: An inherited inability to repair DNA damage from ultraviolet light</p>	Decline

* Substandard risk classifications are only eligible for 2–6 year benefit periods.

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

- ☐ Represents a respiratory co-morbid condition.
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XI. UNDERWRITING GUIDELINES (DOUBLE ACCIDENT BENEFIT AND FAMILY HISTORY)

UNDERWRITING GUIDELINES FOR THE DOUBLE ACCIDENT BENEFIT*

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

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

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

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

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

UNDERWRITING GUIDELINES FOR THE FAMILY HISTORY QUESTION

The purpose of asking this question is to ensure that the underwriters are making an informed decision. If the applicant has indicated that a family history of **Diabetes, Heart Disease, Stroke, Parkinson's, Alzheimer's, or Dementia** exists, it is imperative that the underwriters validate through the normal course of underwriting that symptoms and/or diagnosis of these conditions are not present.

If the applicant is unwilling to answer this question, we will be unable to complete the underwriting of the file.

* Not available if the applicant is:
— age 65 and older
— applying for a lifetime benefit period
— applying for a FamilyCare policy

XII. UNINSURABLE MEDICATIONS

The following medications indicate a serious underlying condition that will result in a declined application. This list is not all-inclusive.

Abilify — Antipsychotic
Adriamycin — Malignant tumors
Alkeran — Multiple Myeloma
Aranesp — Anemia
Aricept — Alzheimer's disease
Artane — Parkinson's disease
Avinza — Chronic pain
Avonex — Multiple Sclerosis
A.Z.T. — HIV, AIDS
Cogentin — Parkinson's disease
Cognex — Alzheimer's disease
Cyloserine — Alzheimer's disease
Cytosan — Malignant tumors
D.D.I. — HIV, AIDS
Depo-Provera — Inoperable, Recurrent, and Metastatic Endometrial, and Renal Carcinoma
Duragesic Patch — Chronic pain
Eldepryl — Parkinson's disease
Epogen — Anemia
Estinyl — Cancer
Ergoloid — Decline in mental capacity
Exelon — Alzheimer's disease/Dementia
Fentanyl Patch — Chronic pain
Geodon — Schizophrenia
Gleevic — Cancer, Leukemia
Gold Therapy — Arthritis
Haldol — Antipsychotic
Hydergine — Decline in mental capacity
Imuran — Immunosuppressant
Interferon — Immunosuppressant
Kadian — Chronic pain
Kineret — Rheumatoid Arthritis
L-Dopa — Parkinson's disease

Larodopa — Parkinson's disease
Leukeran — Malignant tumors, not curative
Mellaril — Antipsychotic
Mestinon — Myasthenia Gravis
Methadone — Severe pain
Mirapex — Parkinson's disease
Morphine — Severe pain
MS Contin — Severe pain
Namenda — Alzheimer's disease
Narvane — Antipsychotic
Neulasta — Anemia
Oxycontin — Severe pain
Parlodel — Parkinson's disease
Parsidol — Parkinson's disease
Permax — Parkinson's disease
PhosLo — Kidney failure
Plenaxis — Advanced Prostate Cancer
Procrit — Anemia
Purinthenol — Severe Progressive Ulcerative Colitis
Rebif — Multiple Sclerosis
Remicade — Rheumatoid Arthritis/Crohn's Disease
Reminyl — Alzheimer's disease
Renagel — Kidney failure
Rezulin — Diabetes
Ridura — Rheumatoid Arthritis
Risperdal — Antipsychotic
Seroquel — Antipsychotic
Sinemet — Parkinson's disease
Stelazine — Antipsychotic
Steroid Use — >10 mg daily
Symmetrel — Parkinson's disease
Thiothixene — Antipsychotic
Thorazine — Antipsychotic
Trilifon — Antipsychotic
Tysabri — Multiple Sclerosis
Xyrem — Narcolepsy
Zyprexa — Antipsychotic

If the applicant is being treated with any of the following medications for a different condition, the application can be submitted for consideration. Please contact the Underwriting area to prequalify the applicant.

XIII. MALE/FEMALE HEIGHT AND WEIGHT TABLE

	Preferred/Select		Class 1		Class 2	
	<u>Min.</u>	<u>Max.</u>	<u>Min.</u>	<u>Max.</u>	<u>Min.</u>	<u>Max.</u>
4'7"	65	155	156	185	186	215
4'8"	70	160	161	190	191	220
4'9"	75	165	166	195	196	225
4'10"	80	170	171	200	201	230
4'11"	85	175	176	205	206	235
5'0"	90	180	181	210	211	240
5'1"	95	185	186	215	216	245
5'2"	97	190	191	220	221	250
5'3"	99	195	196	225	226	255
5'4"	102	200	201	230	231	260
5'5"	105	205	206	235	236	265
5'6"	108	210	211	240	241	270
5'7"	112	215	216	245	246	275
5'8"	115	220	221	250	251	280
5'9"	118	225	226	255	256	285
5'10"	120	230	231	260	261	290
5'11"	123	235	236	265	266	295
6'0"	126	240	241	270	271	300
6'1"	129	245	246	275	276	305
6'2"	133	250	251	280	281	310
6'3"	137	255	256	285	286	315
6'4"	140	260	261	290	291	320
6'5"	144	265	266	295	296	325
6'6"	147	270	271	300	301	330
6'7"	150	275	276	305	306	335

XIV. APPEAL PROCESS

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

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

- ✓ Review the specific reason(s) for the adverse decision that is outlined in the applicant's letter.

- ✓ Compare the letter to the application for insurance and the Condensed Underwriting Guide.

- ✓ Check for multiple co-morbid conditions that will increase the risk of using long term care services.

- ✓ Review the letter with the applicant.
 - If the applicant disagrees with the information contained in the letter, he or she should review the letter with his or her physician.
 - If the physician disagrees with the contents of the letter, he or she should send a letter outlining the discrepancies.

If additional medical information is submitted, you will be informed of our decision within 30 days from Home Office Receipt.

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

XV. FIRST HOUSEHOLD RULE

As distribution systems diversify and our long term care insurance portfolio expands, we continue to see situations **where two LTC Insurance applications are submitted on one or more of our portfolio of LTC Insurance products, from different producers, on the same applicant, within the same household.**

Consequently, in order to process new business as equitably and efficiently as possible, John Hancock has implemented the following rule that applies to all advisor-based sales of the John Hancock product portfolios. The rule will be referred to as the **“First Household Rule.”**

The **First Household Rule** states that the first producer to submit an application for any of the above-mentioned policies is considered the agent of record for that household **for a period of at least six months following the submission of the first application.**

Application submitted dates are reviewed to determine the agent of record. Once the agent of record is determined, John Hancock’s Underwriting Department will notify all affected producers.

John Hancock will only accept or process a second application from another producer after a period of six months from the date of the original application. Of course, evidence of insurability will be required.

The First Household Rule will be strictly adhered to for all producers. It applies regardless of whether an advance payment is made on an application, whether an age change occurs within the six-month period, and whether we receive a letter from the client expressing a preference for one producer or the other. However, with written authorization from the “First Producer” relinquishing or adjusting rights to the case, we will accept a second application.

In a competitive marketplace, some conflict is inevitable. Nevertheless, experience shows that the First Household Rule significantly reduces the frequency of conflict, provides clear guidelines for resolution, expedites the new business process, better preserves the producer’s investment in a client relationship, and protects John Hancock’s reputation in the marketplace.

NOTES:



Long term care insurance is underwritten by John Hancock
Life Insurance Company, Boston, MA 02117.
www.johnhancocklongtermcare.com