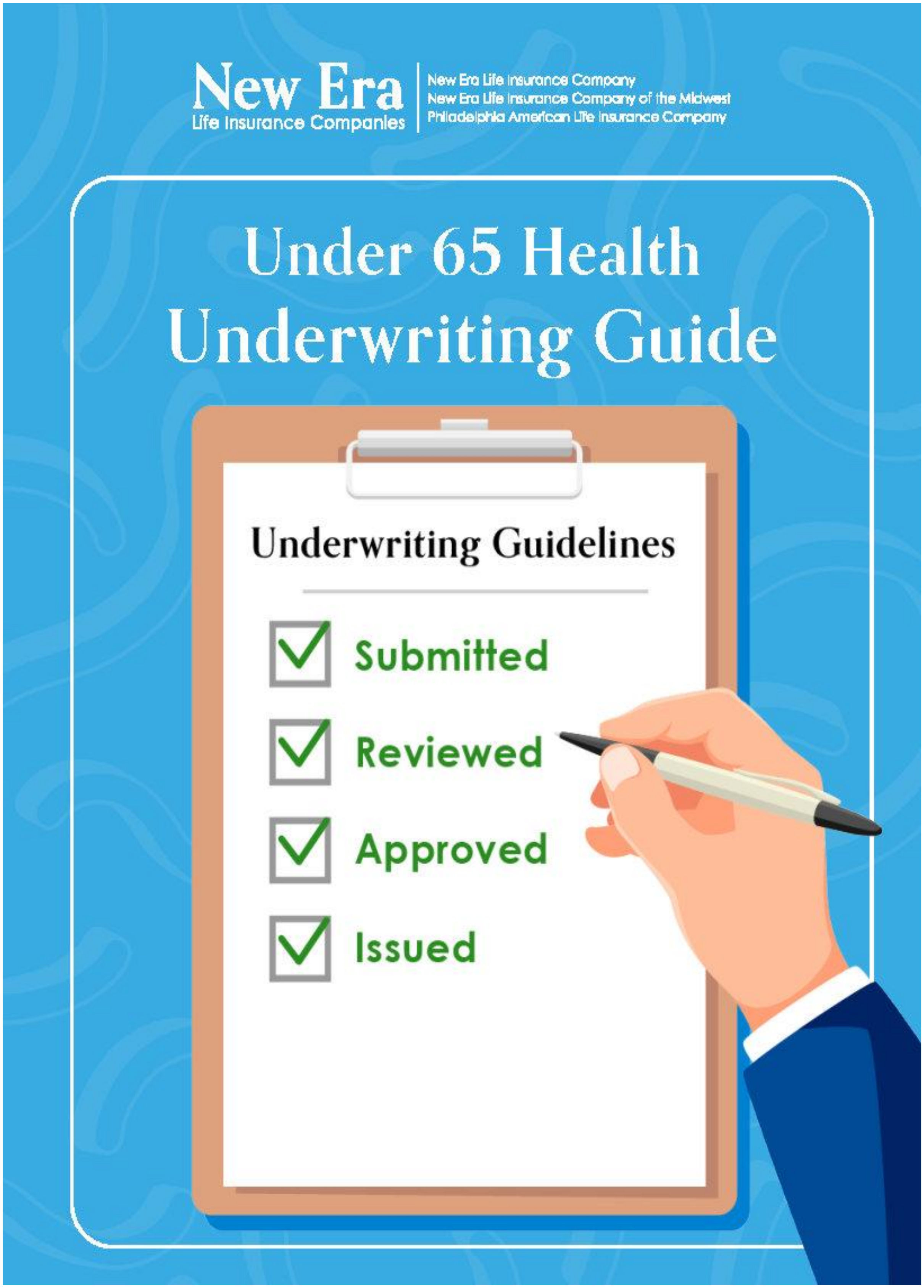


***Philadelphia American Life Insurance Company is a subsidiary of the New Era Life Insurance Companies. Rated A- (Excellent) by AM Best.***

# Table of Contents

# Welcome to Philadelphia American Life Insurance Company!

## Overview

This manual is designed to support you in evaluating your clients' insurability and providing solutions for challenging cases. It serves as a general guide that outlines the typical underwriting approach based on medical conditions.

All final decisions, whether to approve coverage as applied, adjust the policy terms, or decline the application are made exclusively by our home office underwriting team.

By following these guidelines, you can improve your approval rates and minimize cancellations or declined cases.

## Agent's Responsibilities

The agent represents the eyes and ears of the home office underwriter and is encouraged to exercise good judgment before submitting applicants with impaired risks. Complete information is critical in building a proper case history. Please ensure the client knows this is not a major medical plan and how it differs.

Applicants without any medical conditions or diseases will generally be within our standard medical underwriting guidelines. Some applicants might be eligible but will require a rate-up, while others must be declined or postponed. Taking an application on an individual with severe, recurrent, and/or a combination of several impairments results in unnecessary expenses and will be declined. The home office declines cases due to a combination of disorders that adversely impact the applicant's insurability. Please do not submit any applicant with any of the declined (DEC) conditions or have an underwriting action showing postpone (PP).

We no longer offer **Guaranteed Issue** plans with a healthy family member for HCS, HSP, OHS and GAP health plans. All applicants, including their spouse and/or dependents, must go through full underwriting.

Whenever an agent encounters a situation that has not been addressed, they should contact their manager, and if there is any doubt when writing a substandard risk or any questions about conditions, they can contact underwriting at **healthunderwriting@neweralife.com** for instructions. The home office team and the agent can save a considerable amount of time when working together.

You can download any product forms by logging in and clicking on **sales forms**. You can also download the EAPP by clicking on **underage health**. Visit www.neweralife.com to see any sales contests.

Agents should not get involved in the claims processing but should refer their clients to call the Claims Customer Service line in the home office at (888-748-3040) or email claimscustomerservice@neweralife.com.

## Agent Commissions

The commissions will be paid twice a week when we issue the policy. We will direct deposit on Tuesday if the case is issued Wednesday through Friday night. If the case is issued between Saturday and Tuesday night, we will pay on Thursday. If the applicant asks us to wait until the effective date to issue it, we will pay on Tuesday or Thursday after it's issued. Please note that credit card payments are only drafted on the effective date.

You may log in to www.neweralife.com to view your commission statements on Monday evening and your check on Tuesday, except for a holiday week. Remember, when we collect a premium, the payment of commissions is triggered.

***See the Rewrite and Replacement Policy section for additional commission guidelines.***

## Group Underwriting and List Bills

- We will list bill a group of at least 5 people or more.
- Special forms must be completed upfront to get a group billing number (GBN). The GBN will allow us to bill the group together.

***Please see the List Bill Guide for Employer-Sponsored Plans for more information concerning group underwriting.***

## Keeping Other Medical Coverage When Applying

- Optimum Health Saver CANNOT be sold with an Affordable Care Act (ACA) or major medical plan (MM).
- We will not offer Specified Disease coverage if the applicant keeps an ACA or MM plan with our indemnity products.
- We do not offer coverage to anyone currently on worker's compensation.
- Regardless of the state's program, we do not offer coverage to anyone on Medicaid or Medicare.
- Applicants with Veteran (VA) benefits may apply for a health indemnity plan of $250K calendar year maximum benefit, 1 unit, $2,500 calendar year confinement deductible or less. The applicant will not be eligible for other supplemental plans (Accident, Critical Illness, or Specified Disease).
- In the event someone has an ACA or a MM that they are not going to cancel, the maximum number of units that we can issue on our health plan is 2 units with a maximum deductible of $5,000 and Critical Illness rider or plan up to $20,000.
- Plans that do not offer deductibles, such as TN, PA, and CA, will be limited to 1 or 2 units, $250,000 calendar year maximum benefit, and 20% first-day hospital confinement (where applicable).

See the chart on the following page for additional guidelines.

### Health Saver Plus Gold, Health Choice Select, and Flex Choice Options

| Calendar Year Maximum Benefit | Number of Units per Policy | Calendar Year Confinement Deductible Options | CI Rider Benefit Options |
|---|---|---|---|
| **$250,000** | 1 | $2,500 | $10,000, $15,000 or $20,000 |
| **$250,000** | 2 | $5,000 | $10,000, $15,000 or $20,000 |

### Premier Benefit Options - ACA Sales/Christian Ministries: CI Rider Max is $20,000 each - insured/spouse, $10,000 child(ren)

| Calendar Year Maximum Benefit | Number of Units per Policy | Calendar Year Confinement Deductible Options | CI Rider | CI Rider Benefit Options |
|---|---|---|---|---|
| **$250,000** | 1 | $100, $500, $1,000 or $2,500 | Y | $10,000, $15,000 or $20,000 |
| **$250,000** | 2 | $100, $500, $1,000, $2,500, or $5,000 | Y | $10,000, $15,000 or $20,000 |

## Obtaining ACA/MM Coverage After Policy Is Active

When a PALIC Policyholder purchases an Affordable Care Act (ACA) or Major Medical (MM) plan **AFTER** they purchase our plan and wants to reduce their premium to make their program more affordable, they may put their request in writing, and we will allow them to reduce coverage. In addition, if the policyholder has had coverage for more than 12 months, the pre-existing clause will be waived.

## Pre-Existing Condition Rules and Contestability

A pre-existing condition is defined as a condition for which medical treatment was rendered or recommended by a Physician or for which drugs or medicine was prescribed within 12 months prior to a covered person's effective date.

When a condition is admitted and/or rated on the application or disclosed in the telephone interview, it will be considered pre-existing and subject to the pre-existing condition limitation clause, except in Maryland (see state-specific rules). The condition will not be covered for 12 months from the effective date. If a condition is rated, it is still noted as pre-existing.

A condition shall no longer be considered pre-existing after a person has been covered under this policy for 12 consecutive months.

***After 2 years from the effective date, no misstatement, except fraudulent misstatements, made by the applicant in the application for such policy shall be used to void this policy or to deny a claim for loss incurred commencing after the expiration of the 2-year period.***

## Prescription and Medical History

Please advise the client that underwriting may order prescription and medical history on any applicant with proper authorization. The data will provide prescribing physicians, medications, and conditions. We use this information to verify that the application illustrates the correct medical information. The agent should make every effort to provide medical documentation.

## Telephone Interview and Electronic Verifications (EAVS/VC)

The interview or electronic verification is to ensure the applicant has an opportunity to add any information that they may have forgotten during the initial solicitation of the application and to verify all information is correct. The verification process plays a key role in getting their verbal or electronic signature and allows the company the authorization to gather medical and prescription information. Therefore, it is critical that the information received through verification mirrors what is on the application. We also advise them that our product is not a major medical plan.

The toll-free number is (855) 430-3656 between 8:00 a.m. – 5 p.m. Central Time.

***Reminder!***
***Applications with dependents 18 years of age and older will require an interview with that dependent per Underwriter's request, this also includes applications verified by EAVs or VC.***

## Social Security, Tax ID, and Residency

Our E-Application software will require a valid Social Security number (SSN) or an Individual Taxpayer Identification number (ITIN) and will test to see if the format is valid; if not, the platform will not allow the agent to proceed.

***All applicants (including primary and spouse) from foreign countries must have a Social Security Number or ITIN on the application and must have resided in the U.S. for at least two years, or we cannot offer coverage.***

## Age Limits

**Newborn children:** For coverage under a new policy, ***newborns must be at least 30 days of age and in good health at the time of application submission***. See guidelines under policyholder service suggestions and tips to add a newborn to an existing policy.
**Dependent children:** Dependent children must not exceed 25 years of age. If they are within 60 days of their 25th birthday during underwriting review, they will be removed from the policy. For information about child's rates or guardianship, refer to dependent children guidelines.
**Applicants over 64 years of age:** Applicants up to 64.5 years of age can apply for coverage, after this age they should apply for a Medicare supplement.
**Critical Illness:** Applicant must be a least 21 years of age when applying on their own without a parent or guardian (*also listed under Product Specific Guidelines).*
**Dental plan:** Applicant must be at least 19 years of age when applying on their own without a parent or guardian (*also listed under Product Specific Guidelines).*

## Dependent Children Guidelines

**We no longer offer child only policies for ages 0 - 17 years of age. When applying with the parent or guardian and they are declined, leaving only children (ages 0 - 17), the entire application will be declined.**

**Ages 18 years and older will pay adult rates when on the policy without a parent or guardian.**

Children under 25 years of age and listed as a dependent to a primary insured, will pay the dependent child rate (0-25).

***Reminder!***
***Applications with dependents 18 years of age and older will require an interview with that dependent per Underwriter's request, this also includes applications verified by EAVs or VC.***

## Guardianship

When a relative is applying for minor children, indicating they are the guardian (aunt/uncle, grandparents, sibling, etc.), we need to obtain a copy of the guardianship paperwork during the underwriting process, and it is the Underwriter's responsibility. We cannot offer coverage if we cannot obtain guardianship/court-appointed documents.

The Telephone Interview Department will ask if they are the legal or court-appointed guardian for the minor.

## Policy Effective and Draft Dates

The effective date will be assigned by underwriting and is the latter of the requested date or underwriter approval.

An applicant may request an effective date up to 60 days from the application date.

The first month's premium(s) is drafted from their bank account immediately upon final underwriting action even if it is before the effective date of coverage. The agent or applicant may ask to delay the premium(s) draft to be on the policy effective date, however the application fee(s) will continue to be drafted immediately *unless* they pay with a credit card. Credit card accounts will be charged the application fee(s) and the premium(s) on the policy effective date. Application fees vary by state and product and may be non-refundable.

**If the Enhanced Accident plan is sold as a stand-alone product, the following applies:**

- When the application is received in the home office between the 1st through 15th, the earliest effective date allowed is the 1st of the following month.
- When the application is received in the home office between the 16th to the end of the month, the earliest effective date allowed is the 15th of the following month.
- When the Enhanced Accident Plan is sold with our health plan (combo sale), the earliest effective date may be the underwriting approval date. Also refer to Product Specific Guidelines on page 9.

# Policy Payments

## Agent/Agency Checks

We do not accept agent or agency checks but will accept an applicant's personal check, money order, or cashier's check. Please check your state to verify the amount of the non-refundable fee(s). Some states do vary, such as Mississippi, which is $6.

## Applications (Electronic)

Electronic applications will have their application fee(s) (where applicable), and their first month's premium(s) drafted from their bank account immediately upon final underwriting action even if it is before the effective date of coverage. The agent or applicant may ask to delay the premium(s) draft to be on the policy effective date, however the application fee(s) will continue to be drafted immediately *unless* they pay with a credit card. Credit card accounts will be charged the application fee(s) and the premium(s) on the policy effective date. Application fees vary by state and product and may be non-refundable.

***The above also applies when the applicant uses their business account and Form 7812 is not required.***

## Applications (Paper)

Paper applications will require the application fee to be paid at the time of issue. The first month's premium can be submitted through direct bill. Credit card payments cannot be accepted with paper applications.

## Credit Cards

The credit card owner must be the same as the applicant; if not, alternative payment arrangements must be made with the exception of a parent relationship with a minor child. Credit card accounts will be charged the application fee(s) and the premium(s) on the policy effective date.

Application fees vary by state and product and may be non-refundable.

***Reminder: Credit Card payments from the employer will not be accepted.***

## Employer Bank Draft Requests

Bank draft requests from an employer or business account ***will require Form 7812*** to be completed ***unless the insured is the owner/signer of the account.***

Employer paid accounts will have applicable application fees drafted upon approval ***and the initial premium will be drafted on the effective date of the policy.***

## List Bill

We do not bill for the fee. Please refer to the List Bill Underwriting guide for details.

## Product Specific Guidelines

### Accident Disability Income Benefit Rider

- The units must be equal to or lower than the base accident plan.

### Accident Expense Policy (H-0228)

- This plan can only be sold with our HCS, HSP, OHS, and Premier plan and will not be offered on a GI basis.

### Accident Medical Expense Benefit Rider

- The Accident Medical Expense rider offers an additional $26,000 benefit if the policyholder is admitted to the hospital. This rider is only available on the 2 unit Enhanced Accident plan. The applicant must also apply for our health plan (HSP, HCS, OHS, or Premier) or already have our health plan benefits in place.

### Critical Illness Plan (H-0186)

- **Applicants who have had cancer within the last 10 years are not eligible for coverage with the Critical Illness plan (CI) or Critical Illness rider.**
- The maximum benefit for CI with our HCS, HSP, OHS, and Premier is $50,000. See state-specific rules for exceptions.
- A telephone interview is required for CI with face amounts of $40,000 and $50,000. Telephone interviews at lower amounts may be required at the Underwriter's discretion.
- A CI without our health plan (HSC, HSP, OHS and Premier) is limited to a $10,000 or $20,000 benefit, and the Underwriter may ask for a telephone interview.
- The individual applicant on the CI must be at least 21 years of age or older**.** *
- If a family is applying for coverage, a parent or legal guardian must also apply for CI benefits in order for the children to be eligible for CI benefits.
- For new CI applications, the maximum age is 64 years of age. *
  **This may change due to state variations.*

### Dental Coverage (D-0220)

- A parent or legal guardian must also apply for dental coverage for the children to be eligible for Dental benefits. The individual applicant must be at least 19 years of age or older. This might change due to state variations.

### Enhanced 24-Hour Accident Plan (H-0089; H-0090)

- If you are writing the Enhanced Accident Plan for athletes or other people involved in hazardous sports, please limit to 1 unit for these applicants. This plan will NOT be offered on a GI basis.
- **Applicants that have been diagnosed or treated for an injury, disease or disorder of the back or a joint within the last 12 months are not eligible for this coverage.**
  ***If sold as a stand-alone product, the following applies:***
- If the application is received in the home office between the 1st through 15th, the earliest effective date allowed is the 1st of the following month. If the application is received in the home office between the 16th to the end of the month, the earliest effective date allowed is the 15th of the following month.

## Enhanced Benefit Rider (EBR)

- This rider is currently only available on the HCS.
- This rider cannot be sold with the Outpatient Emergency and Urgent Care rider.
- An insured may have only one of these optional riders. It doubles the outpatient benefits and increases outpatient surgery by 50%.
- We charge a 1-point (15%) rating on the HCS base, and EBR rider premium when the rider is sold and the payment method is anything other than List Bill. This rating is excluded from commissions and is not included when calculating bonus values where the premium is part of the equation.
- The EBR rider cannot be added to existing policies because the benefits double the coverage, and you cannot waive pre-existing for the rider.

## GAP Plans (H-0230)

- The GAP plan can only supplement someone else's MM, STM, ACA, Christian ministries, or group plan, and it cannot be sold to supplement our health plans.
- The applicant cannot have the GAP plan and our HCS, HSP, OHS, or Premier enforced simultaneously.
- The GAP plan premium cannot be more than 25% of the other plan's premium unless that plan is a Short-Term plan. If supplementing an ACA plan, use the TOTAL premium of that plan, not just the subsidized portion.

## Specified Disease Plans (H-0226 and H-0435)

- **Applicants who have had cancer within the last 10 years are not eligible for coverage with the Specified Disease Plan (SPD).**
- **Applicants with a history of degenerative joint disease, osteoarthritis, psoriatic arthritis, rheumatoid arthritis, or any disorder of the bones, joints, muscles, or spine in the past 10 years will NOT be eligible for SPD.**
- This plan can only be sold with our HCS, HSP series, OHS, and Premier plan and cannot be added later.
- We will not offer the SPD and health plan if the applicant keeps other coverage or has an ACA plan.
- If applying with a Critical Illness (CI) plan or rider, there must be a $5,000 gap between the SPD deductible and the CI benefit. For example, if a person purchases a SPD with a $25,000 deductible, the most CI benefit that can be offered is $20,000. We cannot allow the CI benefits to be equal to or more than the SPD deductible.
- All medical questions must be answered to qualify for SPD.
- **SPD is not eligible for reinstatement should the policyholder let it lapse.**

## Specified Disease Plus limits

| Calendar Year Maximum Benefit Options | Issue Ages < 50 Deductible Options | Issue Ages 50 -59 Deductible Options | Issue Ages 60-64 Deductible Options |
|---|---|---|---|
| $50,000 | $25,000 | **Not Available** | **Not Available** |
| $100,000 | $25,000, $50,000 or $75,000 | $50,000 or $75,000 | $75,000 |
| $250,000 | $25,000, $50,000, $75,000 or $100,000 | $50,000, $75,000 or $100,000 | **Not Available** |

## State-Specific Underwriting

### California

- PALIC & MEC plan sold together = No Limits.
- Sold with ACA Plan (1 or 2 units, 20% & $250,000 CYM).

### Maryland

- If the applicant has Hypertension and Cholesterol, we will add a 1-point (15%) rate up, and it will NOT be considered a pre-existing condition.

### Mississippi

- Enhanced Accident Plan - If the plan is sold as a stand-alone without our health plan and it's not written in a group, the maximum benefit allowed is 1 unit and no Accident Disability Rider is allowed.

### North Carolina

- See Brochure for benefit rules.

### Texas

- Starr, Hidalgo, Zapata, and Cameron Counties - You can write a health plan for up to 2 units with a CI of up to $20,000. The CI will require a phone interview.

### Washington

- The approved health plan is the Health Choice Select. You can offer:
    - One or two Units with a $250,000 Calendar Year Maximum.
    - Choose from a First Day Hospital Confinement Benefit option of either 20% or 50%.

## Rewrite Policy Guide (Formerly Conversion Guide)

Philadelphia American Life Insurance Company (PALIC) understands that life happens, and your needs might change; therefore, in certain situations, it may be in your client's best interest to change their coverage. However, we have found that most of the time, it is NOT in the client's best interest to upgrade their policy due to unnecessary risk exposure. Before submitting a conversion application, make sure your client is fully aware of the risks associated with upgrading their coverage.

### Rewrite Applications/Policies

Rewrite policies, previously referred to as a conversion policy, is a policy where an existing insured is rewritten to a brand-new policy.

### Risks Associated with Rewrite Policies

Before submitting a rewrite application, make sure your client is fully aware of the risks associated with having a new policy.

- ✓ A brand new 12-month pre-existing condition period applies.
- ✓ A brand new 60-day waiting period for Preventive Care Benefits applies.
- ✓ Please note that the above limitations may vary by state.

### Underwriting Rules for Rewrite Policies

If any of the conditions outlined below are not met, the rewrite application is subject to being declined.

- ✓ Existing health plan must be inforce for a minimum of 12-months for a rewrite application to be considered.
- ✓ Rewrite applications must be submitted after the policy anniversary date to avoid any declines.
- ✓ Insureds should not cancel their existing coverage until the rewrite application has been approved.
- ✓ The rewritten policy must coincide with the next premium due date of the original coverage.
- ✓ For the new rewritten policy, a brand-new pre-existing condition and preventive care waiting period will apply.
- ✓ If any pending claims are for inpatient confinement, surgical care, or other major health issues, the rewrite application will be declined.
- ✓ If any claims have been filed in the last 12 months - excluding minor health issues or preventive care - the rewrite application will be declined.
- ✓ Insureds must pass full underwriting, which includes a telephone interview, medical and prescription history check, and an evaluation of all claims history.
- ✓ If any insured on the policy isn't eligible to be rewritten, then all policyholders on the policy will be declined.

## Rewrite with Lower Benefits

There are certain instances where an insured is rewritten to a new policy with lower benefits, a new pre-existing clause may be waived. The following instance outlines when a new pre-existing condition period may be waived.

- ✓ The original policy has been inforce for 24 months or longer and the insured is being rewritten to a Premier Health Saver Plan with the same or lower units, and the same or lower Calendar Year Maximum Benefit and the same or higher Confinement Deductible.
- ✓ A telephone interview would not be required when the conditions listed above are met.

## Effective Dates for Rewrite Policies

Following the date of underwriting approval, the new policy date will coincide with the next premium due date of the existing coverage provided there is sufficient time to halt the existing bank draft, if not it will be made effective the following month.

## Commission Rules for Rewrite Policies

Rewrite policies occur when an existing insured is rewritten to a brand-new policy while the original policy is still inforce. In general, renewal of the commission will apply to rewritten policies.

### Rewrites Eligible for First-year Commission

- ✓ Existing policyholders must have a Health Saver Plus Gold, Health Saver Plus I, Health Saver Plus II, Health Saver Plus III or Health Choice Select policy.
- ✓ Existing policy must be inforce for at least 12 months (rewrite app must be submitted after the policy anniversary date).
- ✓ The rewrite must be fully underwritten to one of the following plans: Optimum Health Saver, Premier Health Saver or Health Choice Select.

***Please note that rewrite policies are not eligible for new business bonuses or conference trip credit.***

# Replacement Policy Guide

## Replacement Applications/Policies

Replacement policies occur when an insured applies for a new policy after their original policy has been terminated (no existing coverage inforce).

## Underwriting Rules for Replacement Applications

The insured must pass full underwriting, which includes a telephone interview, prescription history check, and an evaluation of all previous claims history.

## Commission Rules for Replacement Policies

Replacement policies occur when an insured applies to a brand-new policy after their original policy has been terminated.

- Renewal commission will apply if the replacement policy has been written 0-6 months after the original policy's termination date.
- First-year commission will apply if the replacement policy has been written 7 or more months after the original policy's termination date.

When changing any existing business with like coverage, we will not pay a 1st-year commission on any inforce business. If a policyholder has $20,000 of CI inforce and you add more CI and keep the old plan inforce, we will pay a 1st-year commission on the new amount. If you replace the old plan with a new plan, we will pay renewal commissions on the new plan.

## Counteroffers

A counteroffer is a method of issuing coverage differently than originally applied and is used to provide coverage with a rate up for pre-existing conditions or to delete or decline an applicant from the policy(s).

- ***Each Point = 15% rate up.***
- ***An applicant who requires more than 10 points (150%) will <u>not</u> be eligible for coverage.***
- ***We do not offer condition-specific riders, only rate-ups.***
- ***Rate-ups are not commissionable.***
- ***Specific questions on the application are automatically rated based on the condition and time parameters.***
- ***Counteroffers must be signed by the applicant, not the agent.***

If a counteroffer becomes necessary, the agent and/or the manager are encouraged to work with the home office to facilitate the acceptance process. An applicant is more likely to accept a counteroffer when the agent and the home office can work together. However, the final underwriting decision must remain the sole responsibility of the home office underwriter.

Should you encounter a case that might require more information concerning a possible rate up or if the coverage can be offered, please email healthunderwriting@neweralife.com.

- ***We reserve the right to make any changes as needed.*** The agent will need to contact the customer to discuss any changes and ensure they agree if an underwriting counteroffer is necessary.

- ***Additional information or medical records*** may be supplied at the applicant's expense for requests to reconsider a decision.

- ***After the policy is issued*** and additional pertinent medical information is discovered, Underwriting may offer additional ratings to the Health, Critical Illness, and Specified Disease plans based on this information. An additional offer will be provided when the information is disclosed.

# Height / Weight Chart

## For all products, *except* Dental

**Use the height and weight charts below; this applies to the HSP series, HCS, Premier, OHS, GAP, Critical Illness, 24-Hour Enhanced Accident & Catastrophic Accident.**

**MALE**

**HT/WT**

| Height | Decline |
|---|---|
| 5'0" | 235 |
| 5'1" | 237 |
| 5'2" | 243 |
| 5'3" | 247 |
| 5'4" | 256 |
| 5'5" | 262 |
| 5'6" | 270 |
| 5'7" | 276 |
| 5'8" | 286 |
| 5'9" | 296 |
| 5'10" | 299 |
| 5'11" | 308 |
| 6'0" | 312 |
| 6'1" | 323 |
| 6'2" | 328 |
| 6'3" | 339 |
| 6'4" | 360 |
| 6'5" | 370 |
| 6'6" | 375 |
| 6'7" | 379 |

**FEMALE**

**HT/WT**

| Height | Decline |
|---|---|
| 4'10" | 198 |
| 4'11" | 201 |
| 5'0" | 204 |
| 5'1" | 210 |
| 5'2" | 213 |
| 5'3" | 216 |
| 5'4" | 224 |
| 5'5" | 226 |
| 5'6" | 229 |
| 5'7" | 236 |
| 5'8" | 241 |
| 5'9" | 248 |
| 5'10" | 255 |
| 5'11" | 263 |
| 6'0" | 278 |
| 6'1" | 280 |
| 6'2" | 282 |
| 6'3" | 285 |
| 6'4" | 290 |
| 6'5" | 295 |

## Unacceptable Medical Conditions Regardless of Time Frame

***Health Saver Products/Health Choice Select/GAP/Premier/OHS***

Addison's Disease
AIDS, HIV positive, ARC
ALS (Lou Gehrig's Disease)
Alzheimer's Disease
Anemia (Aplastic or Sickle Cell)
Angioplasty/Bypass
Ankylosing Spondylitis
Autism
Blood Thinners (Current use)
Brain Disorder
Brain Tumor (Malignant)
Buerger's Disease
Cardiomyopathy
Cardiovascular/Coronary Artery Bypass Surgery
Cerebral Palsy
Cirrhosis of the liver
Colostomy
Congestive Heart Failure
COPD
Crohn's Disease
Cystic Fibrosis
Dementia
Diabetes (Insulin or Juvenile onset)
Disabled or Receiving Disability
Down's Syndrome
Ehlers-Danlos Syndrome (EDS)
Heart Attack (Myocardial Infarction)
Hemochromatosis
Hemophilia
Hepatitis B
Hodgkin's Lymphoma & Non-Hodgkin's Lymphoma
Intellectual Disability
Kidney/Renal Failure
Leukemia
Lupus (Systemic)
Mitral Regurgitation
Mitral Stenosis
Moersch-Woltman Syndrome (Stiff Person Syndrome/SPS)
Multiple Myeloma
Multiple Sclerosis
Muscular Dystrophy
Myeloproliferative Neoplasms
Neuropathy
Organ Transplant (Recipient only)
Paralysis
Parkinson's Disease
Peripheral Vascular Disease
Polymyalgia Rheumatica
Polyneuritis
Psoriatic Arthritis
Rheumatoid Arthritis
Scleroderma
Shunt of any type
Stent Placement (Cardiac or Vein)
Stroke (Cerebral Vascular Accident-CVA)
Suicide Attempt
Tetralogy of Fallot
Transient Ischemic Attack (TIA) (Mini-Stroke)
Valve Disease or Replacement
Vasculitis

**Refer to Health Impairment chart for other conditions that are declined.**

## Unacceptable Occupations - Avocations*

***Health Saver Products Health Choice Select/ GAP/Premier/OHS***

(***Please refer to the Enhanced Accident application for specific Avocations***)

**** Eligible with exceptions as shown below***

Adult Entertainers/Dancers
Armed Services (Active Duty)
Asbestos/Toxic Chemical Workers
Athletes-Professional or Semi-Professional (who participate in a contact sport such as (Football, Soccer, Basketball, Baseball, Wrestling)
Bartenders or Tavern Workers
Crop Dusters
Explosive Workers
Federal Government Workers
Gambling and Racing related workers (Las Vegas Casino employees are accepted)
High Rise Steelworkers
****Legal Professionals - See details below***
Oil Field Workers
****Physicians - See details below.***
Pilots - Private pilots are not eligible
Rodeo and Circus
Sawmill workers are not acceptable
Show Horse Jumper
Skydivers
Stuntmen
Taxi Drivers
Underground Workers
Unemployed due to disability
Window washers above 3 stories

***Legal Professionals** - All benefits are available and there are no limitations on HCS, HSP series, OHS, Premier, or accident coverage. However, we will require an Indemnity Insurance Coverage Affidavit to be signed by the applicant and the agent before approving and issuing coverage.

***Physicians** - At least a $5,000 deductible (HSP series, OHS, Premier) or a 20% first-day benefit on the (HCS).

# Health Impairment Chart

## The following is an explanation of the symbols shown in this guide.

**Fully Recovered:** Means fully released from medical care without ongoing symptoms or treatment or additional anticipated surgery or therapy.
**STD = Standard:** No additional rating will be required at the time of Underwriting approval.
**IC = Individual Consideration:** The potential seriousness of the condition or impairment is such that consideration can be given only after all pertinent facts have been accumulated and evaluated.
**PP = Postpone:** Any applicant with a temporary condition that will not allow them to be covered now but may be eligible later once the condition is fully resolved. Any recommendation for surgery will be a postpone.
**DEC = Decline:** The applicant is not eligible for coverage. Some conditions are declined for a certain period of time, while other conditions will always be declined regardless of time frame. ***Refer to page 17 for the conditions that will always be a decline.***

***Each point = 15% and if any applicant requires more than 10 points, that person is ineligible for coverage.***

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| **Acoustic Neuroma/Vestibular Schwannoma:** A tumor of the Schwann cells (schwannoma) which provide a covering for the acoustic nerve. These slow-growing, benign tumors may occur as isolated tumors or may be seen in association with Von Recklinghausen's disease. Surgery is recommended in all cases. | Fully recovered more than 4 years = STD<br><br>Fully recovered between 1 - 4 years = 1 Point<br><br>Diagnosed less than 1 year = PP<br><br>Present = DEC |
| **Addison's Disease:** Impaired function of the adrenal cortex may be due to causes such as trauma, vascular disease, infection and tumors but in many cases it is idiopathic. | DEC<br><br>***Always decline, regardless of time frame*** |
| **AIDS/ARC/HIV Positive (Acquired Immune Deficiency Syndrome, AIDS Related Complex, Human Immunodeficiency Virus):** Is an ongoing, chronic condition. It's caused by the human immunodeficiency virus, also called HIV which damages the immune system so that the body is less able to fight infection and disease.<br><br>➢ ***WI Residents are not required to answer this question.***<br><br>➢ ***California law prohibits an HIV test from being required or used by health insurance companies as a condition of obtaining health insurance).*** | DEC<br><br>***Always decline, regardless of time frame*** |
| **Alcohol or Substance Abuse/Alcoholism/Alcohol Use Disorder:** A chronic disease characterized by uncontrolled drinking and preoccupation with alcohol. Alcoholism is the inability to control drinking due to both physical and emotional dependence on alcohol. | No alcohol use or treatments or medications for alcohol addiction or abuse and gainfully employed with normal liver function test results for at least 4 years = STD<br><br>Current use or within the last 4 years, if applicant has used alcohol, been diagnosed with or received any medical treatment, taken medication for or been advised to have a medical test for alcohol abuse = DEC |
| **Allergies:** These are characterized by rhinorrhea, nasal obstruction, sneezing, conjunctivitis, lacrimation, and nasal and pharyngeal itching. | STD |
| **ALS (Amyotrophic Lateral Sclerosis or Lou Gehrig's Disease):** Is a progressive disease of the nervous system characterized by diffuse muscle weakness and wasting. | DEC<br><br>***Always decline, regardless of time frame*** |

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| **Alzheimer's Disease:** Is a progressive neurodegenerative disorder that primarily affects memory, thinking, and reasoning skills. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Amputations:** Amputation is a surgical procedure where a limb or part of a limb is removed. | **<u>Caused by an accident</u>**<br>Fully recovered = STD<br><br>**<u>Caused by disease</u>**<br>Fully recovered more than 10 years = STD<br>Less than 10 years = DEC |
| **Anal or Rectal Fissure:** An abnormal cleft or groove or abnormal passage in the anal area. | STD |
| **Anemia Pernicious, Aplastic, Fanconi's Nutritional, Hemolytic:** Is a condition where the blood has a lower-than-normal number of red blood cells or a reduced amount of hemoglobin.<br><br>**Sickle Cell Anemia:** Is a severe hereditary anemia in which only sickle hemoglobin is produced.<br><br>***There are many forms of Anemia, if the applicant's condition isn't listed, check with underwriting.*** | **<u>Fully recovered</u>**<br>Recovered more than 5 years = STD<br>Recovered between 2 – 5 years = 1 Point<br>Recovered less than 2 years = 2 Points<br><br>**<u>Primary or Congenital (Fanconi's) still present</u>** = DEC<br><br>**<u>Aplastic, Hemolytic or Sickle Cell Anemia</u>** = DEC<br>***Always decline, regardless of time frame*** |
| **Aneurysm:** A true aneurysm is a widening of a vessel. A false aneurysm represents a localized rupture of an artery with sealing over by clot formation. | **<u>Operated and fully recovered</u>**<br>Recovered more than 3 years = STD<br>Recovered between 1 - 3 years = 2 Points<br>Recovered less than 1 year = DEC<br><br>**<u>Unoperated</u>** = DEC |
| **Angioplasty/Bypass** | Refer to cardiac disorders |
| **Ankylosing Spondylitis** | Refer to arthritis |
| **Anorexia:** An eating disorder marked by an extreme fear of becoming overweight that leads to excessive dieting to the point of serious ill health and sometimes death. | **<u>The applicant must be at least 20 years old, fully recovered, normal weight, no psychotherapy and normal menses</u>**<br>Recovered more than 5 years = STD<br>Recovered between 3 - 5 years = 1 Point<br>Recovered less than 3 years = DEC<br><br>**<u>If present or less than 20 years old</u>** = DEC |
| **Arthritis (Ankylosing Spondylitis, Gout, Osteoarthritis, Psoriatic Arthritis, Reiter's Syndrome, Rheumatoid Arthritis)**<br><br>**<u>Ankylosing Spondylitis</u>:** Is a type of arthritis that primarily affects the spine and can cause inflammation and pain in the joints between the vertebrae and the pelvis. Over time, it can lead to spinal fusion, where the bones of the spine grow together, causing stiffness and a hunched posture.<br><br>**<u>Gout/Gouty Arthritis</u>:** Is a painful form of inflammatory arthritis caused by a buildup of uric acid in the blood, which forms needle-like crystals in joints, most commonly the big toe.<br><br>**<u>Osteoarthritis</u>:** Is a degenerative joint disease where cartilage breaks down, causing pain, stiffness, and reduced range of motion. It's the most common type of arthritis and typically affects weight-bearing joints like knees, hips, and spine, but can occur in any joint.<br><br>**<u>Psoriatic Arthritis</u>:** Is a chronic inflammatory disease that affects the joints and entheses (where tendons and ligaments attach to bone) and is often associated with the skin condition psoriasis. It can cause pain, stiffness, swelling, and potentially joint damage if left untreated. | **<u>Ankylosing Spondylitis</u>** = DEC<br>***Always decline, regardless of time frame***<br><br>**<u>Gout/Gouty Arthritis</u>**<br>Infrequent attacks, normal build, normal blood pressure & compliant with medication = STD<br>BMI over 30% or high blood pressure on medication = 1 Point<br><br>**<u>Osteoarthritis</u>**<br>Has been diagnosed, treated or tested by a Dr. or taken medication in the last 12 months = 2 Points<br>Severe, debilitating or surgery anticipated or recommended = DEC<br>***Does not qualify for Specified Disease plan w/ this condition if within the last ten years or Enhanced Accident if within the last 12 months.***<br><br>**<u>Osteoarthritis of the Spine (Spinal Arthritis</u>**) = Refer to spinal/back disorders<br><br>**<u>Psoriatic Arthritis</u>** = DEC<br>***Always decline, regardless of time frame***<br><br>Continued on the following page |

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| **Arthritis Continued**<br><br>**<u>Reiter's Syndrome</u>:** Is a form of inflammatory arthritis that develops in response to an infection in another part of the body. It's characterized by a triad of symptoms: arthritis, urethritis (inflammation of the urethra), and conjunctivitis (inflammation of the eye). It is now defined as a peripheral arthritis lasting longer than one month associated with urethritis, cervicitis or diarrhea.<br><br>**<u>Rheumatoid Arthritis</u>:** Is a chronic autoimmune disease primarily affecting the joints, causing pain, swelling, and stiffness. It can also affect other parts of the body, including the eyes, heart, lungs, and skin. RA is characterized by inflammation of the synovium (the lining of the joints), which can lead to cartilage and bone damage. | **<u>Reiter's Syndrome (1 attack, fully recovered)</u>**<br>Recovered more than 5 years = STD<br>Recovered between 1 - 5 years = 1 Point<br>Recovered less than 1 year = PP<br><br>**<u>Rheumatoid Arthritis</u>** = DEC<br>***Always decline, regardless of time frame*** |
| **Asthma:** This is a disease characterized by airway inflammation and bronchospasm, which results in airflow obstruction and causes dyspnea.<br><br>**<u>Type 1 Intermittent asthma</u>:** Bronchodilator use no more than once per week, no inhaled or oral steroids, no hospitalizations or ER visits.<br>**<u>Type 2 Mild persistent asthma</u>:** Bronchodilator or inhaled steroid use 1 or 2 times per day on a seasonal basis (4 times per year with durations not over one month), no hospitalizations or ER visits in the past 5 years, no oral steroid use.<br>**<u>Type 3 Moderate persistent asthma</u>:** Bronchodilator use no more than 4 times per day, or inhaled steroid use no more than 2 times per day, no oral steroids, no hospitalizations or ER visits in past 2 years.<br>**<u>Type 4 Severe persistent asthma</u>:** Bronchodilator or inhaled steroid use up to 4 times per day on a year-round basis, no hospitalizations, ER visits, or oral steroid use in past 2 years. | **<u>See types notated in the column to the left</u>**<br><br>Mild – Moderate (types 1 – 3) sees a Dr. less than twice per year = STD<br><br>Mild – Moderate (types 1 – 3) sees a Dr. more than twice per year = 1 Point<br><br>Type 4 = 2 Points<br><br>***Smokers***: Add 1 additional point for Type 3 and if oral or inhaled steroids used more than in type 4 and/or hospitalized or ER visits in the past 2 years = DEC<br><br>***Children under age 2 = DEC*** |
| **Attention Deficit Hyperactive Disorder (ADHD):** Is a neurodevelopmental disorder characterized by persistent problems with inattention, hyperactivity, and impulsiveness. | Refer to mental nervous disorders |
| **Autism:** A severe mental disorder with onset in infancy characterized by qualitative impairment in reciprocal social interaction and in verbal and nonverbal communication and restricted sphere of activities or interests. | DEC **(*Always decline, regardless of time frame*)**<br><br>High functioning = IC |
| **Back Disorders** | Refer to spinal/back disorders |
| **Bariatric Surgery/Gastric Bypass (Weight Loss):** Is a treatment for individuals with severe obesity who have not been able to achieve and maintain weight loss through diet, exercise, and other non-surgical methods. | Fully recovered more than 12 months = STD<br><br>Surgery within the last 12 months, fully recovered = 2 Points<br><br>With complications = DEC |
| **Barrett's Esophagus:** Is a complication of longstanding gastroesophageal reflux whereby a portion of the lower esophagus is lined by metaplastic columnar epithelium instead of normal squamous epithelium. The disorder requires regular endoscopic evaluation. | Fully recovered, endoscopy showing reversal of squamous epithelium = STD<br><br>Good response to treatment, adequate endoscopic follow-up = STD<br><br>Present, untreated or no endoscopic follow-up within the last 2 years = 1 Point<br><br>Partial response to treatment, erratic endoscopic follow-up = 1 Point |
| **Basal/Squamous Cell Skin Cancer** | Refer to skin cancer |
| **Bedridden** | DEC |
| **Bell's Palsy:** A facial muscle paralysis due to an inflammatory reaction causing nerve compression. | Fully recovered = STD<br><br>Current or not fully recovered = PP |

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| **Bladder Cancer:** Is a disease where cancerous cells form in the tissues of the bladder, a muscular organ that stores urine. It's a relatively common cancer, particularly among older adults, and while often treatable, it can also recur after treatment. | **Fully recovered and must be cancer free and treatment free at least 5 years**<br>More than 10 years = STD<br>Between 5 - 10 years= 2 Points<br><br>**Less than 5 years** = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Bladder/Urinary Tract Infections (UTI):** Is a common infection that affects the urinary system, which includes the kidneys, bladder, and urethra. Most UTIs are caused by bacteria, with E. coli being the most frequent culprit. | Fully recovered = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point |
| **Blindness** | Refer to eye conditions |
| **Blood Clot:** Is a mass of blood that forms when blood cells and proteins clump together. They can be dangerous if they form unnecessarily or break free and travel to other parts of the body. | Refer to diagnosis under cardiovascular disorders, deep vein thrombosis (DVT) or pulmonary embolism<br><br>Currently taking blood thinner = DEC |
| **Blood Pressure (High)/Hypertension (HBP):** Is the force of blood pushing against the walls of your arteries as your heart pumps it around your body. It's measured in millimeters of mercury (mmHg) and has two numbers: systolic (when your heart beats) and diastolic (when your heart rests). | Well controlled, non-hospitalized = STD<br><br>**In the state of Maryland**, if they have hypertension and cholesterol medication together = 1 Point<br><br>More than 3 current medications for high blood pressure = IC<br><br>Hospitalized = DEC |
| **Bone Spur:** A bone spur, also known as an osteophyte, is a bony growth that develops on a bone, often at the edges of a joint. While they can form on any bone, they are most common in areas like the neck, shoulders, elbows, spine, hips, knees, and heels. | No symptoms, incidental finding = STD<br><br>Operated, fully recovered = STD<br><br>Current symptoms, unoperated, surgery not recommended = 1 Point<br><br>Surgery recommended = PP |
| **Bowel Obstruction:** Also known as intestinal obstruction, occurs when the small or large intestine is blocked, preventing the normal passage of food, liquid, and waste. This blockage can be partial or complete and can lead to serious complications if not addressed promptly. | Surgically corrected, fully recovered = STD<br><br>Surgery recommended = PP |
| **Brain Disorder (other than Epilepsy/Seizures):** Examples include but are not limited to Alzheimer's disease, Ataxia, Chiari 1 malformation, degenerative nerve diseases, dementia, encephalitis, genetic brain disorders, stroke and unrecovered traumatic brain injury. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Brain Tumor:** Must be Benign to be considered. | Operated, at least 2 years fully recovered = STD<br><br>Unoperated, diagnosed more than 2 years ago, stable without changes, no symptoms & no medications = IC with provided medical records<br><br>Shunt = DEC<br><br>Diagnosed within 2 years or malignant = DEC<br><br>Malignant brain tumors = DEC<br>***Always decline, regardless of time frame*** |
| **BRCA 1, 2 Gene Mutation:** Are genes that normally help to repair damaged DNA, thus acting as tumor suppressors. Mutations in these genes can disrupt their function, increasing the risk of certain cancers, particularly breast and ovarian cancer. | DEC |

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| **Breast Conditions (Including but not limited to Fibrocystic Breast Disease, Breast Abscess, Mastitis, Cystic Hyperplasia, Mild Mammary dysplasia and Microcalcifications):** A group of disorders that are the most common impairments in the female breast and represent an exaggerated physiological response to a changing hormonal environment. This does NOT include Breast Cancer. | Operated & fully recovered for more than 1 year and not more than 1 surgery, **NO** family history of breast cancer = STD<br><br>Confirmed by mammogram or biopsy, no symptoms, **NO** family history of breast cancer, fully recovered less than 1 year = 1 Point<br><br>Confirmed by mammogram or biopsy, no symptoms, **HAS** family history of breast cancer = 1 Point<br><br>Surgery recommended = PP<br><br>*Please refer to breast cancer below* |
| **Breast Cancer:** A disease where cells in the breast grow uncontrollably, forming tumors that can be either non-invasive (in situ) or invasive, potentially spreading to other parts of the body. It's the most common cancer in women, with both men and women at risk. Early detection through mammograms and self-exams is crucial for effective treatment, which may include surgery, radiation, chemotherapy, and hormone therapy. | Stage 0 – Refer to carcinoma in situ "others"<br><br>Fully recovered and must be cancer free and treatment free at least 5 years = STD<br>Cancer free, treatment free, fully recovered more than 5 years with breast implants = 1 Point<br><br>**Breast Cancer w/use of Tamoxifen**<br>We will offer coverage under the HCS, HSP series, OHS, and Premier for women who have been cancer-free for the past five years but are currently taking Tamoxifen under the supervision of their doctor.<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years (including Tamoxifen).*** |
| **Breast Implants:** Are used in both cosmetic breast augmentation and reconstructive surgery. They come in two main types: saline and silicone. | Cosmetic only, no symptoms = STD<br><br>Complications or implants due to history of breast cancer = 1 Point |
| **Bronchitis**<br><br>**Acute:** Is defined as an inflammation of the bronchial air passages caused by infection. Attacks are of short duration and are infrequent in nature.<br><br>**Chronic:** Can be defined clinically as the presence of a chronic productive cough on most days of the week. | **Acute**<br>Fully recovered = STD<br><br>**Chronic**<br>Non-smoker, under control, has seen a Dr. less than twice in the last year = STD<br><br>Non-smoker, under control, has seen a Dr. more than twice in the last year = 1 Point<br><br>Currently smoking or history of smoking = DEC |
| **Buerger's Disease:** Is an inflammatory type of obliterative vascular disease affecting both arteries and veins. Smoking is the principal cause of Buerger's disease. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Bunion (Bunion, Hallux, Hammertoe, Valgus):** Is lateral angulations of the great toe at its metatarsophalangeal joint. When the medial head of the first metatarsal enlarges and forms a bursa and callus over the area, the bony prominence and bursa are called a bunion. Early cases may respond to the use of pads and supports, but advanced cases require surgery. | Operated, fully recovered = STD<br><br>Unoperated = 1 point<br><br>Operated with residuals or symptoms = 1 Point<br><br>Surgery recommended = PP |
| **Bypass** | Refer to cardiovascular disorders or bariatric surgery or gastric bypass surgery |
| **Cancer (Malignant)** | See under the specific tissue location or organ affected such as bladder, brain tumor, breast, Hodgkin's & Non-Hodgkin's lymphoma/disease, leukemia, melanoma, pancreas, renal/kidney, uterine, etc. |
| **Carcinoembryonic Antigen (CEA) Test:** Is a blood test that measures the amount of CEA protein in the blood. Elevated CEA levels can be an indicator of certain types of cancer, but it's not a definitive diagnostic test. | Positive/Elevated = DEC |

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| **Carcinoma In Situ:** A preinvasive stage of malignancy confined to a certain site. | **Fully recovered and must be cancer free and treatment free**<br><br>**Bladder**<br>More than 10 years = STD<br>Between 5 - 10 years = 2 Points<br>Less than 5 years = DEC<br><br>**Cervical**<br>More than 5 years = STD<br>Between 2 - 5 years = 1 Point<br>Less than 2 years = DEC<br><br>**Melanoma**<br>More than 5 years = 1 PT<br>Less than 5 years = DEC<br><br>**Uterine**<br>More than 5 years = STD<br>Between 2 - 5 years = 1 Point<br>Less than 2 years = DEC<br><br>**Others**<br>More than 5 years = STD<br>Between 2 - 5 years = 1 Point<br>Less than 2 years = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Cardiovascular Disorders**<br><br>**CV = Cardiovascular**<br><br>***Anyone on blood thinners is not insurable.***<br><br>***Any type of shunt, stent or pacemaker is not insurable.***<br><br>***Certain conditions might qualify for the Hospital Indemnity plan but might not qualify for the Critical Illness rider or plan or Specified Disease plan (refer to application questions for time frame).***<br><br>****Certain cardiovascular conditions are always declined regardless of time frame, see list on page 17.*** | **Angina** (coronary insufficiency) = DEC<br>**Angioplasty** = DEC<br>**Aortic Regurgitation/ Stenosis/Insufficiency** = DEC<br><br>**Arrhythmia/Atrial Fibrillation/Flutter (AFIB)**<br>**Irregular Heartbeat (no other disorder)**<br>Diagnosed more than 12 months ago, isolated incident, no treatments or follow-ups with the Dr. = STD<br>Has seen a Dr. for this condition in the last 12 months and/or taking medication for this condition = 2 Points<br><br>**Arteriosclerosis or Atherosclerosis** = DEC<br><br>**Atrial Septal Defect (ASD)**<br>***Unoperated*** and spontaneously closed, fully recovered = STD<br>Currently open = DEC<br>***Operated*** and closed by direct suture or with graft material<br>Fully recovered for more than 1 Year = STD<br>Fully recovered for less than 1 Year = PP<br><br>**Bradycardia**<br>Diagnosed more than 12 months ago, isolated incident, no treatments or follow-ups with the Dr. = STD<br>Has seen a Dr. for this condition in the last 12 months and/or taking medication for this condition = 2 Points<br><br>**Bundle Branch Blocks** = DEC<br><br>**Cardiac Ablation**<br>Fully recovered, more than 1 year, no medications or symptoms = STD<br>Fully recovered, more than 1 year but takes medication = 2 Points<br>Had cardiac ablation in the past 12 months, fully recovered = 2 Points<br>Not fully recovered = PP<br><br>*__Cardiomyopathy__ = DEC<br>*__Cardiovascular/Coronary Artery Bypass Surgery__ = DEC<br>**Carotid Artery Disease (CAD)** = DEC<br>*__Cerebrovascular Disease/Accident (Stroke or TIA)__ = DEC<br><br>Continued on the following page |

**Cardiovascular Disorders Continued**

**CV = Cardiovascular**

***Anyone on blood thinners is not insurable.***

***Any type of shunt, stent or pacemaker is not insurable.***

***Certain conditions might qualify for the Hospital Indemnity plan but might not qualify for the Critical Illness rider or plan or Specified Disease plan (refer to application questions for time frame).***

****Certain cardiovascular conditions are always declined regardless of time frame, see list on page 17.***

**Congenital Heart Defect**
Unoperated/not corrected = DEC
Operated, fully recovered = IC

***Congestive Heart Failure** = DEC
***Coronary Artery Disease (CAD)** = DEC

**Endocarditis (no residual murmurs or other signs of heart disease)**
Diagnosed more than 3 years = STD
Diagnosed between 1 - 3 years = 1 Point
Diagnosed less than 1 year = PP
Currently has condition = DEC
With residual heart murmur or other signs of heart disease = DEC

***Heart Attack** = DEC
**Hypertensive Heart Disease (with or without heart failure)** = IC
**Inflammatory Heart Disease** (see under endocarditis and Pericarditis)
**Irregular Heartbeat** (see above under arrhythmia)
**Ischemic Heart Disease** = DEC
***Mitral Regurgitation/Insufficiency** = DEC
***Mitral Stenosis** = DEC

**Mitral Valve Prolapse (MVP)**
***Diagnosed more than 12 months ago***, no symptoms, incidental finding, confirmed by echo or physical exam, trivial mitral insufficiency, no other murmurs on auscultation & no cardiac hypertrophy, no treatments or medications or follow-ups with the Dr. = STD
***Diagnosed within the past 12 months***, no symptoms, incidental finding, confirmed by echo or physical exam, trivial mitral insufficiency, no other murmurs on auscultation & no cardiac hypertrophy = 2 Points
Surgery recommended = DEC
With symptoms of arrhythmia or chest pain = DEC
With other abnormalities other than trivial mitral insufficiency = DEC

**Murmurs**
Systolic = IC
Diastolic = DEC

* **Myocardial Infarction (Heart Attack)** = DEC
**Myocarditis** = DEC
**Occlusion** = DEC
**Pacemaker** = DEC

**Paroxysmal Atrial Tachycardia (no other disorder)**
**2 attacks or less per year**
Diagnosed more than 12 months ago, isolated incident, no treatments or follow-ups with the Dr. = STD
Has seen a Dr. for this condition in the last 12 months and/or taking medication for this condition = 2 Points

**Patent Ductus Arteriosus (PDA)**
Operated, fully recovered after 1 year = STD
Present = DEC
Less than 1 year = DEC
Catheter closure with coil embolization = DEC
With murmur or evidence of hypertrophy = DEC

**Pericarditis**
***Single episode, no CV impairment, EKG normal***
Fully recovered, diagnosed more than 2 years = STD
Fully recovered, diagnosed between 6 months - 2 years = 2 Points
Fully recovered, diagnosed less than 6 months = PP
***More than 1 episode (no CV impairment)***
Attacks less than 5 years = PP
More than 5 years since the last attack = STD

**Postural Orthostatic Tachycardia Syndrome/POTS (no other disorder)**
Under control with diet and exercise = STD
Has seen a Dr. for this condition in the last 12 months and/or taking medication for it = 2 Points

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| **Cardiovascular Disorders Continued**<br><br>**CV = Cardiovascular**<br><br>***Anyone on blood thinners is not insurable.***<br><br>***Any type of shunt, stent or pacemaker is not insurable.***<br><br>***Certain conditions might qualify for the Hospital Indemnity plan but might not qualify for the Critical Illness rider or plan or Specified Disease plan (refer to application questions for time frame).***<br><br>****Certain cardiovascular conditions are always declined regardless of time frame, see list on page 17.*** | **Pulmonary Stenosis (incidental finding on echocardiogram, no symptoms, mild)**<br>Over age 50 = STD<br>Between ages 1 – 50 = 1 Point<br>Under age 1 = DEC<br><br>***Shunt** = DEC<br>**Sick Sinus Syndrome** = DEC<br>***Stent** = DEC<br>***Stroke** = DEC<br><br>**Tachycardia**<br>Diagnosed more than 12 months ago, isolated incident, no treatments or follow-ups with the Dr. = STD<br>Has seen a Dr. for this condition in the last 12 months and/or taking medication for this condition = 2 Points<br><br>***Tetralogy of Fallot** = DEC<br>**Thrombosis (Arterial, Cerebral or Coronary)** = DEC<br>**Thrombus** = DEC<br>***Transient Ischemic Attack (TIA)** = DEC<br>***Tricuspid Valve Disease** = DEC<br>***Valve/Valvular Heart Disease** = DEC<br>***Valve Replacement** = DEC<br><br>**Ventricular Septal Defect (VSD)**<br>***Unoperated*** and spontaneously closed, fully recovered = STD<br>Currently open = DEC<br>***Operated*** and closed by direct suture or with graft material<br>Fully recovered for more than 1 Year = STD<br>Fully recovered for less than 1 Year = PP |
| **Carpal Tunnel Syndrome:** A complex of symptoms resulting from compression of the median nerve. | Operated, fully recovered = STD<br><br>Unoperated, sees a Dr. less than twice per year = STD<br><br>Unoperated, sees a Dr. more than twice per year = 1 Point<br><br>Surgery recommended = PP |
| **Cataracts** | Refer to eye conditions |
| **Celiac Disease:** Is a chronic digestive and immune disorder triggered by gluten, a protein found in wheat, barley, and rye. | Controlled with diet, sees a Dr. less than twice per year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point |
| **Cerebral Palsy:** A motor function disorder caused by a brain defect or lesion present at birth (or shortly thereafter). | DEC<br><br>***Always decline, regardless of time frame*** |
| **Cerebral Vascular Accident (CVA):** A stroke or CVA is an acute or sub-acute event in which a neurological deficit develops over minutes or hours. Most strokes are caused by cerebral thrombosis causing arterial occlusion and consequent ischemic focal infarction of the brain. A cerebral embolism is a fragment that breaks off from a thrombus (clot) and obstructs a cerebral artery. ***This includes a TIA.*** | DEC<br><br>***Always decline, regardless of time frame*** |
| **Cesarean (C-Section):** Is a surgical procedure where a baby is delivered through incisions in the mother's abdomen and uterus. | **In childbearing years (under age 50)**<br>Has had a tubal ligation or hysterectomy = STD<br>Has ***not*** had a tubal ligation or hysterectomy = 2 Points<br><br>**Age 50 & older** = STD |

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| **Cervical Cancer:** Is a type of cancer that develops in the cells of the cervix, the lower part of the uterus that connects to the vagina. Almost all cervical cancers are caused by a persistent infection with human papillomavirus (HPV). Cervical cancer is most common in women over 30, and early detection through Pap tests and HPV vaccination can be highly effective in preventing and treating the disease, according to the American Cancer Society. | Fully recovered and must be cancer free and treatment free at least 5 years = STD<br><br>Less than 5 years = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Charcot-Marie-Tooth (CMT):** It is a progressive, inherited condition that affects the peripheral nerves, causing muscle weakness, numbness, and other symptoms. It's a hereditary peripheral neuropathy. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Chiropractic Massage Therapy/Treatment:** Treatment using chiropractic methods, adjustments, heat, massage, or stimulation. | **All serious conditions including surgery ruled out**<br><br>1 - 3 treatments per year = STD<br><br>More than 3 treatments per year = 1 Point |
| **Cholecystitis/Cholelithiasis/Gallbladder Disease** | Refer to gallbladder |
| **Cholesterol or Hyperlipidemia:** Is a condition where there are abnormally high levels of lipids (fats) in the blood, including cholesterol and triglycerides. | STD |
| **Chorea, Huntington's:** A chronic, convulsive, nervous disorder. | DEC |
| **Chronic Fatigue Syndrome (CFS):** Is a prolonged and frequently disabling condition marked by extreme fatigue and, in some cases, joint pain, dizziness, and headaches. | Diagnosed more than 2 years with no symptoms = STD<br><br>Diagnosed less than 2 years or recurrent attacks = 1 Point |
| **Chronic Obstructive Pulmonary Disease (COPD):** Is a term used to describe a variety of diseases that cause chronic or frequent airway obstruction. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Cirrhosis of the Liver:** Is defined as a chronic diffuse process in the liver with fibrosis and nodule formation and subsequent necrosis (cell death). The major causes of cirrhosis are chronic alcohol consumption and chronic hepatitis B and C. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Claudication, Intermittent:** Absence of pain or discomfort when walking begins caused by circulatory disorder. | Refer to cardiovascular disorders |
| **Cleft Palate/Lip:** A congenital defect of the upper mouth. | Surgically corrected, fully recovered = STD<br><br>Unoperated = PP |
| **Club Foot:** A congenital deformity of the foot. | Operated, fully recovered = STD<br><br>Unoperated = PP |
| **Coarctation of Aorta** | Refer to cardiovascular disorders |
| **Colitis (Non-Ulcerative):** Inflammation of the colon. | Under control, no hospitalization and sees a Dr. less than twice per year = STD<br><br>Under control, no hospitalization and sees a Dr. more than twice per year = 1 Point<br><br>Hospitalized for this condition in the past 12 months = DEC<br><br>Smokers, underweight, more than 3 attacks or poor response to treatment = DEC |

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| **Collagen Diseases/Disorders:** Is a group of disorders where there are defects in the structure or function of collagen, a key protein in connective tissue. | Ehlers-Danlos Syndrome (EDS) = IC depending on type<br>Lupus = DEC<br>Polymyalgia Rheumatica = DEC<br>Scleroderma = DEC<br>Vasculitis = DEC<br><br>***Always decline, regardless of time frame*** |
| **Colon Polyps (Stomach, Rectal, or Intestinal) Polyps:** A colon polyp is a tumor that protrudes from the mucosa into the lumen of the gut. Multiple polyps are called POLYPOSIS. Most colon polyps are benign. | Benign Polyps (Anal, Rectal, Bladder or Colon)<br>Operated complete recovery, single occurrence, no cancer = STD<br><br>Present = 2 Points<br><br>Multiple occurrences, no cancer = 2 Points<br><br>Colonoscopy recommended (even if routine) = PP |
| **Colostomy/Ileostomy:** A surgical creation of an artificial opening from the colon. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Complex Regional Pain Syndrome:** Formerly known as Reflex Sympathetic Dystrophy (RSD), is a chronic pain condition affecting one or more limbs, characterized by persistent pain, sensitivity to touch, swelling, and changes in skin color and temperature. It's often triggered by an injury, surgery, or other trauma, and the pain is usually much more severe and long-lasting than would be expected for the initial injury. | Fully recovered = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Currently takes narcotic/opioid medication to control = DEC |
| **Concussion/Post-Concussion Syndrome:** A condition caused by a violent blow to the head. | Less than 6 months, not fully recovered = PP<br><br>Fully recovered = STD |
| **Condyloma Acuminata:** Caused by the Human Papilloma Virus which is the most common sexually transmitted disease in the United States, second only to Chlamydia. | Most recent pap smear clean/normal = STD<br><br>Condition present, abnormal pap smear = PP |
| **Congenital Heart Defect** | Refer to cardiovascular disorders |
| **Congestive Heart Failure:** Chronic inability of the heart to provide an adequate flow of blood. | Refer to cardiovascular disorders |
| **Convulsions** | Refer to seizure disorders |
| **Covid-19:** An infectious disease caused by the SARS-CoV-2 virus. | Fully recovered = STD |
| **Crohn's Disease/Ileitis/Ulcerative Colitis/Colostomy:** Is a disease which may occur anywhere in the GI tract but is most common in the small bowel and colon (where it is sometimes called Crohn's, Colitis or Granulomatous Colitis). | DEC<br><br>***Always decline, regardless of time frame*** |
| **Cyst (Dermoid, Epidermal Inclusion, Epidermoid, Ganglion, Lipoma, Millia, Pilar, Pilonidal, Sebaceous, etc.):** Is an enclosed cavity or sac lined by epithelium and contains a liquid or semi-solid material and are usually benign (non-cancerous).<br><br>For cyst on breast, kidneys, ovaries & uterus, etc., see under those tissues or organs. | Surgically removed, fully recovered = STD<br><br>Unoperated, no issues, sees a Dr. less than twice per year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP |
| **Cystic Fibrosis:** An abnormality of body secretions manifested as a respiratory disorder. | DEC<br><br>***Always decline, regardless of time frame*** |

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| **Cystitis/UTIs Inflammation of the Urinary Bladder/Urinary Tract Infections:** Often caused by a bacterial infection. | Acute mild attacks, short duration, fully recovered = STD<br><br>Frequent attacks (more than 2 per year) and/or sees a Dr. more than twice per year = 1 Point |
| **Cystocele:** Hernia protrusion of the bladder through the vaginal wall. | Operated, fully recovered = STD<br><br>Unoperated = PP |
| **Cytomegalovirus (CMV):** This virus is a member of the herpes group. It can stay alive for years in vitro and is present in body secretions and, therefore, can be transmitted sexually. | Fully recovered, HIV negative = STD<br><br>Present = DEC |
| **Deafness:** Otosclerosis, Meniere's disease, acoustic neuroma, and severe otitis media are the most common causes of deafness. | Surgery not recommended = STD<br><br>Surgery recommended = PP |
| **Deep Vein Thrombosis (DVT):** Is a serious condition where a blood clot forms in a deep vein, typically in the leg. | Fully recovered, at least 1 year = STD<br><br>Fully recovered, less than 1 year = DEC<br><br>Currently taking blood thinner = DEC |
| **Degenerative Disc Disease** | Refer to spinal/back disorders |
| **Dementia:** A cognitive deficit, including memory impairment. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Depression:** Is a mood disorder characterized by persistent feelings of sadness, loss of interest, and changes in behavior and physical well-being. It's more than just feeling down or having a bad day. | Refer to mental nervous disorders |
| **Dermatitis:** Inflammation of the skin. | STD |
| **Dermatofibrosarcoma Protuberans (DGSP):** An uncommon soft tissue tumor that involves the dermis subcutaneous fat. Per medical review board can be treated the same as basal/squamous cell. | Removed = STD<br><br>Present = PP |
| **Detached Retina** | Refer to eye conditions |
| **Deviated Septum:** A defect in the partition that separates the nasal cavities**.** | Present, incidental finding, no sinusitis or breathing issues = STD<br><br>Operated, fully recovered = STD<br><br>Present, symptomatic or surgery recommended = PP |
| **Diabetes Insipidus:** Is a condition characterized by excessive thirst and frequent urination due to the body's inability to properly regulate fluid balance. | STD |
| **Diabetes Mellitus:** A metabolic disorder causing excess sugar in the blood.<br><br>**Insulin Resistance:** Is not the same as diabetes, but they are closely related. Insulin resistance is a condition where the body's cells don't respond normally to insulin, while diabetes is a condition where blood sugar levels are too high. Insulin resistance can increase the risk of developing prediabetes and type 2 diabetes. | **Pre-Diabetes**<br>Controlled with diet and exercise = STD<br>Currently taking medication = 2 Points<br><br>**Insulin Resistance**<br>Controlled with diet and exercise = STD<br>Currently taking medication = 2 Points<br><br>Continued on the following page |

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| **Diabetes Mellitus Continued** | **<u>Non-Insulin Dependent Diabetes (Type 2) Diagnosed after age 35</u>**<br>Diagnosed after age 35, no medications, controlled with diet and exercise (no other risk factors, see below) = STD<br>Currently taking medication (no other risk factors, see below) = 2 Points<br><br>**<u>Non-Insulin Dependent Diabetes (Type 2) Diagnosed *before* age 35</u>** = DEC<br><br>**<u>Insulin Dependent or Juvenile onset Diabetes (Type 1)</u>** = DEC<br>***Always decline, regardless of time frame***<br><br>***Risk factors = Diabetes combined w/ HBP, Cholesterol Medication & BMI greater than 30% = DEC*** |
| **Diffuse Idiopathic Skeletal Hyperostosis (DISH):** A condition characterized by the calcification and ossification of ligaments and tendons, primarily along the spine, leading to stiffness and pain and can also affect other joints. | DEC |
| **Digestive Disease/Stomach** | Refer to the diagnosis |
| **Disabled or Receiving Disability** | DEC<br><br>***Always decline, regardless of time frame*** |
| **Disc Disease** | Refer to spinal/back disorders |
| **Diverticulitis/Diverticulosis:** Inflammation of the colon. Diverticula occur because of a weakness in the bowel wall and increased intracolonic pressure. The former is associated with an age-related reduction in the strength of colonic connective tissue. The formation and inflammation of small pouches along the colon. | Diverticulosis or diverticulitis found incidentally, no symptoms = STD<br><br>Operated, fully recovered = STD<br><br>Present, unoperated, sees a Dr. more than twice per year = 1 Point<br><br>Surgery recommended = PP |
| **Down's Syndrome:** Is a genetic condition where a person has an extra copy of chromosome 21, leading to a range of physical and developmental differences. It's also known as trisomy 21. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Drug Addiction or Abuse (substance use disorder):** Is a chronic, relapsing disease characterized by compulsive drug seeking and use despite harmful consequences. | No drug use or treatments or medications for drug addiction or abuse and gainfully employed with normal liver function test results for at least 4 years = STD<br><br>Current use or within the last 4 years, if applicant has used drugs, been diagnosed with or received any medical treatment, taken medication for or been advised to have a medical test for drug abuse = DEC |
| **E-Cigarettes/Vaping:** Vaping involves inhaling an aerosol (mist) produced by heating a liquid in an electronic cigarette (e-cigarette). | Current use or usage within the last 2 years will be rated with the tobacco rate. |
| **Ears, Otitis Media:** Inflammation of the middle ear. Children with an upper respiratory infection often develop acute otitis media. | 1 - 2 episodes per year, fully recovered each time = STD<br><br>Surgery recommended = PP |
| **Ehlers-Danlos Syndrome (EDS)** | Refer to collagen diseases/disorders |
| **Emphysema:** A serious and usually progressive lung disease with destruction of the air sacs and obstruction of airways / chronic obstructive pulmonary disease.<br><br>**<u>Mild</u>:** Shortness of breath only on strenuous exercise.<br>**<u>Moderate</u>:** Shortness of breath on moderate exertion.<br>**<u>Severe</u>:** Shortness of breath on slight exertion. | Mild or moderate, non-smoker = 2 Points<br><br>Severe = DEC<br><br>Currently smoking or history of smoking = DEC |

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| **Encephalitis:** An inflammation of the brain which is usually viral in origin. | Fully recovered = STD<br><br>Shunt = DEC<br><br>Present = DEC |
| **Endometriosis:** A condition resulting in the implementation of endometrial tissue on various organs in the female pelvis. | Operated (bilateral oophorectomy or laser surgery), fully recovered = STD<br><br>Unoperated, mild, under control and sees a doctor less than twice per year = STD<br><br>Unoperated and sees a doctor more than twice per year = 1 Point<br><br>Surgery recommended = PP |
| **Epilepsy:** Is a neurological condition characterized by recurrent seizures, which are episodes of abnormal brain electrical activity that can cause various symptoms, including changes in consciousness, movements, sensations, or behavior, categorized as grand mal, petit mal and Jacksonian. | Has seen a Dr. in the last year and/or currently taking medication & under control = 2 Points<br><br>Seizures caused by a brain tumor or traumatic brain injury = DEC |
| **Epstein-Barr Virus (EBV):** A herpes virus that is transmitted by close oral contact. Infection in individuals usually causes mononucleosis (glandular fever). Other diseases related to EBV infection are nasopharyngeal carcinoma, Burkitt's lymphoma, and lymphoid interstitial pneumonitis in children with AIDS. EBV is sometimes confused with chronic fatigue syndrome, although no known association exists. | Fully recovered = STD<br><br>Present = 1 Point |
| **Esophageal Stricture:** Usually occurs because of persistent gastroesophageal reflux. Individuals regurgitate food, develop increasing pain, and become apprehensive to eat. As a result, they may become anorexic. Treatment is by passage of dilators with the aid of an endoscope. Some individuals need to have the procedure repeated as often as once per year; however, in others, no further dilation is required. Surgery is usually indicated in younger individuals who require frequent dilations. | Present or requiring repeat dilations = 1 Point |
| **Esophageal Varices:** Are associated with any condition which causes portal hypertension (elevated pressure within the portal vein – the large vein which carries blood from the intestine to the liver), but most of the time, they are caused by cirrhosis of the liver. Individuals with esophageal varices are at high risk of massive and uncontrollable hemorrhage. | DEC |
| **Esophagitis/Reflux (GERD):** Normally the esophageal sphincter, aided by the diaphragm, prevents gastroesophageal reflux. However, if the sphincter loses its tone and there is peristalsis in the lower esophagus, significant amounts of acid, bile and food can regurgitate into the lower esophagus leading to reflux esophagitis. | Fully recovered, no further attacks of GERD = STD<br><br>Controlled with medication, sees a Dr. less than twice per year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP |
| **Eye Conditions**<br><br>**<u>Blindness</u>:** Refers to the lack of sight or vision, and it can range from partial sight impairment to complete loss of vision.<br><br>**<u>Cataracts</u>:** Is a clouding of the natural lens in the eye, which can lead to blurred or hazy vision. It's a common condition, especially in older adults, and is a leading cause of vision loss worldwide. Cataracts develop gradually, and symptoms can include blurry vision, sensitivity to light, and difficulty seeing at night. Surgery is the only way to remove a cataract and restore clear vision.<br><br>**<u>Detached Retina</u>:** Occurs when the retina, the light-sensitive tissue at the back of the eye, separates from its underlying supportive layers. This separation can lead to vision loss or blindness if not treated promptly. | **<u>Blindness</u>**<br>Blindness due to trauma, fully recovered = STD<br>Not fully recovered = DEC<br>Surgery considered/recommended = DEC<br>Blindness caused by disease = DEC<br><br>**<u>Cataracts</u>**<br>Removed = STD<br>Present = 2 Points<br>Surgery recommended = PP<br><br>**<u>Detached Retina</u>**<br>Unoperated = PP<br>Operated, fully recovered = STD<br><br>Continued on the following page |

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| **Eye Conditions Continued**<br><br>**<u>Glaucoma</u>:** Is a group of eye diseases that can damage the optic nerve, potentially leading to vision loss and blindness. It's often, but not always, associated with increased intraocular pressure (the pressure inside the eye). Early detection and treatment are crucial to prevent or slow down vision loss.<br><br>**<u>Keratitis</u>:** Is inflammation of the cornea, the clear, dome-shaped front surface of the eye. It can be caused by infections (bacterial, viral, fungal, or parasitic) or non-infectious causes like injury or dry eyes.<br><br>**<u>Macular Degeneration</u>:** Also known as age-related macular degeneration (AMD), is a leading cause of vision loss in older adults, affecting the macula, the central part of the retina responsible for sharp, central vision. This condition can make it difficult to see fine details, read, drive, and recognize faces. While there are two main types (dry and wet), both progressively impact central vision, though wet AMD can cause more rapid vision loss.<br><br>**<u>Optic Neuropathy</u>:** Refers to damage to the optic nerve, which transmits visual information from the eye to the brain and can be caused by a variety of factors, including inflammation, poor blood flow (ischemic optic neuropathy**)**, toxins, and compression of the nerve.<br><br>**<u>Retinopathy</u>:** Refers to a disease of the retina, the light-sensitive tissue at the back of the eye. It encompasses various conditions that damage the retina's blood vessels, potentially leading to vision impairment or blindness. Is associated with essential or malignant hypertension, diabetes mellitus and atherosclerosis. The extent of the eye ground changes are categorized as Grade 1 (mild), Grade 2 (moderate) and Grade 3 (severe). Diabetic retinopathy is the most common type, caused by diabetes-related damage to retinal blood vessels.<br><br>**<u>Strabismus/Cross-Eyed/Eye Misalignment</u>:** Commonly known as crossed eyes, is a vision condition where the eyes don't align properly and point in different directions. This misalignment can be inward (esotropia), outward (exotropia), upward (hypertropia), or downward (hypotropia). Strabismus can affect both children and adults, though it's more commonly diagnosed in childhood.<br><br>**<u>Uveitis (Choroiditis, Iritis, or Retinitis)</u>:** Is a term for inflammation of the uvea, the middle layer of the eye, which can affect the iris, ciliary body, and choroid. It can lead to vision problems and even blindness if left untreated. It can be caused by infections, autoimmune diseases, or eye injuries. Choroiditis, Iritis, or Retinitis are types of uveitis. | **<u>Glaucoma</u>**<br>Stable, controlled with medications = 2 Points<br>Surgery recommended = PP<br><br>**<u>Keratitis</u>**<br>Treated, no symptoms, fully recovered = STD<br>Operated, fully recovered = STD<br>Present = 1 Point<br>Surgery recommended = PP<br><br>**<u>Macular Degeneration</u>**<br>Present = 2 Points<br>Operated, fully recovered = STD<br>Present or surgery recommended = PP<br><br>**<u>Optic Neuropathy</u>**<br>Cause Known = IC<br>Cause Unknown = DEC<br><br>**<u>Retinopathy</u>**<br>Cause Known = IC<br>Cause Unknown = DEC<br><br>**<u>Strabismus/Cross-Eyed/Eye Misalignment (Esotropia, Exotropia, Hypertropia, Hypotropia)</u>**<br>Present = 2 Points<br>Operated, fully recovered = STD<br>Present or surgery recommended = PP<br><br>**<u>Uveitis (Choroiditis, Iritis, or Retinitis)</u>**<br>Treated, no symptoms, fully recovered = STD<br>Operated, fully recovered = STD<br>Present = 1 Point<br>Surgery recommended = PP |
| **Fibrocystic Breast Disease** | Refer to breast conditions |
| **Fibromyalgia:** A syndrome of widespread pain. | 1 medication (non-narcotic/opioid) = 1 Point<br><br>More than 1 medication or narcotic/opioid = DEC |
| **Gallbladder Disease (Gallstones, Cholecystitis, Cholelithiasis):** Inflammation of the gallbladder, or stone within the gallbladder. Gallstones will typically require surgery to remove the gallbladder. | Operated, fully recovered = Standard<br><br>Surgery recommended = PP |
| **Gastric Bypass Surgery/Stapling/Lap Band (Gastroplasty, Gastric Partitioning, Gastric Stapling, Gastric Exclusion, Intestinal Bypass, Gastric Balloon):** Are surgical procedures used in the treatment of morbid obesity. | Fully recovered more than 1 year = STD<br><br>Surgery within the last year, fully recovered = 2 Points<br><br>With Complications = DEC |
| **Gastric Cancer** | Refer to stomach cancer |

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| **Gender Dysphoria (replaces the term Gender Identity Disorder and Transgender):** The distress a person experiences due to a mismatch between their gender identity, their personal sense of their own gender and their sex assigned at birth. | With psychiatric impairment = Medical records required<br><br>Less than age 21 = DEC<br><br>Currently on hormone therapy = DEC<br><br>Surgery planned/scheduled = DEC<br><br>Less than 1 year since completion of surgery = DEC<br><br>Not fully adjusted to new gender/current complications = DEC |
| **GERD (Gastroesophageal Reflux Disease):** Is a chronic condition where stomach acid flows back up into the esophagus, causing symptoms like heartburn and regurgitation. | Refer to esophagitis/reflux (GERD) |
| **Glaucoma** | Refer to eye conditions |
| **Glomerulonephritis or Bright's Disease:** Medical term for inflammation of the glomeruli, the filtering units in the kidneys. | **<u>1 Attack</u>**<br>More than 3 years since the last attack = STD<br>Between 1 - 3 years since the last attack = 2 Points<br>Less than 1 year since the last attack = PP<br><br>**<u>2 Attacks</u>**<br>More than 5 years since the last attack = STD<br>Between 3 - 5 years since the last attack = 3 Points<br>Less than 3 years since the last attack = PP<br><br>**<u>More than 2 attacks</u>**<br>Over 10 years since the last attack = STD<br>Less than 10 years since the last attack = DEC |
| **Goiter/Hyperthyroid (Toxic Goiter, Plummer's, Basedow's or Grave's Disease)** | Refer to thyroid disorders |
| **Gonorrhea:** A sexually transmitted disease. | No other sexually transmitted disease and fully recovered = STD |
| **Gout/Gouty Arthritis** | Refer to arthritis |
| **Guillain-Barre Syndrome (GBS):** Is a rare but serious autoimmune disorder where the body's immune system mistakenly attacks the peripheral nerves. The condition is typically triggered by a preceding infection. | Fully recovered = STD<br><br>Present or has symptoms = DEC |
| **Hammer Toe:** A distortion of the toes causing a claw-like appearance. | Operated, fully recovered = STD<br><br>Unoperated = DEC |
| **Hashimoto's Disease:** Inflammation of the Thyroid. Most common cause of hypothyroidism. | Under control, sees a Dr. less than twice per year = STD<br><br>Under control, sees a Dr. more than twice per year = 1 Point<br><br>Not under control = DEC |
| **Headaches:** Vascular headaches are caused by alterations in the diameter of blood vessels within the skull. The three major types are classic migraine, common migraine and cluster headaches. | Mild, occasional attacks, see a Dr. less than twice per year = STD<br><br>Migraine or cluster and sees a Dr. more than twice per year = 1 Point |
| **Heart Attack** | Refer to cardiovascular disorders |

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| **Heel Spurs and Plantar Fasciitis:** Inflammation of the plantar fascia-the tissue that forms on the arch of the foot. | Operated, fully recovered = STD<br><br>Unoperated, surgery not recommended = 1 Point<br><br>Surgery recommended = PP |
| **Height/Weight** | Outside of guidelines = DEC<br><br>Refer to height & weight chart on page 16 |
| **Hemochromatosis:** A disorder that causes the body to absorb excess iron, which accumulates in the liver, pancreas, heart, and other organs. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Hemophilia:** Excessive hemorrhage and bleeding due to defective blood clotting mechanism. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Hemorrhoids:** Varicose veins in the anal canal. This common impairment is usually associated with conditions that increase the local venous pressure, such as straining at stool, pregnancy or disorders causing portal hypertension (cirrhosis). | Unoperated, mild, treated with suppositories or minimal symptoms = STD<br><br>Operated, fully recovered = STD<br><br>Unoperated, bleeding, medical attention required = 1 Point |
| **Hepatitis:** Inflammation of the liver.<br><br>**Applicants must provide a negative SVR blood test that is less than one year prior to the application date (at the applicant's expense).** | **Hepatitis A**<br>Diagnosed more than 6 months, fully recovered, normal liver enzymes = STD<br>Has seen a Dr. more than twice in the last year = 1 Point<br>Diagnosed less than 6 months = PP<br><br>**Hepatitis B**<br>Any history with the condition, regardless of timeframe and severity = DEC<br>***Always decline, regardless of time frame***<br><br>**Hepatitis C (must provide negative test results & confirm no diagnosis of cirrhosis)**<br>SVR test negative/not detectable = STD<br>Current or currently being treated = DEC<br><br>***Does not qualify for the Critical Illness rider or plan*** |
| **Hepatomegaly (enlargement of the liver):** A liver palpable on deep inspiration more than 3 cm (1 to 2 fingerbreadths) below the right costal margin is likely to be abnormal. A hard nodular irregular liver is almost certainly abnormal, whereas a soft smooth liver is probably normal. Failure to palpate the liver does not necessarily mean that it is normal. In cirrhosis, the liver may be shrunken and impalpable. | **Cause Unknown, normal liver enzymes, no alcohol criticism**<br>1 - 2 fingerbreadths, 3 cm or less = STD<br><br>**Cause known** = IC<br>3 fingerbreadths or more than 3 cm = DEC |
| **Hernia (Hiatal, Inguinal or Umbilical Hernia):** A rupture or bulging of an organ through all or part of its retaining structure. | Operated, fully recovered = STD<br><br>Unoperated, surgery is not recommended and has seen a Dr. less than twice in the last year = STD<br><br>Unoperated and surgery not recommended and has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP |
| **Herpes, Genital:** An inflammatory disease of the genitals caused by the herpes virus. | If HIV Negative = STD |
| **Hip Replacement** | Refer to joint replacement |
| **Hirschsprung's Disease (Megacolon):** A congenital condition causing an abnormally large colon. | Operated, fully recovered = STD<br><br>Unoperated = DEC |

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| **Histoplasmosis:** A systemic fungal infection. It can involve skin, lungs, spleen, and liver.<br><br>**Progressive Disseminated Histoplasmosis** | **<u>Histoplasmosis</u>**<br>Fully recovered = STD<br><br>**<u>Progressive Disseminated Histoplasmosis</u>**<br>Diagnosed more than 5 years = STD<br>Diagnosed between 3 - 5 years = 1 Point<br>Diagnosed less than 3 years = DEC |
| **HIV Virus:** Is the virus that causes acquired immune deficiency syndrome (AIDS). HIV weakens your immune system by destroying your T-cells until you are unable to fight off even minor illnesses. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Hodgkin's Disease (Lymphoma):** Is a type of cancer that affects the lymphatic system. The lymphatic system is part of the body's germ-fighting and disease-fighting immune system. Hodgkin lymphoma begins when healthy cells in the lymphatic system change and grow out of control. | DEC<br><br>***Always decline, regardless of time frame***<br><br>Also refer to Non-Hodgkin's Lymphoma |
| **Hospitalizations** | Also refer to diagnosis of actual condition, some conditions will be PP if in the past year and others might be declined.<br><br>Less than 3 times in the past year = IC<br><br>More than 3 times in the past year = DEC |
| **Huntington's Chorea (HC):** Present in parent, no evidence in applicant aged 56 or older is usually issued standard. | HC present in parent, no evidence in applicants older than age 56 = STD<br><br>HC present in parent, no evidence in applicants less than age 56 = DEC<br><br>Huntington's chorea (HC) = DEC |
| **Hydrocele:** A cyst on the covering of the testes. | Operated, fully recovered = STD<br><br>Unoperated = PP |
| **Hydrocephalus:** A condition marked by abnormal accumulation of fluid in the cranial vault, enlarged head, and prominent forehead. | DEC |
| **Hydronephrosis:** Prolonged presence may lead to atrophy of the kidney. Congenital hydronephrosis is usually bilateral. | Diagnosed more than 2 years = STD<br>Diagnosed between 6 months - 2 years = 2 Points<br><br>History of unilateral, cause corrected, normal urine, diagnosed less than 6 months = PP<br><br>Bilateral or congenital hydronephrosis, mild, resolved = IC<br><br>Bilateral or congenital hydronephrosis, severe = DEC<br><br>Present = DEC |
| **Hydroureteronephrosis:** Refers to the swelling of both the ureter and kidney, caused by a blockage that prevents urine from draining properly from the kidney to the bladder. This condition can lead to the buildup of urine and pressure within the kidney, potentially causing damage if left untreated. | Treated and fully recovered more than 1 year = STD<br><br>Present and/or treated with stents or urethroplasty within 1 Year = PP<br><br>Currently has stents = DEC<br><br>Treated with appendicovesicostomy = DEC |
| **Hypercholesterolemia (High Cholesterol):** Lipid levels are important to measure because of the increased risks of coronary heart disease, cerebrovascular disease and peripheral vascular disease.<br><br>*NOTE: For Triglycerides, please look under the T's.* | STD |
| **Hyperthyroidism:** Also known as an overactive thyroid. | Refer to thyroid disorders |

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| **Hypoglycemia:** Low blood sugar. | Fasting or non-fasting = > 45 mg/dL = STD<br><br>Fasting < 45 mg/dL = PP |
| **Hypothyroidism:** Is a condition in which the body lacks sufficient thyroid hormone. | Refer to thyroid disorders |
| **Immunodeficiency Disorder *(*other than AIDS or ARC)** | DEC |
| **Infant/Newborn** | ***Must be 30 days old and healthy at the time of submitting application.*** |
| **Infertility:** The inability to conceive after one year of regular, unprotected sexual intercourse, or after six months for women over 35. | If no longer receiving treatments and had a tubal ligation or hysterectomy or age 50 and older = STD<br><br>In childbearing years (under age 50) = 2 points |
| **Intellectual Disability:** A condition characterized by impaired intellectual function, which interferes with the ability to cope with everyday activities. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Irritable Bowel Syndrome (IBS):** Is a chronic gastrointestinal disorder that affects the large intestine, causing symptoms like abdominal pain, cramping, bloating, and changes in bowel habits (diarrhea, constipation, or both). It's a functional disorder, meaning there's no visible damage or disease in the digestive tract. | Mild, under control, has seen a Dr. less than twice in the last year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point |
| **Joint Replacements (Ankle, Elbow, Hip, Knee, Shoulder, Wrist, etc.)** | Operated, fully recovered for at least 12 months = STD<br><br>Operated, fully recovered for at least 12 months, but still taking medication = 2 Points<br><br>Surgery in the past 12 months = 2 Points<br><br>Surgery recommended = PP<br><br>Current use of blood thinner = DEC<br><br>***Chronic joint conditions do not qualify for Specified Disease plan if within the last 10 years or the Enhanced Accident if within the last 12 months.*** |
| **Kawasaki Disease:** It is significant because of the risk of heart disease and aneurysms of the coronary arteries. | Diagnosed more than 2 years, no heart disease, fully recovered = STD<br><br>Diagnosed less than 2 years = DEC |
| **Kidney Cancer/Renal Cell Carcinoma:** Occurs when malignant cells grow uncontrollably in the kidneys. Most kidney cancers are renal cell carcinomas, developing in the kidney tubules. Symptoms, when present, can include blood in the urine, flank pain, and a lump in the side or lower back. Many cases are discovered during unrelated imaging tests. | Fully recovered and must be cancer free and treatment free with normal kidney function, at least 5 years = STD<br><br>Less than 5 years = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Kidney Disease/Chronic Kidney Disease (CKD)/Polycystic Kidney Disease:** A condition which occurs when one suffers from gradual loss of kidney function.<br><br>**Renal Failure:** Failure of the kidney to perform its essential functions. | **Chronic Kidney Disease (CKD)**<br>Stages 1 – 2 = STD<br>Any stage with diabetes = DEC<br>With use of catheter = DEC<br>Stages 3 - 4 = DEC<br><br>**Any stage with a history of Diabetes** = DEC<br>**Acute Kidney/Renal failure** = IC<br>**Chronic Kidney/Renal failure** = DEC<br>***Always decline, regardless of time frame***<br>**Currently has stents** = DEC<br>**Polycystic Kidney Disease** = DEC |

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| **Kidney Infections/Urinary Tract Infections (UTI)**<br><br>**Kidney/Renal Abscess:** Is a localized infection within the kidney tissue, forming a pocket of pus. It's often a complication of a urinary tract infection or can develop from an infection spreading from another part of the body. | <u>**Kidney & Urinary Tract Infections**</u><br>2 attacks or less within a year, normal urinalysis, fully recovered = STD<br>Has seen a Dr. more than twice in the last year = 1 Point<br><br><u>**Renal Abscess**</u><br>Fully recovered more than 6 months = STD<br>Sees a Dr. more than twice per year = 1 Point<br>Present - 6 months = PP<br>Abnormal urinalysis = PP until normal |
| **Kidney Stones:** Abnormal mineral collections (mainly calcium) that form in the kidney, ureter or bladder. Kidney stones are caused by infection, defective drainage, partial obstruction, congenital malformation or a metabolic or endocrine abnormality such as gout or hypercalcemia. | 2 attacks or less within a year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Currently has a kidney (ureteric/ureteral) stent = DEC |
| **Knee Disorders/Injuries:** ACL tear, fracture, meniscus tear, sprain, strain, torn ligaments and water on the knee. | Operated, fully recovered = STD<br><br>Unoperated = 1 Point<br><br>Surgery recommended = PP<br><br>***Chronic joint conditions do not qualify for Specified Disease plan if within the last 10 years or the Enhanced Accident if within the last 12 months.*** |
| **Knee Replacement** | Refer to joint replacements |
| **Leiomyomas/Myomas of the Uterus (also known as fibroids):** Are benign smooth muscle tumors that can grow in the uterus. They are the most common pelvic neoplasm in females and are not cancerous. | Under control, has seen a Dr. less than twice in the last year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP |
| **Leukemia:** A serious disease of the blood-forming organs, resulting in an excessive number of white blood cells. Cancer of blood-forming tissue such as bone marrow. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Lipoma or Cyst:** A growth of fat cells in a thin, fibrous capsule, usually found just below the skin. | Unoperated, stable, surgery not recommended, has seen a Dr. less than twice in the last year = STD<br><br>Surgically removed, fully recovered = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP |
| **Liver Abscess:** Is an infrequent finding in which an external bacterial organism invades the liver and causes an abscess. | Diagnosed more than 6 months ago, fully recovered = STD<br><br>Present to 6 Months = PP |
| **Lou Gehrig's Disease (ALS)** | Refer to ALS |
| **Lung Abscess:** A lesion of the lung accompanied by necrosis of lung tissue. It can result from aspiration of foreign material, carcinoma, or pneumonia, can occur as single lesions or might be multiple, unilateral, or bilateral. Antibiotic therapy is usually curative with surgical treatment of the obstruction performed when possible. | Diagnosed more than 6 months ago, cause known, fully recovered = STD<br><br>Less than 6 months = PP<br><br>Pulmonary function impaired = PP |
| **Lupus (Systemic Lupus Erythematosus SLE):** Is a chronic autoimmune disease where the body's immune system mistakenly attacks its own tissues and organs, leading to inflammation and damage. | Refer to collagen diseases/disorders |

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| **Lyme Disease:** Symptoms include recurrent symmetrical arthritis involving a few large joints. The cause is a wood tick carrying spirochete (a spiral bacterium). Lyme disease usually begins in the summer with erythema accompanied by fever, headache, regional lymphadenopathy and migratory muscular pain and arthritis. | History of, fully recovered = STD<br><br>Present = PP |
| **Lymphadenitis:** An inflammation of a lymph node. | Cause known, single node diagnosed as reactive = STD<br><br>Others = IC<br><br>Multiple nodes involved = PP until fully recovered and cancer ruled out. |
| **Macular Degeneration** | Refer to eye conditions |
| **Lynch Syndrome** | IC |
| **Marijuana:** Is probably the most used illicit drug. Its use adversely affects mortality or morbidity, and some patterns of marijuana use indicate a potential for excess risk. | **Medical Marijuana**<br>Must be prescribed by a doctor and approved in the state where the applicant resides. We will require medical records to indicate what condition is being treated.<br><br>Will be issued with tobacco rates.<br><br>**Recreational/Current use (regardless if it is state approved)** = DEC |
| **Melanoma Skin Cancer:** The primary risk factor is sun exposure in fair skinned individuals who have a propensity to burn rather than tan. A prior history of melanoma, the presence of multiple dysplastic nevi and a family history of dysplastic nevi or malignant melanoma are all additional risk factors.<br><br>Clark Level 1 = confined to the epidermis CLARK LEVEL 2 = invades the upper dermis CLARK LEVEL 3 = invades the dermis but not the reticular (lower dermis)<br>Clark Level 4 = invades the reticular dermis<br>Clark Level 5 = invades the subcutaneous fat | **Single Tumor**<br>Normal blood studies, no metastasis or organs affected, no lymph nodes affected, has been cancer free and treatment free at least 5 years, and fully recovered = 1 Point<br><br>Diagnosed less than 5 years = DEC<br><br>**Multiple tumors or occurrences** = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Meniere's Disease:** Results from increased pressure in the membranous labyrinth and is of unknown cause. It is characterized by attacks of severe vertigo tinnitus and hearing loss occurring several times in a few weeks. | Fully recovered = STD<br><br>Present = 1 Point |
| **Mental Nervous Disorders:** Common disorders include but are not limited to ADD, ADHD, anxiety, bipolar, depression, obsessive compulsive disorder OCD, panic attacks, psychosis, post-traumatic stress disorder PTSD, schizophrenia, etc.). is a condition that affects a person's thinking, feeling, mood, and behavior. It can range from mild to severe and impact daily functioning. These disorders are characterized by disturbances in cognition, emotional regulation, or behavior, often causing distress or impairment. These conditions affect a person's thinking, feeling, mood, and behavior. It can range from mild to severe and impact daily functioning. These disorders are characterized by disturbances in cognition, emotional regulation, or behavior, often causing distress or impairment. | **ADD/ADHD**<br>Not affecting school or activities = STD<br>More than 4 Dr. visits annually = 1 Point<br><br>**Anxiety/Panic Attacks**<br>Not affecting school or activities = STD<br>More than 4 Dr. visits annually = 1 Point<br><br>**Bipolar, Depression, Obsessive Compulsive Disorder OCD, Psychosis, Post-Traumatic Stress Disorder PTSD, Schizophrenia, etc.**<br>Well controlled, gainfully employed (or student), no hospitalization, sees a Dr. less than twice per year = STD<br><br>Well controlled, gainfully employed (or student), no hospitalization, sees a Dr. more than twice per year = 1 Point<br><br>Well controlled, taking 3 or 4 medications and/or hospitalized at least once for the condition more than 1 year ago, gainfully employed (or student) = 2 Points<br><br>If hospitalized less than 1 year ago = PP<br><br>Suicide attempt = DEC ***(Always decline, regardless of time frame)***<br>Suicidal Ideations = IC<br><br>More than one hospitalization or not well controlled or taking 5 or more medications or disabled or receiving disability = DEC |

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| **Migraines:** A common neurological disorder characterized by recurrent headaches, often with sensitivity to light and sound, and potentially nausea. | Controlled, sees a Dr. less than twice per year = STD<br><br>Controlled, sees a Dr. more than twice per year = 1 Point |
| **Miscarriage:** A spontaneous abortion. Single episodes of abortion can usually be disregarded. Multiple abortions should be investigated to determine whether a diagnosis of incompetent cervix has been made. | **<u>In childbearing years (under age 50)</u>**<br>Single miscarriage = STD<br>Two or more miscarriages = 2 Points<br><br>**<u>Age 50 and above</u>** = STD |
| **Mitral Valve Prolapse** | Refer to cardiovascular disorders |
| **Moersch-Woltman Syndrome (Stiff Person Syndrome/SPS):** Is a rare neurological disorder characterized by fluctuating muscle stiffness and painful spasms, often triggered by stimuli like noise or touch. It primarily affects the trunk and limbs, and can lead to falls, posture problems, and gait disturbances. The condition is thought to be autoimmune, affecting the central nervous system. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Multiple Myeloma:** Is a cancer that develops from plasma cells, a type of white blood cell in the bone marrow. | DEC<br><br>***Always decline, regardless of time*** |
| **Multiple Sclerosis (MS):** A chronic disease characterized by hardened patches of brain or spinal cord. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Muscular Atrophy, Progressive**; **Muscular Dystrophy:** Progressive wasting of muscle. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Myasthenia Gravis:** Muscular fatigue and weakness of unknown cause. | DEC |
| **Myelofibrosis (Primary) (PMF):** A type of Myeloproliferative disorder and is a rare, chronic cancer where bone marrow fibrosis (scarring) disrupts normal blood cell production, leading to anemia, an enlarged spleen, and other complications. It's a type of myeloproliferative neoplasm**.** | DEC<br><br>***Always decline, regardless of time frame*** |
| **Myeloproliferative Neoplasms/Disorder (MPN):** Are blood cancers caused by changes in the stem cells inside bone marrow, the tissue that makes blood cells. These changes cause the body to make too many blood cells. This excess can be any type of blood cell - white, red, or platelets.<br><br>Classic MPNs include polycythemia vera, essential thrombocythemia, primary myelofibrosis, and chronic myelogenous leukemia. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Myxedema** | Refer to thyroid disorders |
| **Narcolepsy:** Episodes of sleep occur during the day because of an irresistible urge characterizes narcolepsy. | **<u>No attacks</u>**<br>Controlled with medication, sees a Dr. less than twice per year = STD<br><br>**<u>Mild attacks</u>**<br>Good response to medication, no hazardous occupations or driving history criticism.<br><br>Diagnosed more than 5 years = 1 Point<br>Diagnosed between 1 - 5 years = 2 Points<br>Diagnosed less than 1 year = PP |

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| **Narcotic pain medication (Chronic Use):** Narcotic pain medications used for acute situations or on occasion may be acceptable depending on the underlying cause.<br><br>Common narcotic pain medications include, but are not limited to: Tramadol, Hydrocodone, Oxycodone, Morphine, and Acetaminophen with codeine. | Within 3 years = DEC<br><br>Regularly using narcotic pain medication to control pain or make it through daily activities = DEC |
| **Nephrectomy:** Surgical removal of a kidney. | Surgically removed due to benign tumor, congenital abnormality, kidney donor or trauma and fully recovered and the other kidney is normal = STD<br><br>Surgically removed due to disease other than cancer and the other kidney is normal:<br><br>More than 3 years = 1 Point<br><br>Less than 3 years = DEC |
| **Nephritis (Bright's Disease):** Glomerulonephritis refers to disease processes in glomerular injury and inflammation. Glomeruli are only able to respond to damage in a finite number of ways which lend themselves to clinical entities such as acute glomerulonephritis, the nephrotic syndrome, rapidly progressive glomerulonephritis, or asymptomatic urinary abnormalities. | **<u>Acute (1 attack/episode, fully recovered)</u>**<br>More than 3 years since the last attack/episode = STD<br>Fully recovered between 1 - 3 years since the last attack/episode = 2 Points<br>Fully recovered less than 1 year since the last attack/episode = PP<br><br>**<u>Chronic (2 attacks/episodes, fully recovered)</u>**<br>More than 5 years since the last attack/episode = STD<br>Between 3 – 5 years since the last attack/episode = 3 Points<br>Less than 3 years since the last attack/episode = PP<br><br>**<u>Chronic (More than 2 attacks, fully recovered)</u>**<br>More than 10 years since the last attack = STD<br>Less than 10 years since the last attack = DEC<br><br>**<u>All others (Berger's, Minimal Change Disease, IgA Nephropathy, etc.)</u>** = DEC |
| **Nephroptosis:** The downward displacement of one or both kidneys. | **<u>Unoperated</u>**<br>No symptoms and surgery not recommended = STD<br><br>**<u>Operated, fully recovered</u>**<br>More than 1 year = STD<br>Less than 1 year = 1 Point |
| **Nephrotic Syndrome:** Is a kidney disorder where the kidneys leak excessive protein into the urine. A key symptom during attacks is increased swelling, especially in the legs, ankles, feet, and around the eyes. Most often is chronic but can have acute phases. | **<u>Acute (1 attack/episode)</u>**<br>More than 3 years since the last attack/episode = STD<br>Between 1 - 3 years since the last attack/episode = 2 Points<br>Less than 1 year since the last attack/episode = PP<br><br>**<u>Chronic (2 attacks/episodes)</u>**<br>More than 5 years since the last attack/episode = STD<br>Between 3 - 5 years since the last attack/episode = 2 Points<br>Less than 3 years since the last attack/episode = PP<br><br>**<u>More than 2 attacks</u>** = DEC |
| **Neuritis/Neuralgia:** Refers to benign uncomplicated neuritis or neuralgia characterized by pain and paresthesia in a localized area of the body due to trauma or minor infectious process. Symptoms last for a few days to a few weeks. Common causes can also include autoimmune diseases, such as multiple sclerosis; infection, either bacterial, such as leprosy, or viral, such as varicella zoster; post-infectious immune reactions, such as Guillain-Barré syndrome; or a response to physical injury, as frequently seen in sciatica. | **<u>Cause unknown, recurrent episodes, fully recovered</u>**<br>More than 2 years since the last episode = STD<br>Less than 2 years since the last episode = PP<br><br>**<u>Cause known, fully recovered</u>** = IC<br><br>**<u>Present</u>** = PP |
| **Neurofibromatosis (Von Recklinghausen's Disease):** A condition marked by various size tumors on peripheral nerves, muscles, bones and skin. | DEC |

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| **Neuropathy (Charcot-Marie-Tooth Disease, Peripheral, Polyneuritis, Polyneuropathy):**<br>Diseases of the peripheral nerves produce muscular weakness and atrophy of the muscles supplied by the affected nerves and loss of sensation. The causes of peripheral neuropathy and polyneuritis are many and varied. They range from mechanical causes producing pressure on nerves to toxic agents such as heavy metals and organic compounds to metabolic disturbances such as diabetes mellitus, nutritional deficiencies, and alcoholism to malignant neoplasms and infectious diseases. | **Peripheral Neuropathy**<br>Cause known, fully recovered, single episode = STD<br>Cause unknown = IC<br>Cause unknown, fully recovered, single episode, diagnosed more than 2 years ago = 1 Point<br>Cause unknown diagnosed less than 2 years = PP<br>Charcot-Marie-Tooth Disease = DEC<br><br>**With any recurrence** = DEC<br>***Always decline, regardless of time frame***<br>**Caused by disease or alcoholism** = DEC<br>***Always decline, regardless of time frame***<br>**Diabetic Neuropathy** = DEC<br>***Always decline, regardless of time frame***<br>**Polyneuritis, Polyneuropathy** = DEC<br>***Always decline, regardless of time frame*** |
| **Nocturnal Myoclonus:** Known as periodic limb movements of sleep (PLMS), repetitive leg and arm movements that occur during sleep, similar to restless leg syndrome. | No other underlying causes = STD |
| **Non-Hodgkin's Lymphoma (NHL):** Is a type of blood cancer that develops in the lymphatic system. It's a group of cancers that affect white blood cells called lymphocytes. Unlike Hodgkin lymphoma, NHL lacks a specific type of abnormal cell (Reed-Sternberg cells). | DEC<br><br>***Always decline, regardless of time frame*** |
| **Nursing Facility** | DEC (except for short term rehabilitation) |
| **Obsessive Compulsive Disorder (OCD):** Characterized by intrusive, unwanted thoughts (obsessions) and repetitive behaviors or mental acts (compulsions) that a person feels driven to perform. | Refer to mental nervous disorders |
| **Optic Neuropathy** | Refer to eye conditions |
| **Organ Transplant** | Recipient - Cornea = STD<br><br>Donor - Fully recovered = STD<br><br>Recipient - Major organs such as heart, kidney, lungs, etc.= DEC<br>***Always decline, regardless of time frame*** |
| **Osteoarthritis** | Refer to arthritis |
| **Osteogenesis (Brittle Bone Disease):** A group of inherited disorders characterized by fragile bones that break easily. | DEC |
| **Osteomyelitis:** Infectious inflammation of the bone. | **Single attack, fully recovered**<br>More than 3 years since the last attack = STD<br>Less than 3 years since the last attack = 1 Point<br><br>**Recurrent attacks, fully recovered**<br>More than 3 years since the last attack = 1 Point<br>Less than 3 years since the last attack = 2 Points<br><br>Present = PP<br><br>***Does not qualify for Specified Disease plan w/ this condition if within the last ten years.*** |
| **Osteoporosis/Osteopenia:** A loss of calcium in the bones. | Osteoporosis or Osteopenia = 1 Point<br><br>Severe, with crippling or with pathologic fracture(s) = DEC<br><br>***Does not qualify for Specified Disease plan w/ this condition.*** |

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| **Osteosarcoma:** A type of cancer that starts in the bone, most commonly affecting young people during their teenage years and early adulthood. It's the most common type of bone cancer in children and teens. | Fully recovered and must be cancer free and treatment free at least 10 years<br>More than 15 years = STD<br><br>Between 10 - 15 years = 1 Point<br><br>Less than 10 years = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Otitis Media** | Refer to ears |
| **Ovarian Cancer:** Is a disease where malignant (cancerous) cells form in the ovaries, which are part of the female reproductive system. It's often difficult to detect in early stages because symptoms are vague and can be similar to other common conditions. | Diagnosed in early stages, operated, fully recovered, cancer free and treatment free at least 5 years = STD<br><br>Unoperated, radiation or chemotherapy treatments only = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Ovarian Cyst:** Cysts of every type may cause pelvic pain, menstrual dysfunction and infertility or be asymptomatic. | **Luteal, Chocolate, Follicular or Pseudo Cysts**<br>History of with spontaneous disappearance = STD<br>Operated (unilateral or bilateral oophorectomy or removal of benign cyst), fully recovered = STD<br>Present = PP<br>Malignant = DEC<br><br>**Polycystic Ovarian Disease (PCOD) or Polycystic Ovarian Syndrome (PCOS)**<br>Operated (bilateral oophorectomy), fully recovered = STD<br>Unoperated = DEC |
| **Paget's Disease of Bone:** A bone disease that is common, and its frequency increases with age. Affected bones are weakened greatly and become expanded and bent, particularly for the long bones such as the tibia, femur, humerus and radius which may develop partial fractures. | No symptoms, localized to one bone or joint = 1 Point<br><br>All others = DEC<br><br>***Does not qualify for Specified Disease plan w/ this condition.*** |
| **Pancreatic Abscess, Cyst or Tumor Pancreatitis:** Inflammatory disease of the pancreas can be divided into acute and chronic forms based on clinical, biochemical and morphologic criteria. Gallstones and alcohol either together or separately account for 80% of the cases. Other causes are viral infections, major trauma and surgery, hypertriglyceridemia, hypercalcemia and various drugs. ACUTE PANCREATITIS is characterized by abdominal pain and, in severe cases, hypovolemic shock. Frequent complications include abscess and pseudo cyst formation. CHRONIC PANCREATITIS is characterized by fat malabsorption, impaired glucose tolerance and intraductal glandular infiltration. | **Acute (1 attack, not due to alcohol)**<br>More than 3 years since the last attack = STD<br>Between 1 - 3 years since the last attack = 1 Point<br>Less than 1 year since the last attack = PP<br><br>**Chronic (more than 1 attack, not due to alcohol)**<br>More than 8 years since the last attack = STD<br>Between 5 - 8 years since the last attack = 1 Point<br>Less than 5 years since the last attack = DEC<br><br>**Acute or Chronic due to alcohol** = DEC |
| **Pancreatic Cancer:** Is a disease where malignant cells form in the tissues of the pancreas, a gland located behind the stomach that aids in digestion and blood sugar regulation. It is a serious and often deadly cancer, with a poor prognosis, particularly for adenocarcinoma, the most common type. | Diagnosed in early stages, operated, fully recovered, cancer free and treatment free at least 5 years = STD<br><br>Unoperated, radiation or chemotherapy treatments only = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Panic Attacks:** Are sudden episodes of intense fear that trigger severe physical reactions when there is no real danger or apparent cause. | Refer to mental nervous disorders |
| **Pap Smear (Papanicolaou) Test:** Is a routine diagnostic procedure performed to detect cervical cancer or the extent of dysplasia (abnormal cells). | **Test Results**<br><br>Pap smear results grade 1 = STD<br><br><br>Continued on the following page |

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| **Pap Smear (Papanicolaou) Test Continued**<br><br>**<u>The result of the pap smear is expressed in grades</u>:**<br>Grade 1: No abnormal cells can be detected.<br>Grade 2: Atypical cells but no cancer cells present or CIN 1.<br>Grade 3: Cytology suggestive of, but not conclusive for, malignancy. Consistent with cervical dysplasia, moderate.<br>Grade 4: Cytology is strongly suggestive of carcinoma in situ or severe dysplasia.<br>Grade 5: Cytology is conclusive for malignancy, specifically invasive carcinoma in situ. | Pap smear grade 2, 3 or 4 = PP until normal pap smear results<br><br>Pap smear results class 5 within 3 years = DEC |
| **Paralysis:** Is loss or impairment of motor function in a part of the body due to a lesion of the neural or muscular systems. | **<u>Hemiplegia</u>** = DEC<br><br>**<u>Paralysis, Paresis</u>** = DEC<br><br>**<u>Paraplegia</u>** = DEC<br><br>**<u>Quadriplegia</u>** = DEC<br><br>***Always decline, regardless of time frame*** |
| **Parkinson's Disease:** Is a chronic, slowly progressive organic disease characterized by muscular rigidity, tremor, and slowness of movement and impairment of automatic movements. Its etiology is un-known. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Pelvic Inflammatory Disease:** Refers to any pelvic infection involving the upper female genital tract excluding the cervix. Recurrent episodes are associated with infertility and can be due to reinfection, adhesions or scarring of pelvic tissue. Hysterectomy is curative. | Present, unoperated, sees a Dr. less than twice per year = STD<br><br>Operated, fully recovered = STD<br><br>Present, unoperated and sees a Dr. more than twice per year = 1 Point<br><br>Surgery recommended = PP |
| **Peptic Ulcer** | Refer to ulcer |
| **Peripheral Neuropathy, Polyneuritis, Polyneuropathy** | Refer to neuropathy |
| **Peripheral Vascular Disease:** Vascular disease of the extremities involving arteries, veins, and lymphatic, Including Arteriosclerosis Obliterans, Thromboangiitis, Obliterans (Buerger's Disease), Intermittent Claudication, and Venous Insufficiency. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Pituitary Gland (Hypopituitarism or Hyperpituitarism):** The major endocrine gland and is pea-sized located at the base of the brain. It's part of the endocrine system and produces several essential hormones that regulate various bodily functions, including growth, metabolism, and blood pressure.<br><br>**Hypopituitarism = underactive**<br>**Hyperpituitarism = overactive** | Not caused by tumor, controlled and stable, sees a Dr. less than twice per year = STD<br><br>Not caused by tumor, controlled and stable and has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP<br><br>Malignant = DEC<br><br>Pituitary gland tumor, refer to information below |
| **Pituitary Gland Tumor:** Are one of the more common disorders involving the pituitary gland, and are usually benign (noncancerous), they can still lead to hormonal abnormalities, causing increased or decreased hormone production and impacting overall health. | Operated, at least 2 years fully recovered = STD<br><br>Unoperated, diagnosed more than 2 years ago, stable w/o changes, no symptoms & no medications = IC with provided medical records<br><br>Diagnosed within 2 years or malignant = DEC<br><br>Malignant brain tumors = DEC<br>***Always decline, regardless of time frame*** |

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| **Pneumonia/Pneumonitis:** Infected or inflamed lungs. | Fully recovered = STD<br><br>Present = PP |
| **Pneumothorax (Collapsed Lung):** The presence of air in the pleural cavity causing the lung to collapse. It may be spontaneous as a result of a bleb on the surface of the lung or secondary to trauma, emphysema, or a lung abscess. Once the pleural space regains its vacuum, there is very little additional risk except for the possibility of recurrence. | **Traumatic or spontaneous, recovered, 1 episode** = STD<br><br>**Recurrence within 2 years**<br>More than 1 year since the last occurrence = STD<br>Less than 1 year since the last occurrence = 1 Point<br><br>**Due to disease** = DEC |
| **Poliomyelitis:** An acute viral infectious disease occurring sporadically or in epidemics. It is characterized by fever, sore throat, headache, and vomiting often with stiffness of the neck and back. | Recovered, definite limp, atrophy or shortening of one extremity: only, no spine involvement, no further treatment = STD<br><br>Recovered but more than one limb involved marked deformity, or spine involvement = DEC<br><br>Present = DEC |
| **Polycystic Kidney Disease:** A kidney composed of numerous cysts. | DEC |
| **Polycystic Ovarian Disease/Syndrome (PCOS or PCOD)** | Operated, bilateral oophorectomy, fully recovered = STD<br><br>Unoperated = DEC |
| **Polycythemia:** A type of Myeloproliferative disorder and is a type of blood cancer. An excess of red blood cells. There are two types, vera and secondary.<br><br>**Secondary:** The number of red blood cells (RBCs) is increased because of an underlying condition. Common causes are sleep apnea, smoking, high altitude, lung or heart condition, etc.<br><br>**Vera (PV):** Is a chronic blood cancer characterized by the bone marrow producing too many red blood cells, which can lead to thicker blood and an increased risk of blood clots. | **Secondary Type**<br>The underlying cause is known and has been treated, fully recovered, normal blood test results = STD<br><br>Present = PP<br><br>**Vera** = DEC<br><br>***Always decline, regardless of time frame*** |
| **Polymyalgia Rheumatica:** An inflammatory disorder that causes widespread muscle aching and stiffness, primarily in the shoulders, upper arms, neck, thighs, and hips. | Refer to collagen diseases/disorders |
| **Polyneuritis:** Also known as polyneuropathy is a condition where multiple peripheral nerves throughout the body malfunction simultaneously. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Porphyria:** A group of inherited disorders that is characterized by an abnormality of porphyrin metabolism. The symptoms include liver impairments such as cirrhosis and hepatitis, photosensitivity, and neurological disorders. | DEC |
| **Postural Orthostatic Tachycardia Syndrome (POTS)** | Refer to cardiovascular disorders |
| **Pott's Disease:** Also known as spinal tuberculosis, is a form of spinal tuberculosis where the tuberculosis bacteria infects the spine. | Treated, fully recovered = STD<br><br>Current symptoms and/or surgery recommended = DEC |
| **Pregnancy** | If anyone in the household is pregnant, *even if they are not on the policy*, we cannot offer coverage. For example, if a woman is pregnant and not on the plan, we *cannot offer anyone* in the household coverage. |

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| **Prostate Cancer:** Is a type of cancer that develops in the prostate gland. It's one of the most common cancers in men, and while it often grows slowly and can be successfully treated. | Fully recovered and must be cancer free and treatment free at least 5 years = STD<br><br>Less than 5 years = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Prostatic Hypertrophy:** A common disorder in men over the age of 50 and is characterized by the presence of discrete nodules in the para-urethral region of the prostate. When sufficiently large, these nodules compress and narrow the urethra, causing partial and sometimes complete obstruction of urinary flow. Symptoms of obstruction include frequency of urination, nocturia, difficulty starting and stopping the urinary stream, diminished force of the urinary stream and painful urination (dysuria). Only 5-10% of men require surgical relief, and those who don't require surgery have few symptoms other than having to use pharmacological agents to shrink the prostate. Surgery, if needed, requires removal of part or all of the prostate by transurethral prostatic resection (TURP). | **Operated, complete recovery**<br>Prostatectomy, no evidence of cancer = STD<br><br>**Present, adequately investigated, unoperated**<br>Slight enlargement, normal PSA, no symptoms = STD<br><br>**Moderate enlargement or with symptoms**<br>Normal PSA = PP until normal PSA<br>PSA unknown = PP until a normal test is completed<br>PSA elevated = DEC<br>BPH with elevated serum creatinine = DEC<br><br>**Partial resection**<br>Continuing symptoms = DEC |
| **Proteinuria:** The "spilling" of abnormal amounts of protein (albuminuria is specifically albumin protein only) in the urine. Proteinuria may be found in the urine due to postural changes such as vigorous exercise or feverish conditions. | Due to a temporary condition such as exercise or dehydration, fully recovered = STD<br><br>Due to diabetes = PP until normal results<br><br>Due to HBP = PP until normal results<br><br>Due to other conditions or diseases = IC<br><br>Due to kidney disease = DEC |
| **PSA Abnormalities (Prostatic Specific Antigen):** PSA tests are used to screen for prostate cancer. PSA is the most widely used screening tumor marker currently used in clinical medicine. | PSA normal = STD<br><br>PSA elevated = PP |
| **Psoriasis:** Is a chronic, autoimmune skin disease characterized by red, itchy, scaly patches on the skin. | Well controlled, no evidence of psoriatic arthritis<br>or any other immune disorders, sees a Dr. less than twice per year = STD<br><br>Well controlled, no evidence of psoriatic arthritis<br>or any other immune disorders, sees a Dr. more than twice per year = 1 Point |
| **Psoriatic Arthritis** | Refer to arthritis |
| **Psychosis:** A mental state where a person loses touch with reality, experiencing hallucinations. | Refer to mental nervous disorders |
| **Pulmonary Embolism or Infarction:** Blood clot lodging in the pulmonary artery. | Fully recovered, at least 1 year = STD<br><br>Fully recovered, less than 1 year = DEC<br><br>Currently taking blood thinner = DEC |
| **Pulmonary Stenosis:** The backflow of blood from the left ventricle into the left atrium due to insufficiency of the mitral valve. | Refer to cardiovascular disorders |
| **Pyelitis or Pyelonephritis:** Inflammation of the renal pelvis, or kidney and renal pelvis. | DEC |
| **Pyloric Stenosis:** A narrowing of the pylorus (located between the stomach and duodenum). | History of and fully recovered = STD<br><br>Present = DEC |

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| **Quadriplegia:** The paralysis of all four limbs. | Refer to paralysis |
| **Raynaud's Disease/Syndrome (Raynaud's Phenomenon):** Is characterized by bilateral pallor and numbness of the extremities induced by cold or excitement, usually of the upper limbs, and occurring in various degrees of severity. | Mild, few consults or incidental finding = STD<br><br>Moderate to severe, frequent consultations with complaints and underlying reasons developed = 2 Points |
| **Rectocele:** Commonly occur together and are almost always the result of trauma at childbirth. A cystocele is the protrusion of the urinary bladder into the vagina. A rectocele is a herniation of the rectum. | Operated, fully recovered = STD<br><br>Present = 1 Point |
| **Regional Ileitis:** A chronic inflammatory disease which may occur anywhere in the GI tract but is most common in the small bowel and colon (where it is sometimes called Crohn's colitis or Granulomatous Colitis). | **<u>History of, 1 attack w/treatment, fully recovered, non-smoker, not underweight</u>**<br>More than 10 years = STD<br>Between 3 - 10 years = 2 Points<br>Less than 3 years = DEC<br><br>**<u>History of, 2 - 3 attacks w/treatment, fully recovered, non-smoker, not underweight</u>**<br>More than 10 years since the last attack = 2 Points<br>Less than 10 years since the last attack = DEC<br><br>**<u>Smokers, underweight, more than 3 attacks *or* poor response to treatment</u>** = DEC |
| **Reiter's Syndrome** | Refer to arthritis |
| **Renal Abscesses** | Refer to kidney infections/urinary tract infections |
| **Renal Cell Carcinoma** | Refer to kidney cancer |
| **Renal Dialysis-Renal Failure/Renal Insufficiency** | Refer to kidney disease/chronic kidney disease (CKD) |
| **Residency** | Must have lived in the U.S. for at least 2 years, have social security number (SSN) or individual taxpayer identification number (ITIN). |
| **Respiratory Distress Syndrome** | DEC |
| **Restless Leg Syndrome (RLS):** Also known as Willis-Ekbom disease, is a neurological disorder characterized by an overwhelming urge to move the legs. | No other underlying causes = STD |
| **Retinitis** | Refer to eye conditions |
| **Retinopathy** | Refer to eye conditions |
| **Rheumatic Fever:** Acute fever and joint discomfort sometimes resulting in cardiac involvement. | **<u>History of, fully recovered, no evidence of heart damage</u>**<br>More than 5 years = STD<br>Between 1 - 5 years = 2 Points<br>Less than 1 year = PP<br>Present = DEC<br><br>**<u>With Brain, Cardiac or Spinal Cord Damage</u>** = DEC |
| **Rheumatoid Arthritis** | Refer to arthritis |

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| **Sarcoidosis or Boeck's Sarcoid:** A chronic inflammation of lungs, liver, or other organs, usually with involvement of the lymph glands. | **History of, fully recovered and current chest x-ray negative**<br>Recovered more than 1 year = STD<br>Recovered less than 1 year = PP<br>Present = DEC<br><br>**Chest x-ray showing hilar lymph node enlargement**<br>Diagnosed, lesion stable, more than 5 years = STD<br>No symptoms, lesion stable, diagnosed between 2 - 5 years = 2 Points<br>Diagnosed less than 2 years = PP<br>With systemic involvement, on steroids or with hypercalcemia = DEC<br>Lesion not stable = DEC |
| **Schizophrenia:** Is a chronic brain disorder that affects a person's ability to think, feel, and behave clearly. It's characterized by disruptions in thought processes, perceptions, emotional responsiveness, and social interactions. | Refer to mental nervous disorders |
| **Sciatica:** Inflammation of the sciatic nerve, usually marked by pain and tenderness along the course of the nerve through the thigh and leg. | Refer to spinal/back disorders |
| **Scleroderma:** A severe form that may become so extensive as to involve the entire skin which may lead to contractures of the limbs, progressive atrophy and progressive disability. | Refer to collagen diseases/disorders |
| **Scoliosis:** An appreciable lateral deviation in the normally straight vertical line of the spine. | Refer to spinal/back disorders |
| **Seizure Disorders:** Also known as epilepsy, are a group of neurological conditions characterized by recurrent, unprovoked seizures. These seizures are caused by abnormal electrical activity in the brain. | Caused by brain tumor or traumatic brain injury = DEC<br><br>Also refer to epilepsy |
| **Shoulder Replacement** | Refer to joint replacements |
| **Shunt - Any type** | DEC<br><br>***Always decline, regardless of time frame*** |
| **Sjogren's Syndrome:** Is a chronic autoimmune disease where the body's immune system mistakenly attacks its own moisture-producing glands, primarily affecting the eyes and mouth, leading to dryness. | Mild, few consults or incidental finding under control with minor symptoms and don't have any other immune disorders such as Lupus or RA = STD<br><br>Moderate to severe, more frequent consultations with complaints & underlying reasons developed = 2 Points |
| **Skin Cancer (Basal Cell, Dermatofibrosarcoma Protuberans (DFSP) or Squamous Cell)**<br><br>**For Melanoma type of skin cancer, refer to Melanoma Skin Cancer** | Removed = STD<br><br>Present = PP<br><br>Metastasized, radiation or chemotherapy treatments, less than 5 years = DEC (treat same as internal cancers) |
| **Sleep Apnea:** Is a sleep disorder characterized by interruptions in breathing during sleep. These pauses in breathing can range from a few seconds to a minute or longer and can occur frequently throughout the night. | **Operated**<br>Fully recovered, no on-going treatment = STD<br><br>**Unoperated**<br>Has seen a Dr. less than twice in the last year = STD<br>Has seen a Dr. more than twice in the last year = 1 Point |
| **Spinal/Back Disorders**<br><br>***Chronic spinal/back/neck/joint conditions do not qualify for Specified Disease plan if within the last 10 years or the Enhanced Accident if within the last 12 months.*** | **Ankylosing Spondylitis** = DEC<br>***Always decline, regardless of time frame***<br><br>**Ankylosis (depending on location)** = IC<br><br>Continued on the following page |

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| **Spinal/Back Disorders Continued**<br><br>***Chronic spinal/back/neck/joint conditions do not qualify for Specified Disease plan if within the last 10 years or the Enhanced Accident if within the last 12 months.*** | **Degenerative Disc Disease (Herniation, Rupture or Slipped Disc)**<br>Operated, fully recovered = STD<br>Unoperated, mild symptoms, sees a Dr. less than twice per year = STD<br>Unoperated and sees a Dr. more than twice per year = 1 Point<br>Surgery recommended = PP<br><br>**Diffuse Idiopathic Skeletal Hyperostosis (DISH)** = DEC<br><br>**Osteoarthritis of the Spine (Spinal Arthritis)**<br>Has seen a Dr. in the last year and/or taking medication for this condition = 2 Points<br>Surgery recommended = PP<br><br>**Sciatica**<br>Operated, fully recovered = STD<br>Has seen a Dr. less than twice in the last year = STD<br>Has seen a Dr. more than twice in the last year = 1 Point<br>Surgery recommended = PP<br><br>**Spina Bifida (2 Types)**<br>Spina bifida occulta, no symptoms, incidental finding = STD<br>Spina bifida cystica = DEC<br>Spina bifida, symptomatic = DEC<br><br>**Spinal Curvature (Kyphosis, Lordosis, and Scoliosis)**<br>No noticeable deformity, incidental findings, no symptoms, no treatment recommended = STD<br>Noticeable posture abnormality otherwise no symptoms, no treatment recommended = 1 Point<br>Harrington rods present = 2 Points<br>Surgery recommended = PP<br><br>**Spinal Stenosis**<br>Operated, fully recovered = STD<br>Unoperated, mild symptoms, sees a Dr. less than twice per year = STD<br>Unoperated and sees a Dr. more than twice per year = 1 Point<br>Surgery recommended = PP<br><br>**Spondylitis** = IC depending on type and severity<br><br>**Spondyloarthritis (Inflammatory Type of Arthritis)** = DEC<br><br>**Spondyloarthropathy (Inflammatory Type of Arthritis)** = DEC<br><br>**Spondylosis of the spine (Osteoarthritis of the Spine)**<br>Has seen a Dr. in the last year and/or taking medication for this condition = 2 Points<br>Surgery recommended = PP<br><br>**Sprain or Strained**<br>Isolated incident, no longer must see a Dr., fully recovered = STD<br><br>**Whiplash**<br>Fully recovered = STD |
| **Squamous Cell Skin Cancer** | Refer to skin cancer |
| **Stomach/Gastric Cancer:** Is a malignant tumor that develops in the lining of the stomach. It's characterized by the abnormal growth and division of cells within the stomach's lining, potentially spreading to other parts of the body. | Fully recovered and must be cancer free and treatment free at least 5 years = STD<br><br>Less than 5 years = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Stomach Conditions** | Refer to the diagnosis |
| **Stroke** | Refer to cerebral vascular accident (CVA) |

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| **Suicide Attempt** | DEC<br><br>***Always decline, regardless of time frame*** |
| **Temporomandibular Joint (TMJ):** The joint connecting the lower jaw (mandible) to the skull can cause pain and dysfunction in the jaw and surrounding muscles. | Has seen a Dr. less than twice in the last year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP |
| **Testicle (Undescended):** Also known as cryptorchidism and is a condition where one or both testicles remain in the abdomen or inguinal canal instead of descending into the scrotum. | Operated, fully recovered = STD<br><br>Undescended or unoperated = 1 Point<br><br>Surgery recommended = PP |
| **Tetralogy of Fallot:** Is a combination of four congenital (present at birth) heart defects that affect infants and children. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Thalassemia:** Thalassemia syndromes are a heterogeneous group of disorders characterized by reduced synthesis of hemoglobin. They are characterized by chronic progressive anemia beginning in early life. | Alpha thalassemia silent or trait = STD<br><br>Beta thalassemia minor = STD<br><br>Beta thalassemia major = DEC<br><br>Beta thalassemia intermediate = DEC |
| **Thoracic Outlet Syndrome:** Is a condition where nerves or blood vessels in the thoracic outlet (the space between your collarbone and first rib) are compressed or irritated and can be caused by structural issues like an extra rib or a tight muscle, or by repetitive movements or injuries**.** | Has seen a Dr. less than twice in the last year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP |
| **Throat Cancer (Laryngeal, Pharyngeal, Squamous Cell Carcinoma in the throat):** Cancer that develops in the part of the throat that contains the voice box and vocal cords.<br><br>**Squamous Cell Carcinoma:** A type of cancer that develops in the thin, flat cells called squamous cells that line the throat and other parts of the body, including the larynx. | Fully recovered, no alcohol or tobacco use, and must be cancer free and treatment free, at least 5 years = STD<br><br>Recovered less than 5 years = Decline<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Thrombocythemia (Essential):** A specific type of thrombocythemia where the cause is often unknown and associated with genetic mutations like JAK2, CALR, or MPL. | Reactive (underlying cause is known & completely recovered) = IC<br><br>Reactive (present, cause known) = PP<br><br>Reactive (cause unknown) = DEC<br><br>Essential = DEC<br><br>***Always decline, regardless of time frame*** |
| **Thrombophlebitis:** Is inflammation of a vein associated with thrombus formation. | **1 episode, fully recovered, no varicose veins, no edema**<br>Between 3 months - 2 years = STD<br>Less than 3 months = PP<br><br>**Recurrent attacks**<br>More than 5 years since the last attack = STD<br>Between 2 - 5 years since the last attack = 1 Point<br>Less than 2 years since the last attack = PP<br><br>**Present** = DEC<br><br>**Currently taking anti-coagulant therapy (blood thinner)** = DEC |

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| **Thrombus:** Occurs when a blood clot forms either in an artery or vein. | Refer to cardiovascular disorders |
| **Thyroid Disorders (Goiter, Graves/Hyperthyroidism, Hypothyroidism, Myxedema):** A range of conditions that affect the thyroid gland, an endocrine organ in the neck responsible for producing hormones that regulate metabolism. | **<u>Hypothyroidism (under control)</u>** = STD<br><br>**<u>Myxedema (a condition characterized by severe Hypothyroidism)</u>**<br>Recently diagnosed = PP<br>History of, no residuals, adequately treated = STD<br><br>**<u>Other thyroid disorders (Goiter, Graves/Hyperthyroidism)</u>**<br>Under control, sees a Dr. less than twice per year = STD<br>Has seen a Dr. more than twice in the last year = 1 Point |
| **Tic Douloureux:** A form of facial neuralgia. | Operated, fully recovered = STD<br><br>Drug therapy only, good control = 1 Point |
| **Tobacco Usage (Including Smokeless):** Any form of tobacco or nicotine (including chewing tobacco, cigars, pipe, vaping or nicotine patches). | Current use or usage within the last 2 years will be rated with the tobacco rate. |
| **Torticollis:** Wryneck -Torsion (twisting) of the neck. | Acute, fully recovered = STD<br><br>Chronic = 1 Point<br><br>Surgery recommended = PP |
| **Tourette's Syndrome:** An abnormal condition characterized by facial grimaces, ties, and involuntary arm and shoulder. | **<u>Age 21 years and over</u>**<br>Simple tics, no coprolalia, employed, normal social functioning, no developmental or psychological disorder = 1 Point<br><br>**<u>Under age 21</u>** = DEC |
| **Transient Ischemic Attack (TIA) Carotid, Vertebrobasilar or Basilar Artery Insufficiency:** Often called a "mini-stroke," is a temporary blockage of blood flow to the brain that causes stroke-like symptoms. While symptoms typically resolve within a few minutes, TIAs are a serious warning sign that a full-blown stroke is possible. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Tremors (Action, Essential, Physiological, Dystonic, Orthostatic):** Are involuntary, rhythmic muscle contractions that cause shaking or trembling. | Well controlled, no medications = STD<br><br>Well controlled with medication = 1 Point |
| **Triglycerides:** Elevation in triglyceride values are associated with an increased risk of heart disease. | STD |
| **Ulcer-Stomach-Duodenal:** Peptic ulcers can occur on the esophagus, (usually as a result of GERD), the stomach, the pyloric canal and the duodenum. Peptic refers to pepsin or gastric juice enzymes. Erosion occurs when the mucosal surface is broken, and ulcers are formed when the mucosa is penetrated. | **<u>Operated</u>**<br>Fully recovered = STD<br><br>**<u>Unoperated</u>**<br>Has seen a Dr. less than twice in the last year, successful treatment with medication = STD<br>Has seen a Dr. more than twice in the last year = 1 Point<br>Surgery recommended = PP |
| **Ulcerative Chronic Proctitis:** Is a specific form of ulcerative colitis where the inflammation is limited to the rectum. | Under control, no hospitalization & sees a Dr. less than twice per year = STD<br><br>Under control, no hospitalization & sees a Dr. more than twice per year = 1 Point<br><br>Hospitalized for this condition in the past 12 months = DEC<br><br>Smokers, underweight, more than 3 attacks or poor response to treatment = DEC |

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| **Ulcerative Colitis:** Is a chronic inflammatory bowel disease that causes inflammation and ulcers in the lining of the colon and rectum. | DEC<br><br>***Always decline, regardless of time frame*** |
| **Ureteral or Urethral Stricture:** Narrowing of the ureter or urethra. | Treated, fully recovered more than 1 year = STD<br><br>Present and/or treated with stents or urethroplasty within 1 year = PP<br><br>Currently has stents = DEC<br><br>Treated with appendicovesicostomy = DEC |
| **Ureteritis or Urethritis:** Inflammation of the ureter or urethra. | **Acute Cystitis, Hemorrhagic Cystitis, Trigonitis, Ureteritis, Urethritis or**<br>Acute mild attacks, short duration, fully recovered each time = STD<br>Frequent attacks (more than 3 per year) or frequent medical attention required = DEC<br><br>**Cystica, Chronic or Recurrent Cystitis, Hunner's Ulcer, or Urethritis**<br>Recovered more than 5 years = STD<br>Recovered 1 - 5 years = 1 Point<br>Recovered less than 1 year = PP |
| **Urinary Incontinence:** Is the involuntary leakage of urine. | No symptoms or recommended surgery = STD<br><br>If diagnosed and symptoms in the last year = 1 point<br><br>Surgery recommended = PP |
| **Uterine Cancer/Endometrial Cancer:** Uterine cancer, also known as womb cancer, is a cancer that develops in the uterus, specifically from the lining (endometrium) or the muscle tissue (uterine sarcoma). | Fully recovered and must be cancer free and treatment free at least 5 years = STD<br><br>Less than 5 years = DEC<br><br>***Applicants do not qualify for Critical Illness rider or plan or Specified Disease plan if they have had cancer or cancer treatments within the past ten years.*** |
| **Urinary Tract Infections (UTI):** Is an infection in any part of your urinary system, including your kidneys, bladder, ureters, and urethra. | Recovered = Standard<br><br>Has seen a Dr. more than twice in the last year = 1 Point |
| **Uterine Cyst:** The most common kinds are harmless, don't cause symptoms and eventually go away without treatment. Rarely, cysts can cause complications that require your provider's attention. | Under control, has seen a Dr. less than twice in the last year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP |
| **Uterine Disorders:** A range of conditions that affect the uterus, impacting a woman's reproductive health and overall well-being. These conditions can cause a variety of symptoms, such as abnormal bleeding, pelvic pain, and infertility. | **Enlarged Uterus**<br>Due to pregnancy = DEC<br><br>**Displacement of Uterus**<br>Mild, no symptoms, no treatment, ability to conceive not in question and sees a Dr. less than twice per year = STD<br><br>Mild, no symptoms, no treatment, ability to conceive not in question and sees a Dr. more than twice per year = 1 Point<br><br>**Others** = DEC<br><br>**Uterine Prolapse, procidentia** = DEC |
| **Uterine Fibroids/Leiomyomas, Myomas:** Are benign smooth muscle tumors that can grow in the uterus. They are the most common pelvic neoplasm in females and are not cancerous. | Present, no symptoms, has seen a Dr. less than twice in the last year = STD<br><br>Has seen a Dr. more than twice in the last year = 1 Point<br><br>Surgery recommended = PP |

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| **Vaping/E-Cigarettes:** Vaping involves inhaling an aerosol (mist) produced by heating a liquid in an electronic cigarette (e-cigarette) or other vaping device. Vaping is sometimes used as a method to quit smoking, but it carries its own set of health risks. | Current use or usage within the last 2 years will be rated for tobacco use. |
| **Varicose Veins:** Are enlarged, twisted veins. Varicose veins can happen anywhere in the body but are more common in the legs.<br>Varicose veins are not usually considered a serious medical condition. But they can be uncomfortable and can lead to more serious problems. | **Present**<br>No edema or ulcer, no symptoms = STD<br>No edema or ulcer and requires support hose or treatment = 1 Point<br>Present with edema or ulcer = PP<br><br>**History of, with edema or ulcer, fully recovered**<br>More than 2 years = STD<br>Between 6 months - 2 years = 1 Point<br>Less than 6 months = PP<br>Abdominal or esophageal varices = DEC |
| **Vasculitis:** Is a group of inflammatory conditions that affect blood vessels, causing them to become swollen and damaged. This inflammation can restrict blood flow, potentially leading to organ and tissue damage. The immune system can mistakenly target the blood vessels in some cases, leading to the condition. | Refer to collagen diseases/disorders |
| **Venereal Warts/Condyloma Acuminata:** Genital warts, also known as venereal warts or condylomata acuminata, are a sexually transmitted infection caused by certain types of the human papillomavirus (HPV). These warts appear as small, flesh-colored or slightly darker bumps or growths in the genital or anal area. They are typically caused by HPV types 6 and 11, which are considered low-risk for causing cancer. | **Single episode**<br>Most recent pap smear w/normal results = STD<br><br>**Multiple episodes**<br>Less than 2 years since the last episode = 1 Point<br><br>**If present with abnormal pap smear results** = PP |
| **Ventricular Septal Defect as with ASD, VSDs** | Refer to cardiovascular disorders |
| **Vertigo:** Sensation of rotation or movement of oneself or one's surroundings (dizziness). | **Under age 45**<br>Single episode, fully recovered = STD<br><br>**Recurrent episodes when under age 45**<br>More than 2 years since the last episode = STD<br>Less than 2 years since the last episode & cause is known & fully recovered = STD<br>Less than 2 years since the last episode & cause is unknown = PP<br><br>**Over age 45**<br>Single episode, fully recovered = STD<br>More than 2 years since the last episode = STD<br>Less than 2 years since the last episode = 1 Point |
| **Von Recklinghausen's Disease/Tumor:** An inherited disorder characterized by the development of multiple neurofibromas combined with cafe au lait spots. The tumors are slow-growing and do not destroy normal tissues. Severe cases may be associated with disfigurement due to the size of the tumors. The only treatment is removal of the tumors. | DEC |
| **Whiplash:** Is a neck injury caused by a forceful, rapid back-and-forth movement of the neck, often resulting from a sudden impact like a car accident. It can damage the soft tissues of the neck, including muscles, ligaments, and nerves. Symptoms include neck pain, stiffness, headaches, and sometimes numbness or weakness in the arms. | Refer to spinal/back disorders |

# Policyholder Service Suggestions & Tips

## IMPORTANT PHONE NUMBERS AND EMAIL ADDRESSES

| Department | Phone number | Email address |
|---|---|---|
| Claims Customer Service | 888-748-3040 Ext 1319 | claimscustomerservice@neweralife.com |
| Policyholder Services | 888-748-3040 Ext 7445 | policyholderservice@neweralife.com |
| Underwriting/New Business | 888-748-3040 Ext 1199 | healthunderwriting@neweralife.com |
| Group/List Bill | 888-748-3040 Ext 1453 | listbill@neweralife.com |

### Mailing Address:
PO Box 4884
Houston, TX 77210-4884

### Fax Number:
(281) 368-7144

# Steps on how to:

### Update address, email, phone number, etc.
- The Primary Policyholder can submit their change request to Policyholder Services via email, phone, or mail. If the agent receives an email with the requested changes, the agent can forward it to Policyholder Services.

### Change checking accounts for drafts (and rest)
- We do not accept updated banking information from agents. If the agent receives a new Bank Draft Authorization form from a Policyholder, the agent can fax this information to Policyholder Services.
- If it is the same bank, but a different account number, the Primary Policyholder can call us to give the information over a recorded call.
- If it is a different bank, the Primary Policyholder will need to complete a new Bank Draft Authorization form with a voided check and return it to us. It can be faxed or mailed to Policyholder Services (mailing address and fax number listed above).
- Many Policyholders email their new Bank Draft Authorization form & voided check to policyholderservice@neweralife.com; however, this is not recommended because of the sensitive information, but we do accept it.
- When Policyholder Services receives a new Bank Draft Authorization form or updating of the account number only, Policyholder Services forwards the information to our Premium Accounting Department for updating in our system; it normally takes two or three days.

### Adding a newborn baby to an existing policy with a parent/guardian
- When Policyholder Services is notified within 31 days from birth, the baby can be added to the policy effective the date of birth.
- The Primary Policyholder can notify Policyholder Services by phone, email, or fax.
- The request will need to include the name, date of birth, and gender of the baby.
- Policyholder Services will then send a form for the policyholder to complete and return along with the amount of prorated premium required to add the baby to the policy. The letter will also indicate a deadline for sending the payment. If no payment is received within the allotted time, the file will be closed.
- Upon receipt of the prorated premium, the baby will then be added to the policy.
- If Policyholder Services is notified after 31 days from birth, the baby must be added via paper application, subject to underwriting approval (same procedure as adding a dependent).

## Adding a dependent to an existing policy with a parent/guardian

- The insured must complete a paper application for each policy.
- Indicate at the top of the application that this is an add-on and list the policy number on each application.
- The application(s) can be emailed or faxed to Policyholder Services.
- Upon receipt, it will be forwarded to our Underwriting Department to request a telephone interview (EAV'S are not sent for dependent additions).
- Upon completion of the telephone interview, it then goes through underwriting review.
- After underwriting review is completed, Underwriting sends back to Policyholder Services for processing.
- Policyholder Services sends the Insured an approval letter and requests the funds needed to add the dependent(s) to each policy requested.
- Additions are processed and made effective the next premium due date following the approval date from Underwriting (example, if Underwriting approves on 11/10th, the next premium due date is 12/1st, the addition is effective 12/1st).
- Policy Holder Services does not back date additions.
- ***If a policy has only children covered under a plan, we cannot allow any future additions to that plan.***

## Remove a dependent from an active policy

- Policyholder Services needs a written request or email from the Primary Insured with the name of person(s) to be deleted, reason for the deletion, and all policy numbers they are requesting to be deleted from.
- Removal requests can be emailed to policyholder services via email, phone or fax.
- Please note that the removal is subject to approval by underwriting, and if approved, the deletion will be processed and effective the next premium due date after receipt of the request (example, if we received request on 11/10th, the next premium due date is 12/1st, removal is effective 12/1st).
- Policyholder Services does not back date deletions.

## Cancel a policy

- Agents cannot cancel policies on behalf of their Policyholders.
- Only the Primary Policyholder can cancel.
- The Primary Policyholder can call Policyholder Services and request cancellation over a recorded line, or they can email, fax, or mail the cancellation request to Policyholder Services.
- When emailing, faxing or mailing, the Primary Policyholder needs to include all policy numbers they want to cancel and indicate any policy numbers they are keeping and need to include the reason for cancellation and the date requested for the cancellation to be effective (example, as of the paid-to-date or a specific date).
- The signature of the Primary Policyholder is required if faxing or mailing.
- When emailing the request to Policyholder Services, the email must come from the Primary Policyholder's email address that we have in the system.
- If the Policyholder emails the cancellation request to their agent, the agent can forward it to the Policyholder Services email address in a timely manner.
- If the Policyholder calls their agent to request cancellation, it is easiest for the agent to have the Policyholder call Policyholder Services directly.

## Cancel one member's policy from a group or list bill?

- It is important to note that an employer cannot cancel the Policyholder's policy. Only Primary Policyholders can cancel their coverage.
- If a Policyholder is on a "True List Bill/GBN #" and the company/employer wants a Policyholder removed from the Employer Bank Draft or List Bill, the employer can send an email to Listbill@neweralife.com and our Group/List Bill team will reach out to the Policyholder and offer for them to pay directly to continue their coverage with us.
- If the Policyholder is not on a "True List Bill/GBN #", and the employer is paying for employees' coverage and the company/ employer wants a Policyholder removed from their Employer Bank Draft, the employer can send an email to Policyholderservice@neweralife.com and we will remove the employee from the bank draft and Policyholder Services will reach out to the Policyholder and offer for them to pay directly to continue their coverage with us.
- If unsure if it is a "True List Bill/GBN #" or an employer paying for employee's coverage, it is safest to send to both Policyholderservice@neweralife.com and Listbill@neweralife.com. These two areas can determine who should handle accordingly. Both teams work very closely together.

## Modify policy(s) due to a divorce

- Policyholder Services needs a written request from the Primary Insured and the dependent stating that they are divorced. They must have been legally married, and the divorce must be finalized to split the policy(s).
- We will need the first & last pages of the Divorce Decree.
- No new application(s) are required, and underwriting does not apply.
- The letter needs to include all policies involved and the letter must be signed and dated by the Primary Policyholder and the dependent.
- If they have other dependents on the current policy(s), they will need to let us know if the dependents are remaining on the original policy(s) or moving over to the new policy(s).
- The dependent for the new policy(s) needs to provide their current address, phone number, email address, and Bank Draft Authorization form including dependent's account information to draft for the new policy.

***Frequently Asked Questions are on the following page.***

# Frequently asked questions:

## How can agents help your Policyholder Services avoid issues?

- Understanding what area or department manages which requests.
- Anything to do with pending applications, such as status, needing e-verifications resent, corrections to e-apps submitted, these requests need to be emailed to Healthunderwriting@neweralife.com.
- Policyholder Services handles everything after the "initial premium" has been paid, except for the claims.

## What should agents do in escalated situations, such as upset policyholder wanting to cancel?

- The Policyholder should be directed to call Policyholder Customer Service team at (888) 748-3040 Ext. 7445 and they are happy to assist with de-escalation. This team knows that if management involvement is needed, they are ready to step in at any time. Typically, it is a misunderstanding that can be explained and resolved.

## How can policyholder services help talk them through the escalated situation to retain the business?

- 90% of cancellations are due to Policyholders obtaining "Employer Coverage," "Turning age 65," "Other Coverage New Era" (when it is the right fit to upgrade their coverage to our newer products), or "Different Company", which we know that Policyholders shop around for the best price and coverage.
- The number of cancellations that are due to "Not Sufficient for Needs," "Claim Denied," or "Did Not Pay As Expected" has decreased over the years since agents are more educated on our products.
- When the Policyholder calls, the Claims Customer Team is explaining how the product works and educating them on how to best use the plan to their benefit, where to go, and to self-pay where there are the least out-of-pocket expenses for our Policyholders.
- Once a Policyholder has shopped around and purchased other insurance, it is hard for Policyholder Services to turn that situation around as they have already made up their mind and they are just calling Policyholder Services as a courtesy because we are drafting their bank account. If they are on direct bill, they often just let the policy lapse.
- Marketing has incorporated where they look for trends of agents moving business based on information we collect with every cancellation call.

## How do we handle this? "You can't have my checking account. I want to pay with a check."

- After the "initial premium" has been paid, the Primary Policyholder can call Policyholder Services on a recorded line to request to be removed from the bank draft or credit card and placed on direct monthly billing.
- The Primary Policyholder can also email us their request to be removed from bank draft & placed on direct monthly billing.
- Keep in mind with the HCS, Specified Disease & Catastrophic Accident policies, the Policyholder gets a premium break for being on bank draft. If they request to be placed on direct monthly billing for these products, the premium is higher for direct billing. Policyholders also get charged an additional fee over the premium for paying by credit card. Credit card payments can only be made by the Primary Policyholder and *only* on the website through the Policyholder Portal. *We cannot take credit card payments over the phone.*

## I want to pay yearly, semi-yearly or quarterly by check." What's the process for this and is there a savings for paying this way?"

- After the "initial premium" has been paid, the Primary Policyholder can call or email Policyholder Services to request a modal change. The modal change requested must coincide with the Policyholder's anniversary date (example, policy issued for 06/01/2025 initial premium paid to 07/01/2025. If the Policyholder wants to go on quarterly, the request can be effective 09/01/2025. If the Policyholder wants to go on semi-annual, the request can be effective 12/01/2025. If the Policyholder wants to pay annual, they will need to pay "11" months to coincide with the anniversary date of 06/01/26). Policyholders do get a premium break by paying direct quarterly, semi-annually or annually on the HCS, Specified Disease & Catastrophic
- Accident. There is no savings on the HCS, Specified Disease or Catastrophic Accident and direct monthly premiums are higher than paying by Bank Draft on these new plans. With older plans there is no difference in premium whether you pay by bank draft or direct.