

Life Underwriting Requirements Guide



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Life Insurance

Life Underwriting Requirements Guide

This guide will help you identify the underwriting requirements for all applications for new life business, term conversions, and insurability option riders that require evidence of insurability.

Step 1: Determine Insurance Age –

“Insurance age” is the age at the closest birthday to the Policy Date. For insurance purposes, an individual’s insurance age changes 6 months prior to his/her actual birth date. For example, if you are 40 as of the Policy Date (usually the date the policy is issued) and will turn 41 in less than 6 months, your insurance age is 41. If you will turn 41 in more than 6 months, your insurance age is 40.

Step 2: Determine Amount at Risk –

Use the sum of the base policy face amount and any riders that increase the amount of insurance.

- Term Riders (RTR, YTP, STR, SFTR and TOR)
- Life Insurance Supplemental Rider (LISR)
- Additional Insurance Rider (AIR)
- Other Insured Rider (OIR) only if OIR is on the life of the proposed insured
- Estate Preservation/Estate Protection (EPR)
- Survivorship Additional Benefits Rider (SABR)
- Supplemental Insurance Amount (SIA)
- Additional Life Insurance Rider (ALIR)

To determine the additional amount at risk under ALIR, multiply the ALIR payment by the correct multiplier for the insured’s age:

Age	Multiplier of ALIR Payment
0-19	10
20-39	5
40-69	2
70+	1

Step 3: Determine Underwriting Requirements –

Use insurance age and amount at risk to locate the requirements on the chart at right. Use the total amount at risk in all applications currently submitted to and/or issued by MassMutual within the past 12 months.

Step 4: Create Application Package –

Using age, amount, resident state, and contract state, compile the forms for your application package.

Step 5: Order Exams, Tests, and APSs –

An authorized examiner must perform all medical requirements. Contact an authorized paramed vendor to arrange appropriate exams and tests. Order appropriate attending physician statements (APSs) from EMSI* or directly from your local medical facility.

- Producers are responsible for arranging all requirements and authorizations and submitting them to the Home Office unless otherwise noted.
- Clinical Reference Laboratory (CRL) performs all lab tests (blood, urine, and oral fluids).

**See FieldNet or Life App Express for a list of paramed vendors and APS ordering information.*

Life App Express

It's everything you need for a complete and accurate application.

It's fast.

It's flexible.

It's life . . . made easy.

The correct requirements for your case, every time

Life App Express takes the complexity out of new business submissions:

- Determines insurance age, amount at risk and age/amount requirements.
- Provides a customized app package. Choose blank or pre-filled forms.
- Validates producer contract, appointment and licensing.
- Links to order exams and APSs and check variable product performance.
- Ensures quality and accuracy. Lets you work the way you want.

Start in Prism

For full pre-filling capabilities (Click "Create Application Forms")

Start at FieldNet's home page

Under New Business Checklist (Click "Life Insurance, featuring Life App Express")

Age and Amount Underwriting Requirements Guide

Amount at Risk	Insurance Age					
	0 – 16	17 – 40	41 – 50	51 – 60	61 – 70	Over 70
Under \$50,000	Nonmedical	Nonmedical Physical Meas Oral Fluids	Nonmedical Physical Meas Oral Fluids	Paramed Exam Oral Fluids	Paramed Exam Oral Fluids	Paramed Exam Oral Fluids APS
\$50,000 to \$249,999	Nonmedical	Nonmedical Physical Meas Blood /Urine MVR	Paramed Exam Blood/Urine MVR*	Paramed Exam Blood/Urine MVR*	Paramed Exam Blood/Urine MVR Rx	Paramed Exam/SR Blood/Urine Resting ECG APS MVR
\$250,000 to \$499,999	Nonmedical	Paramed Exam Blood/Urine MVR	Paramed Exam Blood/Urine MVR*	Paramed Exam Blood/Urine MVR* Rx	Paramed Exam Blood/Urine Resting ECG APS MVR	Paramed Exam/SR Blood/Urine Resting ECG APS MVR
\$500,000 to \$1,000,000	Nonmedical APS	Paramed Exam Blood/Urine MVR	Paramed Exam Blood/Urine Resting ECG MVR* Rx	Paramed Exam Blood/Urine Resting ECG MVR* Rx	Paramed Exam Blood/Urine Resting ECG APS MVR	Paramed Exam/SR Blood/Urine Resting ECG APS MVR
\$1,000,001 to \$2,000,000	Nonmedical APS	Paramed Exam Blood/Urine Telephone Insp. MVR Rx	Paramed Exam Blood/Urine Resting ECG Telephone Insp. MVR* Rx	Paramed Exam Blood/Urine Resting ECG Telephone Insp. MVR* Rx	Paramed Exam Blood/Urine Resting ECG APS Telephone Insp. MVR	Paramed Exam/SR Blood/Urine Resting ECG APS Telephone Insp. MVR
\$2,000,001 to \$3,000,000	Paramed Exam APS	Paramed Exam Blood/Urine Telephone Insp. MVR Rx	Paramed Exam Blood/Urine Resting ECG Telephone Insp. MVR Rx	Paramed Exam Blood/Urine Resting ECG APS Telephone Insp. MVR	Paramed Exam Blood/Urine Resting ECG APS Telephone Insp. MVR	Physician Exam/SR Blood/Urine Resting ECG APS Telephone Insp. MVR
\$3,000,001 to \$5,000,000	Paramed Exam APS	Paramed Exam Blood/Urine Telephone Insp. MVR Rx	Paramed Exam Blood/Urine Resting ECG APS Telephone Insp. MVR	Physician Exam Blood/Urine Resting ECG APS Telephone Insp. MVR	Physician Exam Blood/Urine Resting ECG APS Telephone Insp. MVR	Physician Exam/SR Blood/Urine Resting ECG APS Telephone Insp. MVR
\$5,000,001 to \$10,000,000	Paramed Exam APS Financials**	Paramed Exam Blood/Urine APS Written Insp. MVR Financials**	Paramed Exam Blood/Urine Resting ECG APS Written Insp. MVR Financials**	Physician Exam Blood/Urine Resting ECG APS Written Insp. MVR Financials**	Physician Exam Blood/Urine Resting ECG APS Written Insp. MVR Financials**	Physician Exam/SR Blood/Urine Resting ECG APS Written Insp. MVR Financials**
Over \$10,000,000	Paramed Exam APS Third Party**	Physician Exam Blood/Urine APS Written Insp. MVR Third Party**	Physician Exam Blood/Urine Resting ECG APS Written Insp. MVR Third Party**	Physician Exam Blood/Urine Treadmill ECG APS Written Insp. MVR Third Party**	Physician Exam Blood/Urine Treadmill ECG APS Written Insp. MVR Third Party**	Physician Exam/SR Blood/Urine Resting ECG APS Written Insp. MVR Third Party**

Underwriters may request additional requirements following review of initial application.

* Term products only.

** Additional financial information or third party financials may be requested at the underwriter's discretion.

Age and Amount Underwriting

Medical History / Exam

Nonmedical – Includes basic information about medical history. In addition to cases indicated on the chart, complete the nonmedical if submitting a MassMutual exam that is between 90 and 180-days-old or if submitting another company's Part 2/exam in place of a MassMutual Part 2/exam.

- See section K of the Part 1 Application.
- *Valid up to 6 months from the Part 1 Signature date.*

Paramed Exam – Collection of medical history and height, weight, blood pressure, and pulse rate measurements.

- Submitted on the Part 2 Application form.
- *Valid up to 6 months from the exam date.*

Physician Exam – Collection of medical history; height, weight, blood pressure, and pulse rate measurements; heart and lung evaluations; and a general physical examination.

- Submitted on the Part 2 application form.
- *Valid up to 6 months from the exam date.*

Senior Supplement (SR) – Completed in addition to the Paramed or the Physician exam. This supplement includes questions regarding activities as well as cognitive exercises and a functional screen.

- *Valid up to 6 months from the exam date.*

Medical Tests

Blood Profile and Urinalysis (Blood / Urine) – Collection of blood and urine samples, which are screened for cholesterol and other blood lipids, blood sugar, liver and kidney function, nicotine, HIV, and illegal drugs. Additional tests may be performed based on initial findings.

- Proposed Insureds are not required to fast, although an 8 – 12 hour fast is suggested.
- Producers are responsible for ensuring that Proposed Insureds sign any required HIV consent form prior to the blood draw.
- The lab sends results directly to the Home Office.
- *Valid up to 12 months from the test date.*

Physical Measurements (Physical Meas) – Collection of height, weight, blood pressure, and pulse rate measurements.

- The lab sends results directly to the Home Office.
- *Valid up to 2 years from the test date.*

Oral Fluids – The examiner places a sterile swab between the Proposed Insured's cheek and gum for at least 2 minutes to collect fluids for HIV, cocaine, and nicotine screening.

- The lab sends results directly to the Home Office.
- *Valid up to 2 years from the test date.*

Resting Electrocardiogram (Resting ECG) – Routine and painless recording of the electrical activity of the heart.

- *Valid up to 12 months from the test date.*

Treadmill Electrocardiogram (Treadmill ECG) – Exercise stress test: recording and monitoring of the electrical activity of the heart and vital signs during and after exercise. Proposed Insureds should prepare and dress for vigorous walking on a treadmill.

- *Valid up to 12 months from the test date.*

Additional Requirements

Attending Physician Statement (APS) – A copy of the Proposed Insured's medical records.

Requirement Details

- Producers/agency staff may order APSs from EMSI or directly from the medical facility. Underwriters may also order APSs.
- Ordering a necessary APS before the application is sent to underwriting can save significant time.
- When in doubt about whether to order, consult with the underwriter.
- Immediately notify the underwriter if an APS has been ordered.

RX- Pharmacy database check, search that is completed on a pharmacy database and then crosschecked against the applicant's medication and medical history information on the application. This requirement is generated at ADE and is ordered and received by the Home Office.

Telephone Inspection (Telephone Insp.) – Telephone interviews conducted by trained Home Office associates. Questions are used to verify information on the application, collect missing details, and provide supplemental information. Topics include employment, insurance in force, medical history, hobbies, lifestyle, and finances.

- The underwriter will order the interview after reviewing the application.
- The interviewer will call the Proposed Insured at the phone number on the application and make every effort to reach the Proposed Insured at the most convenient time.
- *Valid up to 2 years from the interview date.*

Important note about telephone interviews: Producers must thoroughly prepare all Proposed Insureds for telephone interviews by explaining the process and the nature of the questions. All Proposed Insureds may be called for a Telephone Inspection or a **Supplemental Health Questionnaire (SHQ)**, which is similar to a Telephone Inspection and focuses on a specific topic selected by the underwriter (such as a particular medical condition). Underwriters may order interviews for any Proposed Insured without advance notice. Proposed Insureds who are well prepared and expecting the call are much more likely to have a positive interview experience.

Written Inspections (Written Insp.) – Consumer reports on the Proposed Insured's finances, lifestyle, character, and personal reputation. The investigator may conduct telephone or in-person interviews with the Proposed Insured and other sources (such as personal and business associates, accountants and attorneys) in addition to checking public records.

- Thoroughly prepare each client by explaining the process and the nature of the information collected. Proposed Insureds who are well prepared are much more likely to have a positive inspection experience.
- Written Inspection requests are generated at Application Data Entry (ADE). It is important for agency staff to accurately enter all inspection data to avoid delays.
- Written Inspections are performed by EMSI.
- *Valid up to 1 year from the report date.*

Motor Vehicle Report (MVR) – Proposed Insured's driving history report.

- The Home Office obtains the MVR using information from Application Data Entry (ADE). It is essential for agency staff to accurately enter the driver's license number to ensure quick MVR processing.
- *Valid up to 6 months from the report date.*

Financials – Underwriter may order a financial questionnaire to be completed by the Proposed Insured after reviewing the application.

Third Party – Proposed Insured's financial information obtained from a Certified Public Accountant (CPA)/Accountant.

NOTE: All requirement expiration dates are subject to underwriter discretion.

IMPORTANT NOTE: While these requirements are typically generated by age and amount, your underwriter may at any time request additional discretionary requirements in order to properly assess the risk.



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IMPAIRED RISKS

An impaired risk may necessitate one of the following (depending on the impairment):

- A **“table” rating**. This rating is used when the risk involved is likely to be permanent. The additional premium charged to cover this risk depends on the age of the proposed insured as well as the plan of insurance. An example would be build (height, weight) concerns, and this rating is expressed as Table D, Table F, etc.
- A **“permanent flat extra”** rating is used when the hazard involved is not affected by the age of the insured and, consequently, the extra premiums will not vary with age. An example would be an aviation risk where an extra \$5.00 per thousand of insurance would be added to the premium.
- The **“temporary flat extra”** rating is used when medical impairments of a temporary nature require temporary flat extra premiums for limited periods, such as five years. An example would be colon cancer, with the rating expressed as \$5.00 per thousand for the first five years.

Some ratings can be lowered or removed if the conditions improve. You should consult with your underwriter to determine when they should be willing to reconsider a rating.

The most common impairments that may necessitate a rating are:

- CAD – coronary artery disease
- Cancer
- Crohn’s disease/Ulcerative Colitis
- Psychiatric disorders (e.g. anxiety or depression)
- DM – diabetes mellitus
- Sleep apnea
- Alcohol abuse
- Build
- Blood pressure/hypertension

BUILD CHART

Height	Avg. Wt. Women/Men	Overweight Debits for Ages 15-64			
		A	B	C	D
4'10"	115/121	153	170	185	195
4'11"	118/125	160	180	195	205
5'0"	121/130	165	185	200	210
5'1"	124/134	170	190	205	215
5'2"	127/139	175	195	215	225
5'3"	130/144	180	200	220	230
5'4"	133/148	185	210	225	240
5'5"	137/152	190	215	235	245
5'6"	140/157	200	220	240	255
5'7"	144/161	205	230	250	260
5'8"	148/166	210	235	255	270
5'9"	152/171	215	240	265	280
5'10"	156/175	220	250	270	285
5'11"	160/180	230	260	280	290
6'0"	165/185	235	265	290	300
6'1"	169/191	240	270	295	310
6'2"	173/196	250	280	300	320
6'3"	177/202	255	290	310	325
6'4"	181/207	260	295	315	335
6'5"	185/212	270	300	325	345
6'6"	189/218	280	305	330	350
6'7"	194/222	290	315	340	360
6'8"	198/229	300	325	345	365
6'9"	201/236	310	335	355	375

(weight in lbs.)

A	B	C
Overweight Debits for Age ≥65		

Height	Avg. Wt. Women/Men	Overweight Debits for Ages 15-64			
		E	F	H	L
4'10"	115/121	205	215	225	235
4'11"	118/125	210	220	230	240
5'0"	121/130	220	230	240	250
5'1"	124/134	225	240	250	260
5'2"	127/139	235	245	255	270
5'3"	130/144	240	255	265	275
5'4"	133/148	250	260	275	285
5'5"	137/152	260	270	280	295
5'6"	140/157	265	280	290	300
5'7"	144/161	275	285	300	310
5'8"	148/166	280	295	310	320
5'9"	152/171	290	305	320	335
5'10"	156/175	300	310	320	340
5'11"	160/180	310	320	330	345
6'0"	165/185	320	330	340	355
6'1"	169/191	325	335	350	360
6'2"	173/196	330	345	355	370
6'3"	177/202	340	355	365	380
6'4"	181/207	345	360	375	390
6'5"	185/212	355	370	385	400
6'6"	189/218	365	380	390	410
6'7"	194/222	375	390	400	420
6'8"	198/229	380	395	410	430
6'9"	201/236	390	405	420	440

(weight in lbs.)

D	E	H	L
Overweight Debits for Age ≥65			

UNDERWRITING FINANCIAL BASICS

Determining Insurable Interest

- In all cases, the owner of a life insurance policy:
 - ♦ Must have an expectation of economic gain in the continued life of the insured
 - ♦ May suffer an economic loss at the insured's death
- In Business Relationships:
 - ♦ Insurable interest may be created when the insured's death would cause a substantial loss to the company.

Income Replacement Guidelines

Age	Multiplier (of income)
20-35	30x
36-40	20x
41-45	14x
46-50	12x
51-59	10x
60-65	7x
66 and over	5x

Income/Premium Guidelines

Age	Income	Income	Income	Income
0-21	\$0-\$80,000 Need as related to family finances	\$80,001-\$120,000 Need as related to family finances	\$120,001-\$250,000 Need as related to family finances	>\$250,000 Need as related to family finances
22-60	5%	8%	10%	Individual Consideration
> 60	4%	6%	8%	Individual Consideration

Housewives/Househusbands

- Max = 100% of the amount of coverage on the wage earner to a maximum of \$1,000,000.

Juvenile Insurance – ages 15 days to 15 years

- Max amount of coverage for each child will be 1.25 x the highest amount on either parent.
- Parent(s), Grandparent(s), or a Trust must be named as the policy owner.
- If someone other than the parent will be the policy owner, the parent needs to sign the Life Part 1 Application on “Signature of Proposed Insured 1” line.
- All siblings should carry a like amount of coverage.
- Call your underwriter for guidance in situations outside the above parameters.

Note: New York statutes impose strict limits on the amount of insurance that can be applied for on a juvenile.

Estate Conservation

- Provides liquidity to assist with estate taxes that arise at death of an individual.
- Underwriters assume a tax rate of 55% to calculate estate tax liability
- Full disclosure of financial condition should be provided to underwriter
- Underwriters will project growth of an estate at a maximum of 7½% for a number of years, depending on the insured’s age and risk class, per the following chart:

Risk Class	Age of Insured	Years to Project Estate Growth
Standard or Better	< 50 years old	30 years
	> 50 years old	To age 80
Substandard	> 50 years old	Individual Consideration (lower)

Employer-Owned Policies

All applications for policies that are to be owned by the insured's employer, including policies owned by a trust or other ownership entity established for the benefit of the employer, must be accompanied by the "Acknowledgement and Consent to Employer-Owned Life Insurance" form (F7004), available on FieldNet.

Final Expenses/Burial Insurance/ Wealth Creation

- We will not accept applications sold on this basis.
- Coverage applied for under this purpose is sold to provide beneficiaries with proceeds to cover burial expenses.
- This insurance is for Individuals who have no other need for coverage and no estate taxes.

Business Insurance

KeyPerson, Buy-Sell, Business Loan Collateral

KEYPERSON COVERAGE (*all key employees in the company should be covered*)

Appropriate for individuals who:

- Are a key source of business for the firm
- Possess special skills
- Hold a patent in their name
- Are well-known in their industry
(value to the company)

Keyperson Age	Reasonable Coverage Amount
<60	5-10x Keyperson's Salary*
>60	Individual Consideration (usually lower)

* Salary includes housing, cars, etc. provided as compensation by company.

BUY-SELL

This arrangement allows the business to purchase the deceased business owner's stock or equity in the business according to a pre-arranged buy-out agreement. Face amount should be equal to the partner/stockholder's fair market value plus a reasonable growth factor.

BUSINESS LOAN COLLATERAL

Person Covered	Max Amount of Coverage	Loan Terms Required
Keyperson or Owner	75% of Loan	5 years or more
Sole Proprietor	100%* of Loan	5 years or more

* As allowed within personal insurance limits

UNDERWRITING FOREIGN RISK

Foreign Nationals Resident/Non-Resident and U.S. Citizens Living Abroad

Visa Type	Country of Origin	Products & Rate Classifications	Special Requirements
Permanent Green card or petition for permanent visa approved	Any country	All products, all classifications including ultra and select	F6290 Foreign Supplement
Temporary E, H-1, L, O & TN (resident for 9 months a year)	Lowest Risk i.e., Canada, Western Europe	Permanent, T-20 or T-30 ultra, select and substandard	F6290 Foreign Supplement
Temporary E, H-1, L, O & TN	Low Risk i.e., Eastern Europe, Mexico, Russia, South Korea	Permanent, T-20 or T-30, no ultra/select	F6290 Foreign Supplement
Temporary E, H-1, L, O & TN (resident for 9 months a year)	High Risk i.e., Mid-East Countries, India, Pakistan, China, Philippines	No offer available	No offer available
Non-Residents Includes residents with B-1 visas	Lowest Risk i.e., Canada, Western Europe	Permanent products, ultra/select available substandard to Table D Limited Retention	F6290 Foreign Supplement, need prior underwriting approval, letter from agent indicating purpose of U.S. coverage and that all solicitation take place in US. Insured must own a 2nd home or business in U.S.

See FieldNet for further details and restrictions based on occupation. Foreign travel to any of the low-risk countries is allowed without any restriction. Foreign travel to some of the higher-risk countries may be allowed for short visits, but should be cleared with the underwriter prior to submission.

REINSURANCE

Foreign Nationals Resident/Non-Resident and U.S. Citizens Living Abroad *(continued)*

Visa Type	Country of Origin	Products & Rate Classifications	Special Requirements
Non-Residents Includes residents with B-1 visas	Low Risk i.e., Eastern Europe, Russia, South Korea	Permanent products, standard only, no substandard available. Limited Retention	F6290 Foreign Supplement, need prior underwriting approval, letter from agent indicating purpose of U.S. coverage and that all solicitation took place in U.S., passport number. Insured must own a 2nd home or business in U.S.
Non-Residents	High Risk	No offer available	No offer available
U.S. Citizens Living Abroad	Lowest Risk i.e., Canada, Western Europe	Permanent, T-20 or T-30 ultra/select available substandard to Table D. Limited Retention	F6290 Foreign Supplement, need prior underwriting approval, letter from agent indicating that all solicitation took place in U.S., passport number
U.S. Citizens Living Abroad	Low Risk i.e., Eastern Europe, Mexico, Russia, South Korea	Permanent, T-20 or T-30 no ultra/select, no substandard available. Limited Retention	F6290 Foreign Supplement, need prior underwriting approval, letter from agent indicating that all solicitation took place in U.S., passport number
U.S. Citizens Living Abroad	High Risk	No offer available	No offer available

Reinsurance is insurance purchased by one company, the ceding company (MassMutual), from another company, the reinsurer, to cover all or part of the risk the ceding company originally assumed for itself. If we decline a risk or make an offer with an extra premium classification, we may be able to “shop” the case with our reinsurers and issue a MassMutual contract if they make an offer. We refer to this type of insurance as salvage facultative reinsurance.

For permanent plans with a face amount of \$100,000 or greater, we will send our underwriting file to several reinsurers seeking an offer from them. If we do secure an offer that the client will accept, a MassMutual or subsidiary company policy will be issued.

When MassMutual reaches its total retention on an individual life, the amount exceeding the maximum retention limits is reinsured. If the amount currently being applied for with the company exceeds our retention limit, but does not exceed a specified maximum amount and there is no other insurance being applied for or in force, MassMutual can bind the reinsurer automatically without referring the file for their review.

Prepayments should not be taken when foreign travel is imminent. A Foreign Supplement F6290 is required when foreign travel is planned.

In the event that the total line of insurance is in excess of our jumbo limit, as dictated by age and amount, we may also “shop” (facultatively) the case to our reinsurers.

DELIVERING THE POLICY

Once you receive the policy, you are responsible for delivering the policy to your client in person within 30 days of policy issue. For all cases, a policy delivery receipt must be signed on delivery. In some cases, other delivery requirements such as:

- amendments
- insurability statements
- policy illustrations

may be required.

Only in situations where there is no change in insurability may a policy be delivered and premiums be accepted.

If the proposed insured *has* had any change in insurability, the details of this change should be recorded directly on the insurability statement form, which is then sent back to the corresponding underwriter for review. Likewise, if you become aware of any change in insurability upon delivery of the policy, this must be disclosed to the home office. In this case, you as the agent are responsible for halting the delivery process and contacting an underwriter to determine what steps are necessary in order to deliver the policy. In either case (a modified insurability statement or a change in insurability), the policy may not be delivered and no premium may be collected.

The two-year contestability clause allows MassMutual to rescind or deny payment on any policy that has breached this obligation. In order to avoid this situation, *any* change in insurability must be discussed with an underwriter. Under no circumstances should an agent or client alter any policy form without underwriter consultation.