

# Field Underwriting Guide





# **CONTENTS**

		Page
I.	Mission Statement	1
II.	Prequalification	1
III.	Preparing Your Client for the Underwriting Process	1
IV.	Procedures for Accepting Applications from Non-English Speaking Applicants	2
V.	Application Submission	2
VI.	Understanding Our Philosophy and Approach to Cognitive Screening	3
VII.	Underwriting Requirements	4
VIII.	Underwriting Requirements for Christian Scientist	10
IX.	Benefit/Rider Increases	10
X.	Summary of Rights	10
XI.	Underwriting Risk Classifications by Product	11
XII.	Underwriting Guidelines	11
XIII.	Underwriting Guidelines (Double Accidents Benefit and Family History)	76
XIV.	Uninsurable Medications	77
XV.	Male/Female Height and Weight Table	78
XVI.	Appeal Process	79

#### I. Mission Statement

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

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

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

### II. Prequalification

The Underwriting area can be contacted directly at 888-604-7296 (prompt 3) between 8 a.m. and 6 p.m. (EST) to prequalify an applicant for LTC insurance or to answer underwriting inquiries. You can also fax prequalification questions to 617-450-8052 using the Prequalifying Inquiry Form (LTC-1028) or Email: rparsons@jhancock.com

Please note that prequalification responses are a tentative opinion based on the information provided. The more information you can provide to us about your client the more accurate our quote will be.

# III. Preparing Your Client for the Underwriting Process

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

The brochure entitled "Our Underwriting Process" (LTC-1590) is available to assist you in preparing your client for the above programs. It is essential that your client receives this brochure during the sales process, as this will set your client's expectations and ensure favorable results. In some instances, we may request a motor vehicle report, pharmacy profile, or information from the Medical Information Bureau to further evaluate insurability.

# IV. Procedures for Accepting Applications from Non-English Speaking Applicants

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

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

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

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

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

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

### V. Application Submission

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

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

The Underwriting Department will not process an application if the:

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

# VI. Understanding Our Philosophy and Approach to Cognitive Screening

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

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

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

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

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

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

Milliman USA, a leading actuarial firm, performed an independent study indicating: "The MCAS shows improved expected LTC Insurance profitability compared to any other cognitive screen on the basis of claims savings and increased premiums alone." This information was provided by Milliman and Robinson Inc., "Impact of Cognitive Testing on Long Term Care Insurance Profitability," September 1999.

<sup>\*</sup>Alzheimer's Association, "Alzheimer's Disease Statistics Fact Sheet," 2006".

## VII. Underwriting Requirements

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

#### Criteria

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

### **Programs**

Paramedical Examination

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

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

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

#### M.D. Examination

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

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

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

### Telephonic Interview

This is a phone conversation between a Nation's CareLink nurse and the applicant consisting of standardized medical questions. The questions focus on their medical history, medications, symptoms they may have, lifestyle, and daily activities such as meal preparation, transportation, bathing, and toileting. We'll ask the applicant the names of their doctors, and we'll also ask them to participate in a brief memory exercise if they are 65 or older, or if certain medical conditions exist. A nurse from Nation's CareLink will call the applicant to conduct the interview. If the applicant receives the call at a time that's inconvenient for them, the nurse will reschedule the interview. It's important that the applicant chooses a quiet time and place for their interview to ensure more favorable results. The interview usually takes 30 minutes, depending on the extent of their medical history.

After the applicant completes the interview, they may receive a customer satisfaction survey allowing John Hancock to evaluate the quality of their experience.

#### Medical Records

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

#### Personal Interview (On-site)

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

### Medical Information Bureau (MIB)

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

### Prescription Profiles

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

# Florida Underwriting Requirements

# **AGES 55 and YOUNGER**

Criteria	Paramed w/Urine	M.D. Exam w/Urine	Telephone Interview	Personal Interview	Medical Records
• Has consulted PCP within 18 months			1		1
Has consulted PCP within 18 months     Hearing Impaired				1	1
Has not consulted PCP within 18 months     History of a significant medical condition as stated below*		ant must have to application s	undergone a cor ubmission.	nplete physical e	exam
Has not consulted PCP within 18 months	1			1	
	AGES 56–69				
Has consulted PCP within 18 months			1		1
Has consulted PCP within 18 months     Hearing Impaired				1	1
Has not consulted PCP within 18 months     History of a significant medical condition as stated below*		ant must have to application s	undergone a cor ubmission.	nplete physical e	exam
Has not consulted PCP within 18 months		✓		1	
	AGES 70+				
Has consulted PCP within 18 months				✓	✓
Has not consulted PCP within 18 months				1	1
• Has not consulted PCP for 3+ years		1		1	

<sup>\*</sup>Blood Disorders excluding Compensated Anemia, Cancer within 3 yrs., Cardiomyopathy, Chronic Obstructive Pulmonary Disease, Diabetes, Discoid Lupus, Emphysema, Liver Disorders, Lymphomas, Organ Transplant, Osteoporosis, Rheumatoid/Psoriatic Arthritis, TIA.

## **AGES 55 and YOUNGER**

Criteria	Paramed w/Urine	M.D. Exam w/Urine	Telephone Interview	Personal Interview	Medical Records
<ul> <li>Has consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> </ul>			1		
<ul> <li>Has consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> </ul>			1		1
<ul> <li>Has not consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> </ul>	1				
<ul> <li>Has not consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> </ul>		1	1		
<ul> <li>Has consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million<sup>1</sup></li> <li>History of a significant medical condition as stated below<sup>2</sup></li> </ul>					<b>√</b>
<ul> <li>Has consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>History of a significant medical condition as stated below²</li> </ul>			1		✓
<ul> <li>Has not consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>History of a significant medical condition as stated below²</li> </ul>	Applicant must have undergone a complete physical exam prior to application submission.		exam		
<ul> <li>Has not consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>History of a significant medical condition as stated below²</li> </ul>	Applicant must have undergone a complete physical exam prior to application submission.			exam	
<ul> <li>Has consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>Hearing Impaired</li> </ul>					✓
<ul> <li>Has consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>Hearing Impaired</li> </ul>					1

- 1. Also applies to the \$1 Million B.P. in FL and 15 Year B.P. in CT.
- 2. Blood Disorders excluding Compensated Anemia, Cancer within 3 yrs., Cardiomyopathy, Chronic Obstructive Pulmonary Disease, Diabetes, Discoid Lupus, Emphysema, Liver Disorders, Lymphomas, Organ Transplant, Osteoporosis, Rheumatoid/Psoriatic Arthritis, TIA.

## **AGES 56-64**

Criteria	Paramed w/Urine	M.D. Exam w/Urine	Telephone Interview	Personal Interview	Medical Records
<ul> <li>Has consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million<sup>1</sup></li> </ul>			1		
Has consulted PCP within 18 months     Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹			1		1
<ul> <li>Has not consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> </ul>		✓			
Has not consulted PCP within 18 months     Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹		/	1		
<ul> <li>Has consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>History of a significant medical condition as stated below²</li> </ul>					<b>√</b>
<ul> <li>Has consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>History of a significant medical condition as stated below²</li> </ul>			1		1
<ul> <li>Has not consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>History of a significant medical condition as stated below²</li> </ul>		cant must have to application s	undergone a cor ubmission.	mplete physical	exam
<ul> <li>Has not consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>History of a significant medical condition as stated below²</li> </ul>		cant must have to application s	undergone a cor ubmission.	mplete physical	exam
<ul> <li>Has consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>Hearing Impaired</li> </ul>					✓
Has consulted PCP within 18 months     Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹     Hearing Impaired					1

- 1. Also applies to the \$1 Million B.P. in FL and 15 Year B.P. in CT.
- 2. Blood Disorders excluding Compensated Anemia, Cancer within 3 yrs., Cardiomyopathy, Chronic Obstructive Pulmonary Disease, Diabetes, Discoid Lupus, Emphysema, Liver Disorders, Lymphomas, Organ Transplant, Osteoporosis, Rheumatoid/Psoriatic Arthritis, TIA.

## **AGES 65-69**

Criteria	Paramed w/Urine	M.D. Exam w/Urine	Telephone Interview	Personal Interview	Medical Records
Has consulted PCP within 18 months     Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹			1		
Has consulted PCP within 18 months     Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹			1		1
Has not consulted PCP within 18 months     Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹		✓	1		
Has not consulted PCP within 18 months     Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹		1	1		
<ul> <li>Has consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>History of a significant medical condition as stated below²</li> </ul>			1		1
<ul> <li>Has consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million<sup>1</sup></li> <li>History of a significant medical condition as stated below<sup>2</sup></li> </ul>			1		1
<ul> <li>Has not consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>History of a significant medical condition as stated below²</li> </ul>	Applicant must have undergone a complete physical exam prior to application submission.			exam	
<ul> <li>Has not consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million<sup>1</sup></li> <li>History of a significant medical condition as stated below<sup>2</sup></li> </ul>	Appli prior	cant must have to application su	undergone a cor ıbmission.	mplete physical	exam
<ul> <li>Has consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>Hearing Impaired</li> </ul>				1	1
<ul> <li>Has consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>Hearing Impaired</li> </ul>				1	1
<ul> <li>Has not consulted PCP within 18 months</li> <li>Not applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>Hearing Impaired</li> </ul>		1		1	
<ul> <li>Has not consulted PCP within 18 months</li> <li>Applying for 10 yr., Lifetime B.P., or 5 Years Plus \$1 Million¹</li> <li>Hearing Impaired</li> </ul>		1		1	

- 1. Also applies to the \$1 Million B.P. in FL and 15 Year B.P. in CT.
- 2. Blood Disorders excluding Compensated Anemia, Cancer within 3 yrs., Cardiomyopathy, Chronic Obstructive Pulmonary Disease, Diabetes, Discoid Lupus, Emphysema, Liver Disorders, Lymphomas, Organ Transplant, Osteoporosis, Rheumatoid/Psoriatic Arthritis, TIA.

### **AGES 70+**

Criteria	Paramed w/Urine	M.D. Exam w/Urine	Telephone Interview	Personal Interview	Medical Records
Has consulted PCP within 18 months				<b>√</b>	1
Has not consulted PCP for 18 months				<b>√</b>	<b>✓</b>
• Has not consulted PCP for 3+ years		<b>✓</b>		1	

### VIII. Underwriting Requirements For Christian Scientist

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

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

#### IX. Benefit/Rider Increases

An insured may apply for a benefit increase or add a rider within the 1st 6 months of the issue date by submitting a New Business Coverage Change Form (LTC-1064). Depending upon the amount of the increase, the applicant's medical history, and rate classification, additional underwriting requirements may be requested. Additionally, all approved increases will be subject to a Statement of Health amendment.

# X. Summary of Rights

An applicant may request a copy of their personal health information which was obtained as part of the underwriting process by either completing the Summary of Rights form attached to all adverse decision letters or by submitting a request in writing which must be signed and dated by the applicant.

## XI. Underwriting Risk Classifications By Product

# Custom Care II Enhanced, FamilyCare II Benefit, Leading Edge, Custom Care II and Custom Care

Preferred

Select

Class 1 (25% increase)

Class 2 (50% increase)

We remain committed to offering policies to as many applicants as possible. As a result, in addition to utilizing our various risk classifications, we have further flexibility in modifying coverage with a 180 or 365 day elimination period in most states.

# XII. Underwriting Guidelines

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

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

C	ONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Acoustic Neuroma: A benign tumor of the auditory nerve	
	Has the neuroma been removed? Date(s)	
	Is applicant taking any medication or receiving physical therapy? Name(s)	
	Has the applicant had any problems with balance or falls? Details	
	Has there been any seizure activity? Date of last seizure	
	Has the applicant undergone physical therapy? Date(s) and results	
	Surgically removed, complete recovery, no seizures or residuals other than hearing loss	Preferred
	Present neuroma, current seizure activity, balance disturbance or falls, or inoperable tumor	Decline
	<b>Acromegaly:</b> A chronic metabolic disorder that results in gradual enlargement of body tissues including the bones of the face, jaw, hands, feet, and skull	Decline
	Actinic Keratosis: A pre-malignant lesion of the skin	Preferred
	Adams-Stokes: A transient condition caused by a heart rhythm disorder in which there is a slow or absent pulse resulting in syncope (fainting), with or without convulsions	
	Medically treated or a successful pacemaker implant, no underlying cardiac conditions, >3 months	Select
	Symptomatic with episodes of shortness of breath, fainting, syncope, convulsions, or an ejection fraction <40%	Decline
	<b>Addison's Disease</b> : An endocrine or hormone disorder which occurs when the adrenal glands do not produce enough of the hormone cortisol or aldosterone	
	Stable, well controlled, no complications, under treatment with $\leq$ 40mg hydrocortisone, $>$ 12 months	Select
	Adult Day Care Services: Current	Decline
	AIDS: A disease of the immune system that fails to fight infection	Decline
3	* Alcoholism: A chronic illness marked by consumption of alcohol at a level that interferes with physical or mental health, social, family, or occupational responsibilities	
	How long has the applicant been abstinent?	
	Has applicant ever had a relapse? Date(s)	
	Has the applicant ever received any inpatient treatment? Date(s)	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

COV	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Alcoholism (continued)	
	Is the applicant attending any outpatient therapy or belong to a support group?	
	Has the applicant ever had any liver problems (cirrhosis, fatty liver, abnormal liver functions)? Details	
	Abstinent, normal blood studies, no complications, <18 months	Postpone 18 months
	Abstinent, normal blood studies, no complications, >18 months	Select
	Abstinent >18 months, single hospitalization and/or detox admission, chronic treatment with an antialcoholic (e.g., antabuse), no limitations, non-disabling	Select 90 day E.P.
	Abstinent with detox admission, normal blood studies, no complications, <18 months	Postpone 18 months
	Abstinent with detox admission, normal blood studies, no complications, >18 months	Select
	Abstinent with two or more hospitalizations and/or detox admission, <36 months	Postpone 36 months
	Abstinent with two or more hospitalizations and/or detox admission, >36 months	Class 1 w/180 E.P. or Class 2*
	History of alcohol abuse with cirrhosis, a current fatty liver, abnormal liver function tests, multiple relapses, or continued alcohol use	Decline
	Allergies: An acquired, abnormal immune response to a substance that does not normally cause a reaction in most people	Preferred
	Alzheimer's disease: A slowly progressive form of dementia	Decline
*	Amaurosis Fugax: Temporary loss of vision in one eye due to insufficient blood flow to the retina  Date of episode	
	Has there been more than 1 episode? Details	
	Has any diagnostic testing been performed (carotid studies, MRI/CT of brain)? Details/Results	
	Have there been any residual vision problems?	
	Does applicant have any history of diabetes, heart, or circulatory problems? Details	
	Single episode, complete recovery, asymptomatic, no cognitive or physical residuals, >12 months	Class 1 w/90 day E.P.*
	2 episodes	Decline
	Single episode with cognitive or physical residuals or with diabetes	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

Amputation: Removal of a limb, part, or organ	DECISION
Location of amputation?	
Date of amputation	
What caused the amputation?	
Is the applicant disabled or do they experience any limitations? Details	
Does the applicant use any type of assistance devices? If yes, type and frequency	
Single limb due to trauma or congenital, no limitations, non-disabling, no assistive devices, >12 months	Select w/6 year B.P.
Single limb due to trauma or congenital, no limitations, non-disabling, occasional use an assistive device (single prong cane, or single crutch), >12 months	Class 1 w/3 year B.
Due to disease	Decline
<b>Imyotrophic Lateral Sclerosis (ALS):</b> A disorder causing progressive loss of control of oluntary muscles due to the destruction of nerves in the brain and spinal cord	Decline
oluntary muscles due to the destruction of nerves in the brain and spinal cord  nemia: A blood disorder characterized by the decreased ability of the red blood cells to provide dequate oxygen supplies to body tissues	
oluntary muscles due to the destruction of nerves in the brain and spinal cord  nemia: A blood disorder characterized by the decreased ability of the red blood cells to provide dequate oxygen supplies to body tissues  Date of diagnosis?	
oluntary muscles due to the destruction of nerves in the brain and spinal cord  Anemia: A blood disorder characterized by the decreased ability of the red blood cells to provide dequate oxygen supplies to body tissues  Date of diagnosis?  What type of anemia does applicant have?	
oluntary muscles due to the destruction of nerves in the brain and spinal cord  Anemia: A blood disorder characterized by the decreased ability of the red blood cells to provide dequate oxygen supplies to body tissues  Date of diagnosis?  What type of anemia does applicant have?  What is the cause of the anemia?	
Inemia: A blood disorder characterized by the decreased ability of the red blood cells to provide dequate oxygen supplies to body tissues  Date of diagnosis?  What type of anemia does applicant have?  What is the cause of the anemia?  Is the applicant taking any medications? Name(s)	
Inemia: A blood disorder characterized by the decreased ability of the red blood cells to provide dequate oxygen supplies to body tissues  Date of diagnosis?  What type of anemia does applicant have?  What is the cause of the anemia?  Is the applicant taking any medications? Name(s)  Has applicant received any transfusions? Date(s)	
Inemia: A blood disorder characterized by the decreased ability of the red blood cells to provide dequate oxygen supplies to body tissues  Date of diagnosis?  What type of anemia does applicant have?  What is the cause of the anemia?  Is the applicant taking any medications? Name(s)  Has applicant received any transfusions? Date(s)  Has applicant been hospitalized? Date(s)/Details  Mild folate, iron, or pernicious, no underlying disorder, asymptomatic, stable and well	Preferred
Inemia: A blood disorder characterized by the decreased ability of the red blood cells to provide dequate oxygen supplies to body tissues  Date of diagnosis?  What type of anemia does applicant have?  What is the cause of the anemia?  Is the applicant taking any medications? Name(s)  Has applicant received any transfusions? Date(s)  Has applicant been hospitalized? Date(s)/Details  Mild folate, iron, or pernicious, no underlying disorder, asymptomatic, stable and well controlled, >3 months	

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

COI	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	
*	Aneurysm: A bulge in the wall of an artery	
	Date of diagnosis	
	Where is the aneurysm located (abdominal-aortic, cerebral, thoracic, other)?	
	Was the aneurysm surgically repaired? Date	
	If present, what is the size in cm?	
	Has the aneurysm grown? Details	
	Does applicant have any history of diabetes, heart, or circulatory problems? Details	
	Abdominal-aortic, ≤5 cm in size with no growth, monitored w/routine follow-ups, >6 months	Select w/90 day E.P.
	Abdominal-aortic, >5 cm in size, with growth, or symptomatic	Decline
	Abdominal-aortic, surgically repaired, complete recovery, >6 months	Select
	Abdominal-aortic, surgically repaired, complete recovery, <6 months	Postpone 6 months
	Cerebral, surgically repaired, complete recovery, no cognitive or physical residuals, >12 months	Select
	Cerebral, surgically repaired, complete recovery, no cognitive or physical residuals, <12 months	Postpone 12 months
	Cerebral, un-repaired or inoperable	Decline
	Thoracic, surgically repaired, complete recovery, >6 months	Select
	Thoracic, ≤5 cm in size with no growth, monitored w/routine follow-ups, >6 months	Select w/90 day E.P.
	Thoracic, >5 cm in size, with growth, or inoperable location	Decline
0	<b>Ankylosing Spondylitis:</b> A chronic inflammatory disease that affects the joints between the vertebrae of the spine, and the joints between the spine and the pelvis that eventually causes the affected vertebrae to fuse or grow together	
	Date of diagnosis?	
	Does the applicant experience any pain? Describe	
	Is applicant taking any medication? Name(s)	
	Has the applicant undergone any back surgery? Date(s)/Details	
	Has the applicant undergone any physical therapy or injections? Details	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

		DECISION
	Ankylosing Spondylitis: (continued)	
	Asymptomatic, no limitations, treatment-free	Select
	Mildly symptomatic, no limitations, non-disabling, treated with anti-inflammatories	Class 1*
	Anorexia Nervosa: An eating disorder associated with a distorted body image and marked fasting	Decline
*	Anxiety: A feeling of apprehension or fear that lingers	
	Date of diagnosis?	
	Is applicant taking medication? Name(s)	
	Has there been any change in treatment over the past 6 months? Details	
	Has applicant ever been hospitalized? Date(s)/Details	
	Does applicant have any history of depression, anxiety or other mental illness disorders? Details	
	Is the applicant disabled or experience any limitations? Details	
	Situational or new onset, no medications, >3 months	Preferred
	Well controlled, no limitations, non-disabling, treated with <4 medications, >3 months	Select
	Symptomatic	Decline
	Appendectomy: Surgical removal of the appendix	Preferred
•	Arterious Venous Malformation (AVM): A large tangle of dilated blood vessels with rapid flow and early draining veins that may occur in many parts of the body	
	Brain or spinal cord, successfully eliminated (surgically, embolization or radiation), no residual complications, complete recovery, >12 months	Select
	Abdominal, successfully eliminated (surgically, embolization, or radiation), no residual complications, complete recovery, >6 months	Select
	Present Arterious Venous Malformation	Decline
¥	Arteritis (temporal, giant cell): Inflammation of an artery	
	Asymptomatic, stable, treatment-free, <24 months	Postpone 24 months
	Asymptomatic, stable, and treatment-free, no limitations, non-disabling, >24 months	Select
	Symptomatic or requiring treatment	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

COI	NDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
0	Arthritis (excluding Osteo, Rheumatoid, and Degenerative): Inflammation of a joint	
	Mild, no limitations, non-disabling, treated with non-prescription medications	Preferred
	Mildly symptomatic, treated with 1 anti-inflammatory	Select
	Asbestosis: A lung disease	Refer to Chronic Obstructive Pulmonary Disease
0	<b>Aseptic Necrosis</b> : A condition resulting from the temporary or permanent loss of blood supply to the bones	
	Surgically repaired, no limitations, non-disabling, and no evidence of disease >6 months	Select
	Un-operated	Decline
	Assisted Living Facility: A residential facility for people who need assistance with Activities of Daily Living (ADLs) but wish to live as independently as possible for as long as possible	Decline
	Asthma: A respiratory disease marked by attacks of breathing difficulty, wheezing, and coughing	
	Date of diagnosis?	
	ls asthma seasonal or requires treatment year round?	
	Is applicant taking any medication/inhalers? Name(s)	
	Have pulmonary function tests been performed? Date/Results (FEV1 & FVC %)	
	Has applicant ever used oxygen or steroids? Frequency?	
	Does the applicant have any other respiratory disorders? Details	
	Has applicant ever been hospitalized for a respiratory disorder? Date(s)/Details	
	Seasonal, no limitations, well on controlled on short-term treatment, no other respiratory disorders or prior hospitalizations	Preferred
	Chronic treatment, well controlled with no limitations and stable baseline Pulmonary Function Tests FEV1 >65% and FVC >75%	Select
	Chronic oral steroid use, frequent hospitalizations, oxygen use, or multiple exacerbations	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CO	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Ataxia: Defective muscular coordination that manifests when voluntary muscular movements are attempted	
	Etiology unknown with normal neurological work-up, completely resolved, no limitations, <12 months	Postpone 12 months
	Etiology unknown with normal neurological work-up, completely resolved, no limitations, >12 months	Select
	Due to underlying disease	Refer to disease
	Current	Decline
*	Atrial Fibrillation: A rapid, irregular heart rhythm	
	Date of diagnosis?	
	Is applicant taking any medication? Name(s)	
	Has applicant ever been hospitalized for a heart or circulatory problem? Date(s)/Details	
	Has applicant ever required electrical cardioversion? Date(s)/Results	
	Does applicant experience any symptoms of palpitations, chest pain, or dizziness? Details	
	Does applicant have any history of diabetes, heart, or circulatory problems? Details	
	New onset, <6 months	Postpone 6 months
	Normal sinus rhythm, single successful cardioversion, no underlying cardiac disease, >6 months	Select
	Normal sinus rhythm, well controlled on oral medications, no underlying cardiac disease, >6 months	Select
	Chronic, well controlled on Coumadin, >12 months	Class 1*
	Multiple cardioversions, uncontrolled, or symptomatic	Decline
*	Atrial Flutter: An irregularity of the heartbeat in which the contractions of the atrium exceed in number those of the ventricle	Refer to Atrial Fibrillation
	Atrophy (Brain): A decrease in size or wasting of the brain	
	Ages 70 and over, no associated conditions, mild and normal for age	Select
	<70 years old or with any associated conditions or symptoms	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
*	<b>Attention Deficit Disorder (ADD):</b> A condition characterized by a developmentally inappropriate level of attention, concentration, activity, and distractibility	
	Date of diagnosis?	
	Is applicant taking any medication? Name(s)	
	Does applicant have any history of depression, anxiety or other mental illness disorders? Details	
	Is the applicant disabled or do they experience any limitations? Details	
	Well controlled, compliant with <3 medications, active lifestyle, no limitations, non-disabling, >3 months	Select
	<b>Barrett's Esophagus:</b> A condition in which the lining of the esophagus changes from its normal lining to a type that is usually found in the intestines	Preferred
	<b>Basal Cell Skin Cancer:</b> A slow growing malignant neoplasm that arises from the basal layer of the skin	Preferred
	Bell's Palsy: A disorder involving sudden facial drooping and decreased ability to move the face	Preferred
*	Bipolar/Manic Disorder: A mood disorder characterized by mood swings from mania (exaggerated feeling of well-being) to depression  Date of diagnosis?	
	Is applicant taking any medication? Name(s)	
	Has applicant ever been hospitalized or treated in facility for any type of mental illness?  Date(s)/Details	
	Has applicant ever received any electroconvulsive shock therapy?	
	Does applicant have any history of depression, anxiety or other mental illness disorders? Details	
	Is the applicant disabled or experience any limitations? Details	
	New onset, <12 months	Postpone 12 months
	Well controlled on <4 non-antipsychotic medications, no limitations, and non-disabling, >12 months	Class 1 w/90 day E.P.*
	·	Class 2, w/90 day E.P., 3 year B.P.

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

COI	NDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Bipolar/Manic Disorder (continued)	
	Single psychiatric hospitalization, well controlled, no limitations, non-disabling, and treated with <4 medications, >24 months	Class 1 w/90 day E.P.*
	Uncontrolled	Postpone 24 months
	History of electroconvulsive shock therapy, multiple hospitalizations, or treatment with an antipsychotic medication	Decline
	Bronchiectasis: A respiratory disorder with abnormal destruction and widening of the large airways	
	Date of diagnosis?	
	Is applicant taking any medication/inhalers? Name(s)	
	Date of last flare	
	Have pulmonary function tests been performed? Date(s)/Results	
	Has applicant ever used oxygen or steroids? Frequency	
	Has applicant ever been hospitalized for a respiratory disorder? Date(s)/Details	
	Has applicant smoked within the past 12 months?	
	Mild, asymptomatic, treatment-free	Select
	Mild, asymptomatic, treated with <4 medications, normal and stable baseline pulmonary function tests >65% FEV1, >75% FVC	Select
	Moderate, asymptomatic, treated with <4 medications, normal and stable baseline pulmonary function tests, >60% FEV1, >70% FVC	Class 1 w/90 day E.P.*
	Moderate-severe, <4 medications, stable baseline pulmonary function tests, >50% FEV1, >60% FVC	Class 2*
	Recent exacerbation, <3 months	Postpone 3 months
	Exacerbation requiring hospitalization, <6 months	Postpone 6 months
	Symptomatic, severe, chronic reoccurring infections >3, daily steroid use, multiple hospitalizations, oxygen use, or FEV1 <50%, FVC <60%	Decline
	Smoker	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

C	NC	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
		<b>Bronchitis (Chronic)</b> : An inflammation of the bronchi, the main air passages in the lungs, which persists for a long period or repeatedly recurs	See Chronic Obstructive Lung Disease
		<b>Buerger's Disease:</b> A chronic circulatory disease that leads to obstruction of the blood vessels of the hands and feet	Decline
		Bulimia: An illness of uncontrolled episodes of overeating, usually followed by self-induced vomiting	Decline
		Bunion: Defined when the big toe angles toward the second toe, resulting in inflammation and pain	Preferred
		<b>Bursitis:</b> An acute or chronic inflammation of the fluid-filled sac (bursa) that lies between tendon and skin or between tendon and bone	Preferred
		Calculi (Renal): A condition in which one or more stones are present in the kidney	Preferred
		Cancer (Internal): An uncontrolled growth of abnormal cells which have mutated from normal tissue	
		All scenarios assume that the following criteria has been met: Surgery and or treatment free (chemotherapy/radiation), with an established post treatment follow-up indicating a complete recovery and no complications. Recovery period starts the date of final treatment.	
		Date of diagnosis?	
		Where was the cancer located?	
		What stage/grade was the cancer?	
		Was there any lymph node involvement? # of nodes involved?	
		Was the cancer diagnosed as metastatic?	
		Is this a recurrent cancer or does the applicant have a history of other cancers? Dates(s)/Details	
		What type of treatment did applicant receive (surgery, x-ray therapy, chemotherapy)? Date completed	
		Any complications or residual problems?	
		Bladder, Stage 0 or I, non-smoker	Select
		Bladder, Stage II, non-smoker	>12 months, Select w/90 E.P. >24 months, Select
		Bladder, Stage III, non-smoker	>12 months, Select w/180 E.P. >36 months, Select w/90 E.P.
		Bladder, Stage IV	Decline
		Bladder, localized recurrence, Stage 0 to II, non-smoker	>36 months, Select w/180 E.P.

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CONDITION / DIAGNOSIS /	TREATMENTS / BENEFITS / SERVICES / DEVICES / API	PLIANCES DECISION
Cancer (continued)		
Breast, Stage 0 o	rl	<12 months, Select w/90 E.P. >12 months, Select
Breast, Stage IIA	or IIB	<24 months, Select w/180 E.P. >24 months, Select w/90 E.P.
Breast, Stage IIIA		>12 months, Select w/180 E.P. >36 months, Select w/90 E.P.
Breast, Stage IIIB		>24 months, Select w/180 E.P. >48 months, Select w/90 E.P.
Breast, Stage IIIC		>24 months, Select w/ 365 E.P. >60 months, Select w/180 E.P.
Breast, Stage IV		>60 months, Select w/365 E.P.
Breast, localized	recurrence, Stage 0 to IIA	>36 months, Select w/180 E.P.
Colon, Stage I		<12 months, Select w/90 E.P. >12 months, Select
Colon, Stage IIA*		<12 months, Select w/180 E.P. >12 months, Select w/90 E.P. >24 months, Select
Colon, Stage IIB	or IIIA*	>6 months, Select w/180 E.P. >24 months, Select w/90 E.P.
Colon, Stage IIIB	or IIIC *	>12 months, Select w/180 E.P. >36 months, Select w/90 E.P.
Colon, Stage IV*		>60 months, Select w/180 E.P.
	ecurrence, Stage 0 to IIB <sup>†</sup> ostomy risk class will be Class I	>24 months, Select w/180 E.P.
Endometrial, Stag	ge I, surgically treated	Select
Endometrial, Stag	ge II, surgically treated	<24 months, Select w/90 E.P. >24 months, Select
Endometrial, Stag	ge III	>6 months, Select w/365 E.P. >24 months, Select w/180 E.P. >36 months, Select w/90 E.P.

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

Endometrial, Stage IV  Endometrial, localized recurrence, Stage I to II  Melanoma, Stage 0, I, or In Situ  Melanoma, Stage IIA or IIB  Melanoma, Stage IIC, IIIA, or IIIB  Melanoma, Stage IIIC  Melanoma, Stage IV	Decline  >36 months, Select w/180 E.P.  <12 months, Select >12 months, Preferred  <12 months, Select w/180 E.P. >12 months, Select w/90 E.P.  <24 months, Select w/180 E.P. >24 months, Select w/90 E.P.
Endometrial, localized recurrence, Stage I to II  Melanoma, Stage 0, I, or In Situ  Melanoma, Stage IIA or IIB  Melanoma, Stage IIC, IIIA, or IIIB  Melanoma, Stage IIIC	>36 months, Select w/180 E.P.  <12 months, Select >12 months, Preferred  <12 months, Select w/180 E.P. >12 months, Select w/90 E.P.  <24 months, Select w/180 E.P.
Melanoma, Stage IIA or IIB  Melanoma, Stage IIC, IIIA, or IIIB  Melanoma, Stage IIC	<12 months, Select >12 months, Preferred <12 months, Select w/180 E.P. >12 months, Select w/90 E.P. <24 months, Select w/180 E.P.
Melanoma, Stage IIA or IIB  Melanoma, Stage IIC, IIIA, or IIIB  Melanoma, Stage IIIC	>12 months, Preferred  <12 months, Select w/180 E.P. >12 months, Select w/90 E.P.  <24 months, Select w/180 E.P.
Melanoma, Stage IIC, IIIA, or IIIB  Melanoma, Stage IIIC	>12 months, Select w/90 E.P. <24 months, Select w/180 E.P.
Melanoma, Stage IIIC	-
Malanoma Stane IV	>36 months, Select w/180 E.P.
ivicianoma, stage iv	Decline
Prostate, Stage I or II, stable PSA levels <1.0	<12 months, Select w/90 E.P. >12 months, Select
Prostate, Stage I or II, Watchful waiting (untreated), 65 or older, stable PSA levels	>24 months, Select w/180 E.P.
Prostate, Stage III, stable PSA levels <1.0	>6 months, Select w/180 E.P. >24 months, Select w/90 E.P.
Prostate, Stage IV, stable PSA levels <1.0	>24 months, Select w/365 E.P.
Prostate, localized recurrence, Stage I or II, stable PSA levels <1.0	>24 months, Select w/180 E.P.
Renal, Stage I, non-smoker	<12 months, Select w/90 E.P. >12 months, Select
Renal, Stage II, non-smoker	<24 months, Select w/180 E.P. >24 months, Select w/90 E.P.
Renal, Stage III, non-smoker	>12 months, Select w/180 E.P. >36 months, Select w/90 E.P.
Renal, Stage IV, non-smoker or smoker any stage	Decline
Renal, Single recurrence, localized, Stage I or II, non-smoker	>36 months, Select w/365 E.P.

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

TION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
ardiomyopathy: A disorder affecting the heart muscle, which usually results in inadequate eart pumping	
Date of diagnosis?	
Is the applicant taking any medications? Name(s)	
Has the applicant ever had congestive heart failure or other heart disorders? Date(s)/Details	
Has an echocardiogram been done? Date/Ejection Fraction?	
Does the applicant have shortness of breath, fatigue, or weakness? Details	
Asymptomatic, stable and well controlled, ejection fraction >45%, >12 months	Select
History of heart transplant, >60 months	Class 1 w/365 day E.P.*
History of congestive heart failure, symptomatic, or ejection fraction <45%	Decline
<b>arotid Artery Disease</b> : A circulatory condition characterized by narrowing or stenosis of the arotid artery in the neck	
Date of diagnosis?	
Is the applicant taking any medications? Name(s)	
11 3 3	
Has the applicant experienced any dizziness, visual disturbances, or weakness?	
Has the applicant experienced any dizziness, visual disturbances, or weakness?	
Has the applicant experienced any dizziness, visual disturbances, or weakness?  Has there been any history of a TIA (transient ischemic attack) or stroke?	
Has the applicant experienced any dizziness, visual disturbances, or weakness?  Has there been any history of a TIA (transient ischemic attack) or stroke?  What were the results (% of stenosis) of the last carotid study? Date	
Has the applicant experienced any dizziness, visual disturbances, or weakness?  Has there been any history of a TIA (transient ischemic attack) or stroke?  What were the results (% of stenosis) of the last carotid study? Date  Has the applicant had any carotid surgery? Date(s)/Details	
Has the applicant experienced any dizziness, visual disturbances, or weakness?  Has there been any history of a TIA (transient ischemic attack) or stroke?  What were the results (% of stenosis) of the last carotid study? Date  Has the applicant had any carotid surgery? Date(s)/Details  Does the applicant have diabetes?	
Has the applicant experienced any dizziness, visual disturbances, or weakness?  Has there been any history of a TIA (transient ischemic attack) or stroke?  What were the results (% of stenosis) of the last carotid study? Date  Has the applicant had any carotid surgery? Date(s)/Details  Does the applicant have diabetes?  Has the applicant smoked within the past 12 months?	rs
Has the applicant experienced any dizziness, visual disturbances, or weakness?  Has there been any history of a TIA (transient ischemic attack) or stroke?  What were the results (% of stenosis) of the last carotid study? Date  Has the applicant had any carotid surgery? Date(s)/Details  Does the applicant have diabetes?  Has the applicant smoked within the past 12 months?  Does the applicant have any heart or other circulatory problems? Details  Mild-moderate stenosis <50%, asymptomatic, no progression, no other circulatory disorder	
Has the applicant experienced any dizziness, visual disturbances, or weakness?  Has there been any history of a TIA (transient ischemic attack) or stroke?  What were the results (% of stenosis) of the last carotid study? Date  Has the applicant had any carotid surgery? Date(s)/Details  Does the applicant have diabetes?  Has the applicant smoked within the past 12 months?  Does the applicant have any heart or other circulatory problems? Details  Mild-moderate stenosis <50%, asymptomatic, no progression, no other circulatory disorder or history of TIA, >12 months	Select Class 1*

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Carotid Artery Disease (continued)	
	Endarterectomy, complete recovery, asymptomatic, no other circulatory disorders or history of TIA, >6 months	Select
	Endarterectomy >6 months, symptomatic or with recurrent stenosis	Decline
	Stenosis >25% with Diabetes	Decline
	Tobacco use within the past 12 months	Decline
•	Carotid Bruit: A murmur heard in the carotid artery in the neck area	
	No underlying circulatory disease, asymptomatic	Preferred
	Underlying circulatory disease	Refer to disease
	Catheter (Urinary): A soft plastic or rubber tube that is inserted into the bladder to drain the urine	
	Short term intermittent catheter, no limitations, non-disabling, independently managed, no underlying neurological disease, >3 months	Class 1*
	Long term indwelling catheter, no limitations, non-disabling, independently managed, no underlying neurological or spinal disease, >3 months	Class 1 w/90 day E.P.*
	Utilized due to an underlying disease	Refer to disease
	>2 urinary tract infections with a 12 month period, chronic antibiotic or narcotic pain reliever treatment	Decline
	Requiring assistance with management, limitations, or disabling	Decline
	Cataract: A cloudy or opaque area in the lens of the eye	
	No visual impairment	Preferred
	Surgery anticipated/recommended, no visual impairment	Preferred
	<b>Cerebral Palsy:</b> A group of disorders characterized by loss of movement or loss of other nerve functions	Decline
•	<b>Cerebral Vascular Disease:</b> A vascular disease of the brain, including abnormalities of the vessels, blood flow, or quality of flow	
	Evidence of white matter changes, small vessel disease, ischemic changes, microvascular changes, infarcts	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Charcot-Marie-Tooth: A slowly progressive disorder that results in wasting of muscles	Decline
	<b>Chemotherapy:</b> The use of chemical substances to treat disease, primarily cytotoxic drugs used to treat cancer	
	Current use	Decline
	Cholecystectomy: Surgical removal of the gallbladder	Preferred
	Cholecystitis: Inflammation of the gallbladder	Preferred
	Cholelithiasis: The presence of gallstones in the gallbladder	Preferred
0	Chronic Fatigue Syndrome: A condition of excessive fatigue, cognitive impairment and other varied symptoms. The cause is unknown and it may last months or years, causing severe disability.  Date of diagnosis?	
	Is the applicant taking any medications? Name(s)	
	Has applicant ever been hospitalized for a chronic fatigue related problem? Date(s)/Details	
	Does the applicant experience any weakness, joint pain, or fatigue? Details	
	Does the applicant have any history of Depression or Fibromyalgia? Details	
	Is the applicant disabled or experience any limitations? Details	
	New onset, <6 months	Postpone 6 months
	Asymptomatic, no limitations, non-disabling, treated with anti-inflammatory medication, >6 months	Select w/90 day E.P.
	Co-existing Fibromyalgia or Depression, asymptomatic, no limitations, non-disabling, >6 months	Class 1*
	Symptomatic, limitations, disabling, or treated with narcotics or steroids	Decline
	<b>Chronic Obstructive Pulmonary Disease:</b> A respiratory disease process that decreases the ability of the lungs to perform ventilation	
	Date of diagnosis?	
	Is applicant taking any medication/inhalers? Name(s)	
	Date of last flare	
	Have pulmonary function tests been performed? Date(s)/Results (FEV1 & FVC%)	
	Has applicant ever used oxygen or steroids? Frequency?	

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

C	OND	ITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
		Chronic Obstructive Pulmonary Disease (continued)	
		Has applicant ever been hospitalized for a respiratory disorder? Date(s)	
		Has the applicant smoked within the past 12 months?	
		Mild, asymptomatic, treatment-free, seen radiographically	Select
		Mild, asymptomatic, treated with <4 medications, normal and stable baseline pulmonary function tests >65% FEV1, >75% FVC Select	Select
		Mild, incidental finding, no history of treatment or other respiratory disorders, smoker	Class 1*
		Moderate, asymptomatic, treated with <4 medications, normal and stable baseline pulmonary function tests, >60% FEV1, >70% FVC	Class 1 w/90 day E.P.*
		Moderate-severe, <4 medications, stable baseline pulmonary function tests, >50% FEV1, >60% FVC	Class 2*
		Recent exacerbation, <3 months	Postpone 3 months
		Exacerbation requiring hospitalization, <6 months	Postpone 6 months
		Symptomatic, severe, daily steroid use, multiple hospitalizations, oxygen use, FEV1 $<\!50\%$ FVC $<\!60\%$	Decline
		Mild with history of treatment or other respiratory disorders, smoker	Decline
		Cirrhosis: A chronic liver disease where the liver is scarred and no longer functions properly	Decline
		Cirrhosis (Primary Biliary Cirrhosis): An inflammation of the bile ducts resulting in narrowing and obstruction of the flow of bile, causing damage to the liver cells	
		Date of diagnosis?	
		Is the applicant taking any medications? Name(s)	
		Has the applicant had a liver biopsy? Date(s)	
		Does the applicant use alcohol?	
		What were the results of the last blood workup (ALT, AST, Alk Phos, GGT)? Date	
		Normal and stable liver function tests, asymptomatic, >12 months	Class 1*
		Abnormal liver function tests or symptomatic	Decline
		Colitis (excluding ulcerative): Inflammation of the large intestine	Preferred

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

DIT	TION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
C	Confusion: Not being aware of or oriented to time, place, or person	
	Asymptomatic, now resolved with normal neuropsychological workup, >12 months	Preferred
	Current or etiology unknown	Decline
	Normal neuropsychological workup with abnormal MRI/CT	Decline
C	ongestive Heart Failure: A condition where the heart loses its ability to pump blood efficiently	
	Date of diagnosis?	
	Is the applicant taking any medications? Name(s)	
	Has the applicant ever been diagnosed with Cardiomyopathy or any other heart disorder? Details	
	Does the applicant have any respiratory disorders? Details	
	Does the applicant experience any shortness of breath or swelling of the lower extremities? Details	
	Has the applicant been hospitalized for any heart or respiratory disorders? Date(s)/Details	
	Single event, asymptomatic, treatment-free, ejection fraction >45%, >6 months	Select w/90 day E.P.
	Chronic, symptomatic, severe, or recurrent	Decline
	History of Cardiomyopathy	Decline
C	or Pulmonale: Enlargement or failure of the right ventricle due to pulmonary hypertension	Decline
	Corneal Impairment: An impairment affecting the cornea, the curved transparent covering the front of the eye	
	No vision loss	Preferred
	Transplant, no vision impairment, >3 months	Preferred
C	oronary Artery Disease: Narrowing of the coronary arteries that supply blood to the heart	
	Date of diagnosis?	
	Is the applicant taking any medications? Name(s)	
	Has the applicant been hospitalized for any heart or circulatory disorders? Date(s)/Details	
	Has applicant undergone heart surgery? Date(s)/Details	
	Does the applicant smoke?	
	Does the applicant have any other heart or circulatory disorders? Details	

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

	DECISION
Coronary Artery Disease (continued)	
Does the applicant have diabetes?	
Asymptomatic, <75% stenosis in any artery, >3 months	Select
Angioplasty/stent, complete recovery, asymptomatic, <75% stenosis in any artery, >3 months	Select
Angioplasty/stent now symptomatic or with limitations	Decline
History of angina, <75 years old, asymptomatic, <75% stenosis in any artery, >3 months	Select w/90 day E.P.
History of angina, >74 years old, asymptomatic, <75% stenosis in any artery, >6 months	Select w/90 day E.P.
Bypass surgery, <75 years old, complete recovery, asymptomatic, <75% stenosis in any artery, >3 months	Select
Bypass surgery, >74 years old, complete recovery, asymptomatic, <75% stenosis in any artery, >6 months	Select
Coronary artery disease, asymptomatic, <75% stenosis, no prior surgery, Smoker	Class 1*
Single heart attack, <75 years old, asymptomatic, <75% stenosis in any artery, >3 months	Select w/90 day E.P.
Single heart attack, >74 years old, asymptomatic, complete recovery, <75% stenosis in any artery, >6 months	Select w/90 day E.P.
Multiple heart attacks (3 or more) or uncontrolled with recurring symptoms	Decline
Stenosis >75% or ejection fraction <40%	Decline
With diagnosis of Diabetes and >25% stenosis in any artery	Decline
CREST Syndrome: A diffuse connective tissue disease characterized by changes in the skin, blood vessels, skeletal muscles, and internal organs	Decline
Crohn's Disease: A chronic inflammatory disease that can affect any part of the gastrointestinal tract	
Date of diagnosis?	
Is the applicant taking any medications? Name(s)/Dosage	
Date of last flare	
Has the applicant ever been hospitalized or had surgery performed (colostomy, colectomy)?  Date(s)/Details	
Is the applicant disabled or experience limitations? Details	

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

COV	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Crohn's Disease (continued)	
	Does the applicant experience problems with continence?	
	New onset or recent exacerbation/flare, <6 months	Postpone 6 months
	Asymptomatic and treatment-free, >6 months	Select
	Asymptomatic, medically managed, no flares, no limitations, non-disabling, >24 months	Select
	Medically managed with occasional flares, no limitations, non-disabling, >6 months	Class 1 w/ 90 day E.P.*
	Chronic steroid therapy $\leq$ 7.5mg per day, no evidence of osteoporosis, asymptomatic, no limitation, non-disabling, >12 months	Class 1 w/90 day E.P. 3 year B.P.
	Colostomy, complete recovery, no limitations, non-disabling, independent management, >6 months	Class 1 w/90 day E.P.*
	Chronic treatment with frequent flares, severe, end stage, multiple surgeries, weight loss, or fecal incontinence	Decline
	Chronic steroid use >7.5mg per day or ≤7.5mg with evidence of Osteoporosis	Decline
	Crutches: Current use	Decline
	<b>Cushing's Syndrome:</b> An endocrine disorder caused by prolonged exposure of the body's tissues to the hormone cortisol, or by excessive use of cortisol or other steroid hormones	
	Medically managed, stable and asymptomatic, no evidence of osteoporosis, >12 months	Class 1*
	Benign adrenal tumors, pituitary adenomas, or ectopic ACTH Syndrome, surgically removed, complete recovery, asymptomatic, treatment-free, >12 months	Select
	Symptomatic with evidence of muscle weakness, chronic fatigue, or recurring infections.	Decline
	Chronic steroid therapy with evidence of osteoporosis	Decline
	Cystic Fibrosis: An inherited disease that affects the respiratory and digestive systems	Decline
	Cystitis: An infection or inflammation of the urinary bladder or urethra	Preferred
	Cyst (Benign): A closed sac or pouch of tissue which can be filled with air, fluid, pus, or other material	Preferred
	Cystocele: A bladder hernia that protrudes into the vagina	Preferred
•	<b>Defibrillator (Internal cardioverter defibrillator – ICD):</b> A device used to treat life-threatening arrhythmias. It continually tracks a person's heart rate, and can correct an abnormally fast heart beat with a defibrillatory shock and/or antitachycardia pacing.	
	Asymptomatic, no limitations, >3 months	Select

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
Deep Venous Thrombosis (DVT): A condition where there is a blood clot in a deep vein	
Date of the event	
Is the applicant on any medication? Name(s)	
Has the applicant been hospitalized? Date(s)	
How many total clots/embolisms has the applicant had? Date(s)	
Has the applicant had a Greenfield Filter implanted? Date	
Does the applicant have any circulatory or respiratory disorders?	
Is the applicant disabled or experience any limitations?	
Single event, complete recovery, no limitations, <6 months	Postpone 6 months
Single event, complete recovery, no limitations >6 months	Select
2-3 episodes within past 60 months, complete recovery, no limitations, >12 months	Class 1*
Single DVT with a single Pulmonary Embolism within past 60 months, complete recovery, >12 months	Class 1*
Greenfield Filter implant, no further events, complete recovery, no limitations, >6 months	Class 1*
>3 episodes, functional limitations, or complications	Decline
Degenerative Disc Disease: The gradual deterioration of the disc between the vertebrae	
Date of diagnosis?	
Is the applicant taking any medications? Name(s)	
Has any testing been performed (X-ray, MRI, or CAT scan)? Date(s)/Results	
What is the severity (mild, moderate, severe)?	
Has the applicant ever undergone any back surgery? Number/Date(s)	
Has the applicant undergone any physical therapy or injections? Date(s)/Details	
Does the applicant experience any pain, numbness or tingling in the legs or arms? Details	
Is the applicant disabled or experience any limitations? Details	
Mild, asymptomatic, no prior treatment	Preferred

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Degenerative Disc Disease (continued)	
	Mild, well controlled, no limitations, non-disabling, treated with non-prescription or prescription medications	Select
	Moderate, successful completion of Physical Therapy, no lower extremity symptoms or limitations, non-disabling, <3 months	Postpone 3 months
	Moderate, successful completion of Physical Therapy, asymptomatic, no limitations, non-disabling, >3 months	Select 90 day E.P.
	Moderate, status post-Physical Therapy, mildly symptomatic, no lower extremity symptoms or limitations, non-disabling, >6 months	Class 1*
	Moderate, status post-injections, no lower extremity symptoms or limitations, non-disabling, <6 months	Postpone 6 months
	Moderate, status post-injection(s), asymptomatic, no lower extremity symptoms or limitations, non-disabling, >6 months	Select w/90 day E.P.
	Moderate, status post-injection(s), mildly symptomatic, no lower extremity symptoms or limitations, non-disabling, >6 months	Class 1 *
	Surgically treated, <75 years old, complete recovery, non-disabling, no limitations or assistance devices, >6 months	Select
	Surgically treated, >74 years old, complete recovery, non-disabling, no limitations or assistance devices, >6 months	Select w/90 day E.P.
	Diagnosed as severe, daily narcotics, chronic pain resulting in limitations or disability, neurological deficit, radiculopathy, or lower extremity symptoms	Decline
	Surgery recommended, use of assistance devices, or multiple spinal surgeries	Decline
0	<b>Degenerative Joint Disease:</b> A chronic musculoskeletal disease causing deterioration of the joint cartilage and the formation of new bone at the margins of the joints	Refer to Osteoarthritis
	Dementia: Cognitive deficit, including memory impairment	Decline
*	Depression: A mental disorder marked by altered mood	
	Date of diagnosis?	
	Is the applicant taking any medications? Names(s)	
	Has this been diagnosed as situational?	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

C	ON	DITIO	N / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
		Dep	ression (continued)	
			Has the applicant ever been hospitalized for depression, anxiety, or other mental illness? Date(s)/Details	
			Has the applicant ever received electroconvulsive shock therapy?	
			Does applicant have any history of anxiety or other mental illness disorders? Details	
			Single episode or situational, recovered, asymptomatic, treatment-free, >6 months	Preferred
			Treated with <4 medications, well controlled, no limitations, non-disabling, >3 months	Select
			Single hospitalization for situational depression, well controlled, no limitations, non-disabling	>6 months, Class 1* >12 months, Select
			Multiple hospitalizations, treatment with an antipsychotic, disabling, or unstable	Decline
		Der	matitis: A skin inflammation	Preferred
		Det	ached Retina: A condition where the retina becomes completely or partially detached	
			Surgically treated, complete recovery, no residual complications, or blindness, >3 months	Preferred
			Legally blind, completely independent, no limitations, >24 months	Class 1 w/ 90 day E.P., 3 year B.P.
¥		Diabetes: A lifelong disease of high blood sugar caused by too little insulin, resistance to insulin, or both		
			Date of diagnosis?	
			What type of diabetes does the applicant have (Juvenile, Type I, Type II)?	
			Is the applicant taking any medications? Name(s)	
			Is the applicant taking any insulin? Type, units/day	
			Does the applicant have any history of circulatory or heart disorders? Details	
			Does the applicant smoke?	
			What is the applicant's most recent glycohemoglobin A1c reading? Date	
			Does the applicant have any history of neuropathy (numbness, pain, or tingling of the extremities), nephropathy (kidney complications), or retinopathy (visual complications)? Details	
			Has the applicant had any amputations? Details	
			New onset or uncontrolled, <6 months	Postpone 6 months
			Treated with diet, oral medications, and or insulin <50 units, A1C <7.0, >6 months	Select

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Diabetes (continued)	
	Treated with diet, oral medications, and or insulin <50 units, A1C 7.0 to 7.5, >6 months	Class 1*
	Treated with diet, oral medications, and or insulin <50 units, A1C 7.6 to 8.0, >6 months	Class 2*
	History of neuropathy, nephropathy, untreated retinopathy, blindness, amputation, or neuropathic ulcers	Decline
	History of TIA, carotid artery disease >25%, peripheral vascular disease >25%, or coronary artery disease >25% in any vessel	Decline
	Juvenile/Type I	Decline
	Diagnosed as brittle	Decline
	Tobacco use within past 12 months	Decline
	Diverticulitis: An inflammation of an abnormal pouch in the intestinal wall, usually found in the colon	
	Single episode, asymptomatic, medically managed, no exacerbations/flares, >3 months	Preferred
	Single hospitalization, complete recovery, asymptomatic, >3 months	Preferred
	Single surgical procedure, complete recovery, asymptomatic, >3 months	Select
	Diverticulosis: An asymptomatic, abnormal pouch in the intestinal wall	Preferred
	<b>Down's Syndrome:</b> A chromosome abnormality resulting in moderate to severe mental retardation and other abnormalities	Decline
*	<b>Drug Abuse/Dependency:</b> Use of any habit-forming or illegal drug (i.e., marijuana, cocaine) for purposes other than those for which it is normally intended, or in a manner or quantities other than directed	
	Drug-free, no limits to activities, >24 months	Select
	Ongoing drug use or cognitive impairment	Decline
0	<b>Dupuytren's Contracture:</b> A painless thickening and contracture of tissue beneath the skin on the palm of the hand	Preferred
	<b>Dwarfism:</b> Abnormally short stature with abnormal body proportions, caused by a deficiency of growth hormone	Decline
	Dyspepsia: Imperfect or painful digestion (indigestion)	Preferred

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Dysphagia: Inability or difficulty swallowing	Preferred
	Edema: Excessive build-up of fluid in the tissues, or an increase in tissue mass	Refer to underlying cause
	Ehlers-Danlos Syndrome: An inherited disorder of the elastic connective tissue	Decline
	Emphysema: A lung disease which involves damage to the air sacs in the lungs	Refer to Chronic Obstructive Pulmonary Disease
•	Endocarditis: Inflammation of the lining membrane of the heart	
	Acute, single episode, <6 months	Postpone 6 months
	Single episode, treatment-free, complete recovery, >6 months	Select
	Recurrent episodes	Decline
	<b>Epstein-Barr:</b> The virus responsible for infectious mononucleosis and is associated with the development of non-Hodgkin's lymphoma in patients with immune compromise	
	Complete recovery, no residuals or complications, >24 months	Select
	Esophagitis: Inflammation of the esophagus	Preferred
	Esophageal Stricture: A narrowing of the esophagus, causing swallowing difficulties	
	Date of diagnosis?	
	Is the applicant taking any medications? Name(s)	
	Has the applicant undergone any dilations? Date(s)	
	Has the applicant ever been hospitalized for an esophageal disorder? Date(s)/Details	
	Single dilation within a 12 month period, asymptomatic, no dysphagia, stable weight, >3 months	Select
	2 dilations within a 12 month period, asymptomatic, stable weight, no dysphagia, >3 months	Class 1*
	3 dilations within a 12 month period, asymptomatic, stable weight, no dysphagia, >3 months	Class 1* w/180 day E.P. or Class 2*
	Multiple or frequent need for dilations, symptomatic, or unstable weight	Decline
	Esophageal Varicies: A dilation of an esophageal vein	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

COV	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Fatty Liver: An accumulation of fat within the liver cells	
	Asymptomatic, treatment-free, normal liver function tests, occasional or no alcohol use	Select
	Abnormal liver function tests or daily alcohol use	Decline
	<b>Feeding Tube</b> : A medical device used to provide nutrition to individuals who cannot do so via the normal oral route	
	Current	Decline
	<b>Felty's syndrome</b> : A disorder characterized by rheumatoid arthritis, an enlarged spleen, a decreased white blood cell count, and recurrent infection	Decline
	Fibrocystic Breast Disease: Common, benign breast changes	Preferred
0	Fibromyalgia: Chronic pain in muscles and soft tissues surrounding joints	
	Date of diagnosis?	
	Is the applicant taking any medications? Name(s)	
	Has applicant ever been hospitalized for any condition related to the Fibromyaliga? Date(s)	
	Does the applicant experience any weakness, joint pain, or fatigue? Details	
	Does the applicant have any history of Depression, Anxiety, or Chronic Fatigue syndrome? Details	
	Is the applicant disabled or experience any limitations? Details	
	New onset or recent flare, <6 months	Postpone 6 months
	Asymptomatic, treatment-free	Select
	Asymptomatic, mild, treated with a single medication	Select
	Asymptomatic, mild, treated with 2-3 medications	Class 1*
	Co-existing Chronic Fatigue Syndrome or Depression, asymptomatic, no limitations, non-disabling, >6 months	Class 1*
	Symptomatic, chronic fatigue, pulmonary compromise, disabling or resulting in limitations	Decline
	Treated with chronic oral steroids or narcotic pain relievers	Decline
	Fissure/Fistula (Anal): A linear ulcer on the margin of the anus	Preferred
	Foot Drop: Foot weakness or paralysis	Refer to underlying cause
		T. Control of the Con

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Forgetfulness: Inability to remember something previously known or learned	
	Current or etiology unknown	Decline
	Asymptomatic, now resolved w/normal neuropsychological workup, >12 months	Select
	History of forgetfulness consistent w/age	Decline
	Normal neuropsychological workup w/abnormal MRI/CT indicating atrophy	Decline
0	Fractures: Sudden breaking of a bone	
	What was the date of the fracture(s)?	
	What bone(s) were affected?	
	What was the cause of the fracture(s)?	
	Does the applicant have any history of osteoporosis? T-Score/Date	
	Did the applicant require PT? Dates(s)	
	Has the applicant fully recovered from the fracture and been released from care?	
	Does the applicant use any type of assistive device (i.e., cane, walker, brace)? Details	
	Is the applicant disabled or experience any limitations?	
	Non-weight bearing traumatic fracture(s) (wrist, finger, arm, toe), complete recovery, treatment free, normal range of motion, non-disabling, no limitations or history of osteoporosis	Preferred
	Weight-bearing traumatic fracture(s) (hip, femur, pelvis, tib-fib, humerus), complete recovery, treatment-free, normal range of motion, non-disabling, no limitations or history of osteoporosis, >3 months	Preferred
	Chronic non-healing fracture(s), evidence of osteomylitis, use of assistance devices, chronic pain, limitations, treatment with narcotic pain relievers, or resulting in disability	Decline
	Gallstones: Calculus formed in the gallbladder or bile ducts	Preferred
	Gastric Bypass/Stapling/Banding: Surgical alteration of the stomach	
	Asymptomatic, complete recovery, no limitations, <24 months	Postpone 24 months
	Asymptomatic, complete recovery, no limitations, >24 months	Select
	Due to disease	Refer to disease

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

C	ONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Gastritis: An inflammation of the lining of the stomach	
	Controlled with medical management	Preferred
	Glaucoma: A condition of increased pressure inside the eye	
	No visual impairment	Preferred
	Progressive vision loss or hospitalization for complications of blindness	Decline
	Glomerulonephritis: A group of kidney diseases caused by inflammation of the internal kidney structures	
	Date of diagnosis?	
	Was condition diagnosed as Acute or Chronic? Details	
	What type of treatment did the applicant receive? Details	
	Has the applicant every undergone dialysis? Date	
	Has the applicant ever been hospitalized for kidney problems? Date(s)/Details	
	What were the results of the last blood workup (Creatinine, BUN)? Date	
	Acute, complete recovery, normal kidney function tests, no kidney damage	Select
	Chronic, abnormal kidney function tests, or treated with dialysis	Decline
	Glucose Intolerance: A state of blood sugar control that is abnormal but not diagnosed as Diabetes	Refer to Diabetes
	Goiter: Enlargement of the thyroid gland that is not associated with inflammation or cancer	Preferred
	<b>Gout:</b> A disease marked by uric acid deposits in the joints, causing painful arthritis especially in the joints of the feet and legs	
	Well controlled on diet or single medication	Preferred
	Well controlled on 2 medications	Select
	Severe recurrent flares	Decline
	Graves' Disease: Over activity of the thyroid gland	Preferred
	Guillain-Barre Syndrome: A disorder involving progressive muscle weakness or paralysis	
	Complete recovery, no residuals or recurrence, >24 months	Select
	Chronic or relapsing symptoms, residual weakness, muscle atrophy, limitations or disabling	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

Joaring Impairment: Decreased ability to hear	<b>DECISION</b> Preferred
Hearing Impairment: Decreased ability to hear	
Heart Attack: A condition when an area of heart muscle dies or is damaged because of an nadequate supply of oxygen to that area	Refer to Coronary Artery Disease
<b>Heart Block:</b> A condition in which the signal from the heart's upper to lower chambers is mpaired or doesn't transmit	
First-degree AV Block, asymptomatic, treatment-free, no underlying cardiac conditions	Preferred
Second-degree AV Block, asymptomatic, no underlying cardiac conditions	Select
Third-degree AV Block, asymptomatic, medically treated or with successful pacemaker implant no underlying cardiac conditions, >3 months	t, Select
Symptomatic with episodes of shortness of breath, dizziness, syncope, or ejection fraction <40	0% Decline
or by failing to open adequately (valve stenosis); either problem can seriously interfere with the neart's ability to pump blood  Date of diagnosis?	
<del>-</del>	
Is the applicant taking any medication? Name(s)	
Has the applicant ever been hospitalized for a heart or circulatory disorder? Date(s)/Details	
Has valvular surgery been performed? Date(s)/ Details	
When was the last echocardiogram performed? Results	
Does the applicant have other heart or circulatory problems? Details	
Does the applicant have other heart or circulatory problems? Details	Preferred
Does the applicant have other heart or circulatory problems? Details  Does the applicant experience any shortness or breath or limitations? Details	Preferred Class 1*
Does the applicant have other heart or circulatory problems? Details  Does the applicant experience any shortness or breath or limitations? Details  Mild, asymptomatic, treatment-free	Class 1*
Does the applicant have other heart or circulatory problems? Details  Does the applicant experience any shortness or breath or limitations? Details  Mild, asymptomatic, treatment-free  Moderate, asymptomatic	Class 1*
Does the applicant have other heart or circulatory problems? Details  Does the applicant experience any shortness or breath or limitations? Details  Mild, asymptomatic, treatment-free  Moderate, asymptomatic  Moderate-severe, asymptomatic, ejection fraction >40%	Class 1* Class 2* w/90 day E.F
Does the applicant have other heart or circulatory problems? Details  Does the applicant experience any shortness or breath or limitations? Details  Mild, asymptomatic, treatment-free  Moderate, asymptomatic  Moderate-severe, asymptomatic, ejection fraction >40%  Severe, symptomatic, surgery recommended, or associated with atrial septal defect	Class 1* Class 2* w/90 day E.F Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

	DECISION
Heart Murmur: An abnormal sound in the heartbeat	
Functional, no treatment	Preferred
Hematuria: Blood in the urine	Refer to underlying cause
Hemochromatosis: A genetic disease that results in excess iron deposits throughout the body	
Date of diagnosis?	
When was the applicant's last phlebotomy?	
Does the applicant have any joint, liver, or pancreatic problems? Details	
What were the results of the last blood workup? Date	
New onset or abnormal blood studies, <6 months	Postpone 6 months
Asymptomatic, stable normal blood studies, on maintenance phlebotomy w/routine follow-ups	Select
Complications, organ or joint involvement, or abnormal blood studies	Decline
<b>Hemophilia</b> : A hereditary bleeding disorder in which it takes a long time for the blood to clot and abnormal bleeding occurs	
Asymptomatic, stable blood studies, >18 months	Select
Symptomatic, continued steroid or antineoplastic treatment, weight loss, or abnormal blood studies	Decline
Hepatitis: An inflammation of the liver	
Date of diagnosis?	
What type of Hepatitis?	
What type of treatment has the applicant received? Date(s)/Details	
Has the applicant ever been hospitalized? Date(s)/Details	
What were the results of the last blood workup? Date	
Does the applicant use alcohol? Frequency/Amount	
Does the applicant use alcohol? Frequency/Amount  Type A, stable normal liver function studies, in remission and treatment-free, >3 months	Select
	Select Select

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

C	ONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	
	Hepatitis (continued)	
	Type C, untreated	Decline
	Chronic, active, currently treated, abnormal liver functions studies or autoimmune	Decline
	<b>Hernia:</b> The protrusion of an organ or a part of an organ through the wall of the cavity that normally contains it	Preferred
	Herpes Zoster: An acute, localized infection, causing painful blistering eruptions	Preferred
	HIV (Human Immunodeficiency Virus): The virus that affects the immune system and causes the disease known as AIDS	Decline
	Hodgkin's Disease: A malignancy found in the lymph nodes, spleen, liver, and bone marrow	
	Date of diagnosis?	
	What stage has the applicant been diagnosed with?	
	What type of treatment has the applicant received?	
	What was the date of the last treatment?	
	Is applicant in complete remission?	
	Has there been any recurrence? Date(s)	
	Stage I and II, complete remission, stable-normal blood studies, asymptomatic, treatment-free, >12 months	Select w/180 day E.P.
	Stage III and IV, complete remission, stable-normal blood studies, asymptomatic, treatment-free, >36 months	Class 1 w/90 day E.P.* or Select w/180 day E.P.
	Home Health Care Services: Current	Decline
	<b>Hunter's Syndrome:</b> A hereditary disease that causes a characteristic facial appearance and abnormal function of multiple organs	Decline
	<b>Huntington's Disease</b> : An inherited condition characterized by abnormal body movements, dementia, and psychiatric problems	Decline
	Hydrocephalus: A disorder associated with excessive fluid in the brain	Decline
	Hypercholesterolemia: An excessive amount of cholesterol in the blood	
	Total cholesterol ≤240, no underlying circulatory disorders	Preferred
	Total cholesterol >240	Select
		1

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

Is the applicant taking any medication? Name(s)  What is the applicant's last three blood pressure readings? Date(s)  Has the applicant ever been hospitalized for hypertension or hypertensive complications?  Date(s)/Details  Does the applicant have any other heart or circulatory problems? Details  Does the applicant have any kidney problems? Details  New onset or uncontrolled, <3 months  Prehypertension, untreated, average readings between 135/85 and 160/90  Select  Average readings <135/85, treated with <4 medications, >3 months  Preferred  Average readings 135/85 to 160/90, treated with <4 medications, >3 months  Poor medical compliance or frequent medication changes  Postpone 3 months  Malignant hypertension or chronically uncontrolled  Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone  Hyperthyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone  Hyperthyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone  Hysterectomy (non-cancerous): Surgical removal of the uterus  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date  Has the applicant ever had a spleenectomy? Date  Has the applicant ever been hospitalized for a blood related disorder? Date(s)/Details	Date of diagnosis?	
Has the applicant ever been hospitalized for hypertension or hypertensive complications?  Date(s)/Details  Does the applicant have any other heart or circulatory problems? Details  Does the applicant have any kidney problems? Details  New onset or uncontrolled, <3 months  Prehypertension, untreated, average readings between 135/85 and 160/90  Select  Average readings <135/85, treated with <4 medications, >3 months  Preferred  Average readings >160/90  Postpone 3 months  Poor medical compliance or frequent medication changes  Malignant hypertension or chronically uncontrolled  Decline  Preferred  Ayperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone  Aysterectomy (non-cancerous): Surgical removal of the uterus  Preferred  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Is the applicant taking any medication? Name(s)	
Date(s)/Details  Does the applicant have any other heart or circulatory problems? Details  Does the applicant have any kidney problems? Details  New onset or uncontrolled, <3 months  Prehypertension, untreated, average readings between 135/85 and 160/90  Select  Average readings <135/85, treated with <4 medications, >3 months  Average readings 135/85 to 160/90, treated with <4 medications, >3 months  Select  Average reading >160/90  Postpone 3 months  Poor medical compliance or frequent medication changes  Malignant hypertension or chronically uncontrolled  Preferred  Hysterectomy (non-cancerous): Surgical removal of the uterus  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectormy? Date	What is the applicant's last three blood pressure readings? Date(s)	
Does the applicant have any kidney problems? Details  New onset or uncontrolled, <3 months  Prehypertension, untreated, average readings between 135/85 and 160/90  Select  Average readings <135/85, treated with <4 medications, >3 months  Preferred  Average readings 135/85 to 160/90, treated with <4 medications, >3 months  Select  Average reading >160/90  Postpone 3 months  Poor medical compliance or frequent medication changes  Postpone 3 months  Malignant hypertension or chronically uncontrolled  Preferred  Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone  Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone  Hysterectomy (non-cancerous): Surgical removal of the uterus  Preferred  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date		
New onset or uncontrolled, <3 months  Prehypertension, untreated, average readings between 135/85 and 160/90  Select  Average readings <135/85, treated with <4 medications, >3 months  Preferred  Average readings 135/85 to 160/90, treated with <4 medications, >3 months  Select  Average reading >160/90  Postpone 3 months  Poor medical compliance or frequent medication changes  Malignant hypertension or chronically uncontrolled  Decline  Preferred  Ayporthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone  Aypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone  Preferred  Aysterectomy (non-cancerous): Surgical removal of the uterus  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Does the applicant have any other heart or circulatory problems? Details	
Prehypertension, untreated, average readings between 135/85 and 160/90  Average readings <135/85, treated with <4 medications, >3 months  Preferred  Average readings 135/85 to 160/90, treated with <4 medications, >3 months  Select  Average reading >160/90  Postpone 3 months  Poor medical compliance or frequent medication changes  Malignant hypertension or chronically uncontrolled  Decline  Preferred  Apperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone  Apperthyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone  Preferred  Apsterectomy (non-cancerous): Surgical removal of the uterus  Preferred  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Does the applicant have any kidney problems? Details	
Average readings <135/85, treated with <4 medications, >3 months  Average readings 135/85 to 160/90, treated with <4 medications, >3 months  Select  Average reading >160/90  Postpone 3 months  Poor medical compliance or frequent medication changes  Malignant hypertension or chronically uncontrolled  Decline  Preferred  Ayporthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone  Preferred  Aypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone  Preferred  Aysterectomy (non-cancerous): Surgical removal of the uterus  Preferred  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	New onset or uncontrolled, <3 months	Postpone 3 months
Average readings 135/85 to 160/90, treated with <4 medications, >3 months  Postpone 3 months  Poor medical compliance or frequent medication changes  Malignant hypertension or chronically uncontrolled  Decline  Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone  Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone  Preferred  Hysterectomy (non-cancerous): Surgical removal of the uterus  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Prehypertension, untreated, average readings between 135/85 and 160/90	Select
Average reading >160/90  Postpone 3 months Poor medical compliance or frequent medication changes  Malignant hypertension or chronically uncontrolled Decline Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone Preferred Hysterectomy (non-cancerous): Surgical removal of the uterus  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Average readings <135/85, treated with <4 medications, >3 months	Preferred
Poor medical compliance or frequent medication changes  Malignant hypertension or chronically uncontrolled  Decline  Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone  Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone  Preferred  Hysterectomy (non-cancerous): Surgical removal of the uterus  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Average readings 135/85 to 160/90, treated with <4 medications, >3 months	Select
Malignant hypertension or chronically uncontrolled  Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone Preferred  Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone Preferred  Hysterectomy (non-cancerous): Surgical removal of the uterus Preferred  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Average reading >160/90	Postpone 3 months
Hypothyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone Hysterectomy (non-cancerous): Surgical removal of the uterus  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Poor medical compliance or frequent medication changes	Postpone 3 months
Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone  Hysterectomy (non-cancerous): Surgical removal of the uterus  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet counts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Malignant hypertension or chronically uncontrolled	Decline
Hysterectomy (non-cancerous): Surgical removal of the uterus  diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormone	Preferred
diopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone	Preferred
Ounts resulting from platelet destruction by the immune system  Date of diagnosis?  What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Hysterectomy (non-cancerous): Surgical removal of the uterus	Preferred
What type of treatment has the applicant received? Date(s)/Details  Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date		
Is the applicant taking any steroids? Dosage  Has the applicant ever had a spleenectomy? Date	Date of diagnosis?	
Has the applicant ever had a spleenectomy? Date	What type of treatment has the applicant received? Date(s)/Details	
	Is the applicant taking any steroids? Dosage	
Has the applicant ever been hospitalized for a blood related disorder? Date(s)/Details	Has the applicant ever had a spleenectomy? Date	
	Has the applicant ever been hospitalized for a blood related disorder? Date(s)/Details	

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Idiopathic Thrombocytopenia Purpura (ITP) (continued)	
	What was the applicant's last platelet count? Date	
	Stable platelet counts ≥100K, asymptomatic, no circulatory disorders, treatment-free	Class 1*
	Stable platelet counts ≥100K, history of spleenectomy, treatment-free	Select
	Chronic steroid therapy, progressive weight loss, or platelet counts <100K	Decline
	Incontinence: The inability to retain urine or feces	
	Type of incontinence (stress, urge urinary, bowel)	
	Is the applicant taking any medication? Name(s)	
	Has the applicant undergone surgery? Date(s)	
	Has the applicant been advised to have surgery? Details	
	Does the applicant require the use of protective undergarments? Details	
	Stress or urge (urinary), well-controlled, self managed	Preferred
	Due to disease	Refer to disease
	Fecal	Decline
	Intravenous (IV) Treatments: The administration of a drug or fluid directly into a vein	
	Current	Decline
	Irritable Bowel Disease: A condition of abnormally increased, spontaneous movement of the small and large intestine	
	Quiescent, stable, medically managed	Preferred
	Severe, end-stage, multiple surgeries, or weight loss	Decline
0	Joint Replacement: The replacement of a joint	
	Treatment-free, no assistive devices, >3 months	Select
	Ongoing PT, limited activity or use of assistance devices	Decline
	Kidney Failure: Failure of the kidney to perform its essential functions	Decline
	Kidney Stones: A condition in which one or more stones are present in the kidney or the urethra	Preferred

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	NDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	<b>Kidney Transplant:</b> A surgical procedure where a healthy kidney is implanted into a person with kidney disease or failure	
	Asymptomatic, normal renal function studies, >36 months	Class 1*
	Symptomatic, abnormal renal function blood studies, or renal failure	Decline
	<b>Labyrinthitis:</b> An ear disorder involving inflammation of the canals of the inner ear, resulting in dizziness	
	Stable, well controlled with medications	Preferred
	Evidence of neurological symptoms or hospitalization, <6 months	Postpone 6 months
0	Laminectomy: The surgical process of removing the lamina (the bony roof of the spinal cord)	
	Date of surgery?	
	Why was the surgery required? Specify condition	
	Is the applicant taking any medication? Name(s)	
	How many back surgeries has the applicant had? Date(s)	
	Does the applicant experience any pain, numbness, or muscle weakness of the legs? Details	
	Is the applicant currently undergoing physical therapy?	
	Is the applicant using any assistance devices (i.e., cane, walker, brace)? Type/Frequency	
	Is the applicant disabled or experience any limitations? Details	
	Age 75 or older, treatment-free, no assistive devices, normal range of motion, >6 months	Select w/90 day E.P.
	Age 74 or younger, treatment-free, no assistive devices, normal range of motion, >6 months	Select
	Hospitalization for symptoms post-surgery, mild parasthesis, or radiculopathy	Decline
	Daily narcotic use, currently undergoing PT or OT, muscle weakness, or wasting	Decline
	Leukemia: A malignancy of the blood-forming cells in the bone marrow	
	Date of diagnosis?	
	What type of leukemia does applicant have? Stage?	
	What type of treatment did applicant receive (surgery, radiation therapy, chemotherapy)?	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CO	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Leukemia (continued)	
	What was the date of the last treatment?	
	Is the applicant in complete remission? Date	
	What were the results of the last blood workup? Date	
	Has there been any recurrence? Date(s)/Details	
	Any complications or residual problems? Details	
	CLL Stage 0 and I, stable normal blood studies, asymptomatic, treatment-free, <12 months	Postpone 12 months
	CLL Stage 0 and I, stable normal blood studies, asymptomatic, treatment-free, >12 months	Select w/90 day E.P.
	CLL Stages II, new onset or abnormal blood studies, <24 months	Postpone 24 months
	CLL Stages II, stable blood studies, treatment-free, >24 months	Class 1*
	CLL Stages III or IV	Decline
	Hairy cell	Decline
	Acute lymphocytic or acute/chronic myelogenous, complete remission, no clinical evidence of disease, stable blood studies, treatment-free, >60 months	Class 1*
	Acute lymphocytic or acute/chronic myelogenous, or abnormal blood studies	Postpone 60 months
	Lou Gehrig's Disease: A disorder causing progressive loss of control of muscles due to destruction of nerve cells in the brain and spinal cord	Decline
0	<b>Lumbar Strain/Sprain:</b> A sudden stressful injury to the lower back, causing stretching or tearing of the muscle, tendons, or ligaments of the lower back	
	Stable with non-steroidal anti-inflammatories, no history of PT or underlying spinal disorders	Preferred
	Symptoms of paresthesia, weakness, wasting, or currently undergoing PT	Postpone 6 months
	<b>Lupus (Systemic Lupus Erythematosus):</b> A chronic, inflammatory auto-immune disorder that may affect organ systems including the skin, joints, and internal organs	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

ITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
<b>Lupus (Discoid):</b> A chronic disease of the skin characterized by remissions and exacerbation of a scaling, red, macular rash	
Date of diagnosis?	
Has a skin biopsy been performed? Results	
Is the applicant taking any medication? Name(s)	
New onset or diagnosis, <12 months	Postpone 12 months
Firm diagnosis, no treatment with oral medications, >12 months	Select
Lyme Disease: A multi-system disorder caused by bacteria transmitted by a tick	
Asymptomatic, no limitations, treatment-free, no neurological or cardiac involvement, >24 months	Preferred
Asymptomatic, no limitations, treatment-free, no neurological or cardiac involvement, <24 months	Select
Symptomatic, neurological, or cardiac impairment	Decline
<b>Lymphedema:</b> Swelling that occurs due to a lymphatic obstruction (a blockage of the lymph vessels, which drain fluid from tissues throughout the body)	
Primary lymphedema, no ulcerations, non-disabling, no limitations	Select
Current or recurrent ulcerations, multiple prescriptions (>2), limitations or disabling	Decline
Lymphoma: A usually malignant lymphoid tumor or growth	
Lymphoma: A usually malignant lymphoid tumor or growth  Date of diagnosis?	
Date of diagnosis?	
Date of diagnosis?  What stage has the applicant been diagnosed with?	
Date of diagnosis?  What stage has the applicant been diagnosed with?  What type of treatment has the applicant received? Date(s)/Details	
Date of diagnosis?  What stage has the applicant been diagnosed with?  What type of treatment has the applicant received? Date(s)/Details  What was the date of the last treatment?	
Date of diagnosis?  What stage has the applicant been diagnosed with?  What type of treatment has the applicant received? Date(s)/Details  What was the date of the last treatment?  Is the applicant in complete remission?	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CO	ND	ITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
		Lymphoma (continued)	
		Complete remission, treatment-free, stable blood studies and renal functions, Stage I and II >12 months	Select w/180 day E.P. or Class 1 w/90 day E.P.*
		New diagnosis Stages III and IV, <48 months	Postpone 48 months
		Complete remission, treatment-free, stable blood studies and renal functions, Stage III and IV, >48 months	Select w/180 day E.P. or Class 1 w/90 day E.P.*
		<b>Macular Degeneration</b> : A disorder that affects the macular (the central part of the retina) causing decreased visual acuity and possible loss of central vision	
		Date of diagnosis?	
		Are both eyes involved?	
		Is there any vision loss? Details	
		Has there been any progression of vision loss? Details	
		Is the applicant legally blind? How long?	
		Does the applicant utilize any assistance or assistance device(s)? Details	
		Is the applicant disabled or experience any limitations? Details	
		New diagnosis, <12 months	Postpone 12 months
		One eye, non-progressive, independent with no limitations, >12 months	Select
		One eye, progressive, independent with no limitations, >12 months	Class 1*
		Bilateral, no deterioration in vision, independent with no limitations, >12 months	Select
		Progressive visual loss, disabling, or with limitations	Decline
		Legally blind, completely independent, no limitations >24 months	Class 1* w/90 day E.P., 3 year B.P.
		Macular Hole: An abnormal opening which forms in the center of the macular over weeks to months	Refer to Macular Degeneration
*		<b>Major Depression:</b> A recurrent emotional state characterized by feelings of persistent sadness, worthlessness, rejection, loss of hope, and loss of interest in usual activities	Refer to Bipolar
		Marfan Syndrome: A hereditary disorder of the connective tissues that affects the skeletal system, cardiovascular system, eyes, and skin	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

ITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
<b>Marie Strumpell Disease:</b> A disease of the connective tissue that results in the inflammation of the joints in the spine known as Ankylosing Spondylitis	Refer to Ankylosing Spondylitis
Memory Loss: The inability to remember or recall bits of information or behavioral skills	
Current or etiology unknown	Decline
Asymptomatic, now resolved w/normal neuropsychological workup, >12 months	Select
History of benign memory loss, now resolved w/normal neuropsychological workup, >12 months	Select
History of memory loss consistent with age	Decline
Normal neuropsychological workup w/abnormal MRI/CT indicating atrophy	Decline
<b>Meniere's Disease</b> : A disorder of the inner ear characterized by abnormal sensation of movement, loss of hearing in one or both ears, or noises and ringing	
Mild, stable, treatment-free or single medication	Preferred
Mild, stable on 2 medications	Select
Diagnosis and treatment underway, hospitalization, or neurological symptoms	Postpone 6 months
<b>Meningitis:</b> An infection which causes inflammation of the membranes covering the brain and spinal cord	
Completely recovered, treatment-free, >12 months	Select
Active, chronic, or current treatment	Decline
Meningioma: A tumor of the protective lining of the brain and spinal cord which is usually benign, some may be malignant	
Date of diagnosis?	
Is the applicant taking any medication? Name(s)	
How many meningiomas does applicant have?	
Miles was the last MDI as having and arrand Describe	
When was the last MRI or brain scan performed? Results	
Has the meningioma been surgically removed or radiated? Date	
· · · · · · · · · · · · · · · · · · ·	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CO	NDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Meningioma (continued)	
	Single tumor, benign, asymptomatic, non-progressive, no neurological deficits or limitations, >12 months	Select
	Single tumor, benign, successfully removed surgically or radiated, asymptomatic, no re-growth, no neurological deficit or complications, >12 months	Select
	Menopausal Symptoms: Symptoms that occur during menopause, such as hot flashes, skin flushing, and mood changes	
	Treated with a single anti-depressant with no prior diagnosis of depression	Preferred
	Diagnosis of depression prior to menopausal symptoms, treated with an antidepressant	Select
	Mental Retardation: Below average general intellectual function with associated deficits in adaptive behavior that occurs before age 18	Decline
	Migraine (infrequent, non-debilitating, single medication): A disorder involving repeated or recurrent headaches, associated with temporary changes in the diameter of the blood vessels in the head	
	Infrequent, non-debilitating, single medication	Preferred
	Well controlled on 2–3 medications	Select
*	Mitral Valve Prolapse: A heart disorder in which the mitral heart valve does not close properly, allowing blood to leak into the left atrium	
	Asymptomatic, treatment-free	Preferred
	Asymptomatic, treated with single medication	Select
	Mixed Connective Tissue Disease (MCTD): An overlap of three connective tissue diseases — Systemic Lupus Erythematosus, Scleroderma, and Polymyositis	Decline
	Monoclonal Gammopathy: A blood disorder where there is a presence of abnormal protein in the blood	
	New diagnosis, <24 months	Postpone 24 months
	Asymptomatic, treatment-free, no progression, >24 months	Select w/180 day E.P. or Class 1*
	Multiple Myeloma: A cancer of the bone marrow	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

(	ON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	*	<b>Multiple Personalities:</b> A state in which two or more personalities alternate in the same individual, usually with each personality unaware of the other	Decline
		<b>Multiple Sclerosis:</b> A disorder of the central nervous system involving decreased nerve function associated with the formation of scars on the covering of nerve cells	Decline
		<b>Muscular Dystrophy:</b> A group of disorders characterized by progressive weakness and loss of muscle tissue	Decline
		Myasthenia Gravis: A disorder characterized by chronic muscle weakness of voluntary muscles	Decline
		Myasthenia Gravis (Ocular): A disorder characterized by chronic muscle weakness that affects the eye muscles in particular	
		New onset, <24 months	Postpone 24 months
		Asymptomatic, treatment-free, no deterioration in vision, no limitations, >24 months	Class 1*
		Myopia: A defect in visual focusing resulting in farsightedness	Preferred
		Narcolepsy: A sleep disorder associated with uncontrollable sleepiness and frequent daytime sleeping	
		Asymptomatic and controlled, >6 months	Select
		Recent onset, flare of symptoms, hospitalization, or injury, or disability secondary to narcoleptic episode	Decline
		<b>Neurogenic Bladder:</b> A urinary bladder problem in which there is abnormal emptying of the bladder; it may empty spontaneously or may not empty at all	
		Date of diagnosis?	
		Is the applicant taking any medication? Name(s)	
		Does the applicant use a catheter at any time? Frequency	
		Does the applicant experience urinary tract infections? Frequency	
		Has the applicant ever been hospitalized for bladder related problems? Date(s)/Details	
		Does the applicant require the use of protective undergarments?	
		Completely independent, no limitations or complications, non-disabling, >12 months	Select
		Independent use of catheter >12 months, <2 urinary tract infections within a 12 month period	Class 1 w/90 day E.P.*
		>2 urinary tract infections within a 12 month period, or chronic antibiotic or narcotic pain reliever treatment	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

COI	NDITI	ON / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Ne	europathy: A disease of the nerves	
		Date of diagnosis?	
		What is the cause of the neuropathy?	
		Is the applicant taking any medication? Name(s)	
		Does the applicant have diabetes, circulatory, or back problems?	
		Does the applicant use any assistive devices (i.e., cane, walker, brace)?	
		Is the applicant disabled or experience any limitations	
		Etiology unknown, new onset, or workup underway, <6 months	Postpone 6 months
		Mild, non-limiting, non-progressive, treatment-free, >6 months	Select
		Mild, non-limiting, non-progressive, on medication, >6 months	Class 1*
		Progressive, uncontrolled, use of adaptive devices, balance problems, or falls	Decline
		Related to disease	Refer to disease
		Polyneuropathy	Decline
		rrsing Home Services: A licensed facility with three or more beds that provides nursing or rsonal care services to the older population, infirm, or chronically ill	
		Current	Decline
*		osessive Compulsive Disorder: An anxiety disorder characterized by the presence of obsessions compulsions  Date of diagnosis?	
		Is the applicant taking any medication? Name(s)	
		Has the applicant ever been hospitalized? Date(s)	
		Is the applicant disabled or experience any limitations? Describe	
		Does applicant have any history of depression, anxiety or other mental illness disorders? Details?	
		New onset or uncontrolled, <6 months	Postpone 6 months
		Asymptomatic, non-disabling, no limitations, <3 medications, >6 months	Select
		Chronic, uncontrolled, limited activities, or disabling	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

C	ON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
		<b>Occupational Therapy:</b> Skilled treatment that assists individuals to relearn physical skills that were lost as a result of an accident or illness	
		Current	Decline
		<b>Organic Brain Syndrome:</b> Any of a large group of acute and chronic mental disorders associated with brain damage or impaired cerebral function	Decline
		<b>Osteoarthritis:</b> A chronic musculoskeletal disease causing deterioration of the joint cartilage and the formation of new bone at the margins of the joints	
		Date of diagnosis?	
		Is the applicant taking any medication? Name(s)	
		What joints are affected?	
		What is the severity (mild, moderate, severe)?	
		Has the applicant received any steroid or Synvisc injections? Date(s)	
		Has the applicant had any orthopedic surgeries or has any been recommended? Date(s)/Details	
		Has the applicant undergone any PT? Date(s)/Results	
		Does the applicant use any assistive devices (i.e., cane, walker, brace)?	
		Asymptomatic, treatment-free	Select
		Mild, treated with anti-inflammatory medication	Select
		Mild, successful completion of PT, full recovery and range of motion	Select
		Moderate, treated with Synvisc injections, asymptomatic, no limitations, no assistance devices, >3 months	Select w/90 day E.P.
		Moderate, treated with steroid injections, asymptomatic, no limitations, no assistance devices, >6 months	Select w/90 day E.P.
		History of joint replacement, treatment-free, no assistance devices, >3 months	Select
		Severe or with surgery recommended	Decline
		Symptomatic with limitations, use of an assistance device, or disabling	Decline
		Treated with chronic narcotic pain relievers, recurrent PT or multiple steroidal injections	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
0	Osteomyelitis: An acute or chronic bone infection	
	Asymptomatic, complete recovery, no limitations, >6 months	Select
	Symptomatic or residuals	Decline
0	Osteopenia: A thinning of the bones, typically the stage before true osteoporosis	
	Preventative treatment, asymptomatic	Preferred
	With single related fracture, asymptomatic, no limitations, non-disabling, >12 months	Class 1 w/90 day E.P.*
0	Osteoporosis: The progressive loss of bone density and thinning of bone tissue	
	Date of diagnosis?	
	Is the applicant taking any medication? Name(s)	
	What were the T-score(s) of the last bone density study? Date	
	Has the applicant had any bone or spinal fractures? Date(s)/Details	
	Does the applicant have degenerative disc disease or scoliosis? Details	
	Does the applicant smoke?	
	What type of exercise does the applicant engage in? Frequency	
	Mild, stable bone densities (-2.5 to -3.0), under treatment	Select
	Moderate, weight-bearing location (pelvis, hip) or spine, stable bone density studies (-3.1 to -3.5), under treatment	Class 1*
	Moderate, stable bone density studies (-3.1 to -3.5), under treatment, w/1 related fracture, >12 months	Class 1 w/90 day E.P.*
	Moderate to severe, weight-bearing location (pelvis, hip) or spine, stable bone density studies (-3.6 to -4.0), under treatment	Class 2 w/180 day E.P.,* 3 year B.P.
	Severe, non-weight-bearing location (wrist, forearm) stable bone density studies (>-4.0), under treatment, no related fractures	Class 1*
	Severe, weight-bearing location (pelvis, hip) or spine, stable bone density studies (>-4.0), under treatment	Decline
	Multiple fractures	Decline
	Oxygen: Current use	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
•	<b>Pacemaker:</b> An implantable battery-powered implantable device that electrically stimulates the heart to contract	
	Asymptomatic, no limitations, >3 months	Select
0	Paget's Disease: A metabolic bone disease that involves bone destruction and re-growth that results in deformity  Date of diagnosis?	
	Is the applicant receiving any treatment? Details	
	What location is affected?	
	Have there been any fractures? Date(s)/Details	
	What were the results of the last blood workup (Alkaline Phosphate level)?	
	Does the applicant experience any bone pain? Details	
	Is the applicant disabled or experience any limitations? Details	
	Of breast	Refer to Cancer (Breast)
	Of bone, seen radiographically, asymptomatic, no limitations, normal Alkaline Phosphate levels, >12 months	Select
	History of fracture, complete recovery, asymptomatic, normal Alkaline Phosphate levels, no limitations, >24 months	Select
	Active, evidence of fractures with bone pain, or elevated Alkaline Phosphate levels	Decline
	Pancreatitis: An inflammation or infection of the pancreas	
	Date of diagnosis?	
	Was the Pancreatitis acute or chronic?	
	Is the applicant taking any medication? Name(s)	
	Has the Pancreatitis completely resolved?	
	What were the results of the last blood workup? Date	
	New onset, <6 months	Postpone 6 months
	Acute, complete recovery, asymptomatic, >6 months	Select
	Chronic, active, or abnormal blood studies	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

ITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
<b>Panic Disorder:</b> Repeated, unpredictable attacks of intense fear, accompanied by severe a symptoms in the body that may last from minutes to hours	nxiety
Date of diagnosis?	
Is applicant taking medication? Name(s)	
Has there been any change in treatment over the past 6 months? Details	
Has applicant ever been hospitalized for a panic disorder or any other type of mental illnes Date(s)/Details	ss disorder?
Does applicant have any history of depression, anxiety or other mental illness disorders?	Details
Is the applicant disabled or experience any limitations? Details	
New onset, treatment-free, no limitations, >3 months	Preferred
Well controlled on <4 medications, no limitations, non-disabling, >3 months	Select
Symptomatic, uncontrolled, resulting in limitations or disability, or multiple emergency re	oom visits Decline
Paralysis/Paresis: Temporary suspension or permanent loss of function, especially loss of sor voluntary motion  Single partial limb, due to trauma, no limitations, >12 months	Class 1 w/90 day E.P.
Two limbs, complete single limb	Decline
Due to disease	Decline
Paraplegia: Paralysis of the lower portion of the body and of both legs	Decline
Parkinson's Disease: A chronic nervous disease characterized by a fine, slowly spreading and difficulty with walking, movement, and coordination	tremor Decline
Paroxysmal Supraventricular Tachycardia: A rapid heart rhythm that occurs inside the a occurs sporadically	itria and
Asymptomatic, treatment-free, no underlying cardiac conditions	Preferred
Asymptomatic, treated with single medication	Select
Asymptomatic, treated with single medication	
Successful pacemaker implant, asymptomatic, no underlying cardiac conditions, >3 m	

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
•	Pericarditis: Inflammation of the pericardium, the sac covering the heart	
	Acute, single episode, <6 months	Postpone 6 months
	Single episode, treatment-free, complete recovery, >6 months	Select
	Recurrent episodes	Decline
•	<b>Peripheral Vascular Disease:</b> A circulatory disease of the peripheral blood vessels that is characterized by narrowing and hardening of the arteries that supply blood to the legs and feet	
	Date of diagnosis?	
	Is the applicant taking any medication? Name(s)	
	Has the applicant smoked within the past 12 months?	
	Does the applicant have any symptoms of claudication, cramping, or pain in the lower extremities?  Details	
	Has the applicant had leg surgery or has any been recommended? Date(s)/Details	
	Does the applicant have diabetes, heart or other circulatory problems? Details	
	Has the applicant experienced any lower extremity skin changes, swelling, or ulcers? Date(s)/Details	
	Mild, asymptomatic, no claudication or limitations, good pulses, >3 months	Select
	Mild, under treatment with a single medication, asymptomatic, no claudication or limitations, good pulses, >3 months	Select
	Surgically treated, complete recovery, asymptomatic, no claudication or limitations, good pulses, >6 months	Select
	With claudication, ulcerations, absent pulses, or history of amputation	Decline
	Tobacco use, <12 months	Decline
	>25% stenosis with diagnosis of Diabetes	Decline
	<b>Physical Therapy:</b> Rehabilitation concerned with the restoration of function and the prevention of disability following disease, injury, or loss of a body part	
	Current treatment for bursitis, tendonitis, carpal tunnel syndrome, or a non-weight bearing fracture	Preferred
	Current treatment for degenerative disc disease, spinal stenosis, or osteoarthritis	Refer to disease

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

ITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
Pituitary Tumor: A growth that arises in the pituitary gland	
Benign, asymptomatic, stable with no growth, monitored annually, <12 months	Postpone 12 months
Benign, stable, treatment-free, >12 months	Preferred
Benign, successfully removed surgically or treated with radiation therapy, complete recovery, asymptomatic, no limitations or residual complications, >6 months	Select
Progressive growth, symptomatic, or recommended surgery or radiation therapy	Decline
neumonia: An inflammation of the lungs caused by an infection	
Complete recovery, asymptomatic, no underlying respiratory disorders	Preferred
<b>Polycystic Kidney Disease</b> : An inherited kidney disorder that enlarges the kidneys and interferes with their function because of multiple cysts on the kidneys	
Date of diagnosis?	
Is the applicant taking any medications? Name(s)	
What were the results of the last blood kidney profile (Creatinine, BUN)? Date	
Has surgery been recommended? Details	
Has the applicant ever received dialysis? Details	
Normal kidney function studies, no kidney damage or limitations	Select
Abnormal kidney function studies, progressive, or with surgery recommended	Decline
Polycythemia Vera: A blood disorder characterized by abnormal increase in red blood cells resulting from increased blood cell production by the bone marrow	
Date of diagnosis?	
Is applicant taking any medications? Name(s)	
When was the applicants last phlebotomy?	
Has the applicant every had a transient ischemic attack, blood clot, or gastrointestinal bleed? Details	
Does the applicant have any ongoing fatigue or anemia? Details	
Has there been any indication of progression to Leukemia? Details	

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Polycythemia Vera: (continued)	
	Stable blood studies, successfully treated with maintenance phlebotomies, >12 months	Select
	Stable blood studies, treated with hydroxeuria, asymptomatic, >12 months	Class 1*
	Neurological complaints, symptomatic, chronic fatigue, progression to Leukemia, or weight loss	Decline
	History of Transient Ischemic Attack (TIA)	Decline
0	<b>Polymyalgia Rheumatica:</b> A disorder of unknown cause, usually afflicting persons over the age of 50, involving pain and stiffness in the hip and shoulder area	
	Date of diagnosis?	
	Is the applicant taking any medication? Name(s)/Dosage	
	When was the last flare? Date	
	Does the applicant have any osteoarthritis or back disorders? Details	
	Is the applicant disabled or experience any limitations? Details	
	New onset, recent flare, <12 months	Postpone 12 months
	Asymptomatic, in remission and treatment-free, >6 months	Select
	Asymptomatic, well controlled on chronic steroid therapy <7.5mg daily, no evidence of osteoporosis, <6 months	Class 1*
	Symptomatic, daily narcotic use, muscle weakness or wasting	Decline
0	<b>Polymyositis</b> : A systemic connective tissue disease, characterized by inflammation and degeneration of the muscles	
	Asymptomatic, in remission, treatment-free, >12 months	Select
	Active, chronic steroid therapy, currently undergoing PT or OT, or muscle weakness or wasting	Decline
	<b>Polyps (Benign):</b> A growth that projects, usually on a stalk; commonly found in vascular organs such as the nose, uterus, colon, and rectum	Preferred
	<b>Post Polio Paralytic Syndrome</b> : A variety of musculoskeletal symptoms and muscular atrophy that create new difficulties with activities of daily living 25 to 30 years after the original attack of acute paralytic poliomyelitis	Decline

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

NO.	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
*	Post Traumatic Stress Syndrome (PTSS): A psychiatric illness that can occur following a	
	psychologically traumatic event that is generally outside the range of usual human experience	
	Date of diagnosis?	
	Is the applicant taking any medications? Name(s)	
	Has the applicant been hospitalized for PTSS or any other mental illness disorder? Date(s)/Details	
	Does applicant have any history of depression, anxiety or other mental illness disorders? Details	
	Is the applicant disabled or experience any limitations? Details	
	New diagnosis or uncontrolled, <3 months	Postpone 3 months
	Well controlled on <4 medications, no limitations, non-disabling, >3 months	Select
	Symptomatic, uncontrolled, or resulting in limitations or disability	Decline
<b>Y</b>	Premature Atrial Contractions (PACs): An early or premature heartbeat originating from the atria	
	Asymptomatic, no underlying cardiac condition, treatment-free	Preferred
	Asymptomatic, treated with single medication	Select
<b>*</b>	<b>Premature Ventricular Contractions (PVCs):</b> An early or premature heartbeat originating from the ventricle	
	Asymptomatic, no underlying cardiac condition, treatment-free	Preferred
	Asymptomatic, treated with single medication	Select
	Prolapsed Bladder: Falling or sliding of the bladder from its normal position	Preferred
	<b>Prostatic Hypertrophy (Benign):</b> A non-malignant enlargement of the prostate due to excessive growth of prostatic tissue	Preferred
	Prostatism: Any condition of the prostate that interferes with the flow of urine from the body	Preferred
		Refer to Rheumatoid
0	Psoriatic Arthritis: Arthritis associated with psoriasis	Arthritis

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CONDIT	TION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Pulmonary Embolism: A blockage of an artery in the lungs by a blood clot or an	
□   u	nknown substance	
	Date of the event?	
	Is the applicant on any medication? Name(s)	
	Has the applicant been hospitalized? Date(s)	
	How many total clots/embolisms has the applicant had? Date(s)	
	Has the applicant had a Greenfield Filter implanted? Date	
	Does the applicant have any circulatory or respiratory disorders or complications?	
	Is the applicant disabled or experience any limitations?	
	Single event, no complications, <12 months	Postpone 12 months
	Single event, no complications, >12 months	Select
	Recurrent events, complete recovery, no complications, >12 months	Class 1*
	Pulmonary Fibrosis: A respiratory condition of unknown cause, characterized by scarring, hickening, and inflammation of the deep lung tissues  Localized, incidental finding on chest x-ray, normal pulmonary function tests,	
	no underlying respiratory disease, >6 months	Select
	Hospitalization or respiratory problems, <6 months	Postpone 6 months
	Hospitalization or exacerbation, complete recovery, asymptomatic, stable baseline pulmonary function tests >65% FEV1, >75% FVC, >6 months	Select
	Hospitalization or exacerbation, complete recovery, asymptomatic, stable baseline pulmonary function tests >60% FEV1, >70% FVC, >6 months	Class 1* w/90 day E.P.
	Symptomatic, chronic steroid therapy, oxygen use or heart failure	Decline
	<b>Pulmonary Hypertension:</b> A chronic and deadly disease characterized by increased pulmonary ressure and right-sided heart failure	
	Incidental finding by echocardiogram, asymptomatic, treatment-free, pulmonary pressure $\leq$ 35%	Select
	Symptomatic, under treatment, or pulmonary pressure >35%	Decline
	ressure and right-sided heart failure  Incidental finding by echocardiogram, asymptomatic, treatment-free, pulmonary pressure ≤35%	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	
	Quadriplegia: Paralysis of all four extremities and usually the trunk, caused by injury to the spinal cord	Decline
	Quad Cane: A cane that has a broad base on four short "feet"	
	Current	Decline
	Radiation Therapy: Treatment that kills malignant cells and shrinks tumors by utilizing high-dose x-rays or other high energy rays	
	Current	Decline
	Raynaud's Phenomenon: Sporadic attacks of blood vessel spasms resulting in interruption of blood flow to the fingers, toes, ears, and nose, caused by exposure to the cold or strong emotions	
	Date of diagnosis?	
	Is the applicant taking any medication? Name(s)	
	Does the applicant have any history of Lupus, Scleroderma, or Connective Tissue Disease? Details	
	Has the applicant had any amputations? Date(s)/Details	
	Asymptomatic, treatment-free	Preferred
	Stable, treated with <3 medications, no systemic involvement or limitations	Select
	Treated with 3 or more medications	Decline
	<b>Rectocele:</b> Protrusion or herniation of the posterior vaginal wall with the anterior wall of the rectum through the vagina	
	Asymptomatic	Preferred
	With fecal incontinence	Decline
	<b>Reflex Sympathetic dystrophy (RSD):</b> A pain syndrome caused by an abnormal sympathetic nervous reflex. This gives rise to a pain response that is out of proportion to, and inconsistent with the injury.	Decline
	Respirator: A machine to aid with breathing	Decime
	Current use	Decline
	Respiratory Infection: An infection occurring in the organs involved in breathing	Decime
	Acute event, no underlying pulmonary disease	Preferred

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

ITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
<b>Restless Leg Syndrome:</b> A sleep disorder characterized by leg discomfort during sleep, which is only relieved by frequent movements of the legs	
Date of diagnosis?	
Is the applicant taking any medication? Name(s)	
Does the applicant have sleep apnea?	
New onset, well controlled on single medication	Select
Well controlled on 2 medications	Class 1*
Treated with >2 medications	Decline
Retinitis Pigmentosa: A progressive degeneration of the retina in the eye that affects night vision and peripheral vision	
New onset, <12 months	Postpone 12 months
One eye, non-progressive, >12 months	Select
Bilateral, no deterioration in vision, completely independent, >12 months	Class 1*
Progressive visual loss, or existing neurological symptoms	Decline
Legally blind, completely independent, no limitations, >24 months	Class 1 w/90 day E.P., 3 year B.P.
Rheumatoid Arthritis: A chronic, inflammatory, systemic disease that primarily affects the joints and surrounding tissues but also affects other organ systems within the body	
Date of diagnosis?	
Is the applicant taking any medication? Name(s)/Dosage	
Is the RA classified as juvenile or was it diagnosed prior to age 25?	
Does the applicant have any joint swelling or limited range of motion? Details	
Does the applicant have joint deformities? Details	
Has the applicant had any joint repair or replacement? Date(s)/Details	
Has the applicant had to have any joints aspirated to remove fluid? Date(s)/Details	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

1	ION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
R	heumatoid Arthritis (continued)	
	Asymptomatic, normal range of motion, treatment-free, no assistance devices or joint replacement, no limitations, non-disabling	Select
	Asymptomatic, on non-steroidal maintenance medications, no joint deformities or limitations	Select w/90 day E.P.
	Asymptomatic, on chronic steroid therapy, ≤5 mg daily, no limitations, non-disabling	Class 1*
	Asymptomatic, 2–3 flares per year on non-steroidal maintenance medications and steroid taper only, >6 months	Class 2* w/90 day E.P.
	History of joint replacement, treatment-free, no assistance devices, no limitations, non-disabling, >6 months	Select w/90 day E.P.
	History of joint replacement, on non-steroidal maintenance medications, no assistance devices or limitations, non-disabling, >6 months	Class 1* w/90 day E.P.
	Asymptomatic, on non-steroidal maintenance medications (i.e., Plaquenil, MTX) with chronic steroid treatment	Decline
	Symptomatic, severe or multiple joint deformities, multiple joint replacements (>2), limitations, disabling, or current PT or OT	Decline
	Juvenile diagnosis	Decline
	arcoidosis: A disease of unknown cause in which inflammation consisting of granulomas occurs lymph nodes, lungs, liver, eyes, skin, and other tissues	
	Date of diagnosis?	
	What areas of the body are affected?	
	Is the applicant taking any medication? Name(s)	
	If lung involvement, have pulmonary function tests been performed? Date/Results (FEV1 & FVC%)	
		Postpone 12 months
	If lung involvement, have pulmonary function tests been performed? Date/Results (FEV1 & FVC%)	Postpone 12 months Select
	If lung involvement, have pulmonary function tests been performed? Date/Results (FEV1 & FVC%)  New onset, <12 months  Asymptomatic, no complications or limitations, treatment-free, if lung involvement baseline	·

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Schwannoma: A benign tumor situated in the hearing canal	
	Has the neuroma been removed? Date	
	Has there problems with balance or falls? Details	
	Has there been any seizure activity? Date of last seizure?	
	Is applicant taking any medication? Name(s)	
	Is the applicant receiving physical therapy?	
	Surgically removed, complete recovery, no seizures or residuals other than hearing loss	Preferred
	Present neuroma, current seizure activity, balance disturbance or falls, or inoperable tumors	Decline
0	<b>Sciatica:</b> A condition involving impaired movement and/or sensation in the leg, caused by damage to the sciatic nerve	
	Asymptomatic, normal range of motion, treatment-free >12 months	Preferred
	<b>Scleroderma:</b> A diffuse connective tissue disease characterized by changes in the skin, blood vessels, skeletal muscles, and internal organs	Decline
	<b>Scleroderma Morphea:</b> A localized form of scleroderma that affects the skin with no internal organ involvement	
	Localized to the skin w/biopsy confirmation, no internal organ involvement, no oral medications	Preferred
0	Scoliosis: A lateral (away from the middle) or sideways curvature of the spine	
	Is the applicant on any medication? Name(s)	
	Does the applicant have osteoporosis? T-Score?	
	Has the applicant undergone any physical therapy? Date	
	Has the applicant had any back surgeries performed? Date(s)/Details	
	What is the severity (mild, moderate, severe)?	
	Does applicant have any associated pulmonary problems?	
	Mild, asymptomatic and treatment-free, >6 months	Preferred
	Mild, symptomatic, on prescription medication	Select
	Moderate, treated with <3 medications, asymptomatic, no limitations, non-disabling	Select

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

ITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DE	VICES / APPLIANCES	DECISION
Scoliosis (continued)		
Moderate, status post Physical Therapy or steroid injection(s),	<6 months	Postpone 6 months
Moderate, status post Physical Therapy or injections(s), asympton non-disabling, >6 months	tomatic, no limitations,	Select w/90 day E.P.
Moderate, status post-Physical Therapy, mildly symptomatic, no >6 months	o limitations, non-disabling,	Class 1*
Moderate, status post-injections, mildly symptomatic, no limita	ations, non-disabling, >6 mo	nths Decline
Mild to moderate with osteoporosis of the spine, stable bone compressions fractures or limitations, asymptomatic, non-disal	-	no Class 1*
With osteoporosis of the spine, stable bone density studies (>-3	.5) or with compression fract	ure(s) Decline
Severe, with limitations or any pulmonary compromise, multip	le surgeries, or disabling	Decline
Scooter: Current use		Decline
Seizure Disorder: A sudden violent, uncontrollable contraction of	a group of muscles	
Seizure Disorder: A sudden violent, uncontrollable contraction of a Date of diagnosis?	a group of muscles	
	a group of muscles	
Date of diagnosis?	a group of muscles	
Date of diagnosis?  When was the applicant's last seizure?	a group of muscles	
Date of diagnosis?  When was the applicant's last seizure?  What type of seizures does applicant have?	a group of muscles	
Date of diagnosis?  When was the applicant's last seizure?  What type of seizures does applicant have?  What is the cause?	a group of muscles	
Date of diagnosis?  When was the applicant's last seizure?  What type of seizures does applicant have?  What is the cause?  Is the applicant on any medication? Name(s)	a group of muscles	Postpone 12 months
Date of diagnosis?  When was the applicant's last seizure?  What type of seizures does applicant have?  What is the cause?  Is the applicant on any medication? Name(s)  Has the applicant had a recent EEG and/or MRI? Date, Results	a group of muscles	Postpone 12 months Select
Date of diagnosis?  When was the applicant's last seizure?  What type of seizures does applicant have?  What is the cause?  Is the applicant on any medication? Name(s)  Has the applicant had a recent EEG and/or MRI? Date, Results  New onset or episode, <12 months	a group of muscles	•
Date of diagnosis?  When was the applicant's last seizure?  What type of seizures does applicant have?  What is the cause?  Is the applicant on any medication? Name(s)  Has the applicant had a recent EEG and/or MRI? Date, Results  New onset or episode, <12 months  Well controlled, seizure-free, normal EEG/MRI, >12 months	oinal fluid from the brain and	Select Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
•	<b>Sick Sinus Syndrome</b> : A form of bradycardia in which the sinoatrial node (the heart's natural pacemaker) is not functioning properly	
	Successful pacemaker implant, asymptomatic, no underlying cardiac conditions, >3 months	Select
	Symptomatic with episodes of syncope or near-fainting, shortness of breath, dizziness, weakness, or ejection fraction <40%	Decline
	<b>Sickle Cell Anemia</b> : An inherited chronic blood disease in which the red blood cells function abnormally and break down, causing recurrent painful episodes	Decline
*	Sinus Bradycardia: Abnormally slow sinus rhythm	
	Asymptomatic, treatment-free, no underlying cardiac condition	Preferred
	Successful pacemaker implant, asymptomatic, no underlying cardiac condition, >3 months	Select
	Symptomatic with episodes of syncope or near fainting, shortness of breath, dizziness, or ejection fraction <40%	Decline
*	Sinus Tachycardia: A fast rhythm (more than 100 beats per minute) originating at the sinus node	
	Asymptomatic, treatment-free, no underlying cardiac condition	Preferred
	Successful pacemaker implant, asymptomatic, no underlying cardiac condition, >3 months	Select
	Symptomatic with episodes of syncope or near fainting, shortness of breath, dizziness, or ejection fraction <40%	Decline
	<b>Sjogren's Syndrome</b> : A systemic, inflammatory disorder characterized by dry mouth, decreased tearing, and other mucous membranes often associated with auto-immune rheumatic disorders	
	Asymptomatic, treatment-free	Preferred
	Well controlled and stable, treated with <3 medications, no systemic involvement	Select
	Due to disease	Refer to disease
	Sleep Apnea: Repeated, prolonged episodes of cessation of breathing during sleep	
	Date of diagnosis?	
	Does the applicant require the use of CPAP or BIPAP?	
	Does the applicant require the use of supplemental oxygen with their breathing device?	
	Have pulmonary function tests been performed? Date and results (FEVI and FVC%)	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

ON	IDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Sleep Apnea (continued)	
	Does the applicant have any other respiratory conditions? Details	
	Does the applicant smoke? Frequency	
	Mild, treatment compliance, stable pulmonary function tests	Select
	Respiratory compromise or failure, non-compliance, or oxygen use	Decline
	<b>Social Security Disability Benefits:</b> A federal assistance program for disabled people who have paid Social Security taxes or are dependents of people who have paid	
	Currently receiving	Decline
	<b>Spastic Colon:</b> A condition of abnormally increased spontaneous movement of the small and large intestine, generally exacerbated by emotional stress	Preferred
	<b>Speech Therapy:</b> The corrective or rehabilitative treatment of physical and/or cognitive deficits/disorders resulting in difficulty with verbal communication	
	Currently receiving	Decline
0	Spina Bifida: A congenital disorder where the backbone and spinal cord do not close before birth	Decline
0	<b>Spina Bifida (Occulta):</b> The least dangerous form of spina bifida, in which bones in the spine fail to close but there is no protrusion of the spinal cord or its fluid cushion out of the body	
	Asymptomatic and treatment-free since diagnosis	Select
	Spinal Cord Injury: An injury to the spinal cord	Decline
	<b>Spinal Stenosis:</b> A narrowing of the lumbar or cervical spine canal, which causes compression on nerve roots	Refer to Degenerative Disc Disease
0	Spondylolisthesis: Forward slippage of a lumbar vertebra on the vertebra below it	Refer to Degenerative Disc Disease
	<b>Squamous Cell Carcinoma (disease- and treatment-free):</b> A malignant skin tumor involving the middle portion of the epidermal skin layer	
	Localized to the skin w/biopsy confirmation, no internal organ involvement	Preferred
	Of an internal organ	Refer to Cancer (Internal)
	Stairlift: a mechanical device which transports people up and down stairs	
	Current use	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

ONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES		DECISION	
•	<b>Stroke (CVA):</b> Occurs when the blood supply to any part of the brain is interrupted, resulting in the death and loss of brain function and tissue	Decline	
	Subdural Hematoma: A collection of blood on the surface of the brain		
	New onset, <12 months	Postpone 12 months	
	Complete recovery, no limitations or cognitive deficits, >12 months	Select	
	Diagnosed as chronic, with limitations or cognitive deficit	Decline	
	<b>Surgery:</b> Recommended or anticipated minor or day surgery recommended for hernia, gallbladder, cataracts, or bunions	Preferred	
	Syncope: A transient loss of consciousness due to inadequate blood flow to the brain		
	Date of diagnosis?		
	What is the cause of the syncope?		
	What type of work-up has the applicant undergone?		
	Is the applicant receiving any treatment? Details		
	How many episodes has the applicant had?		
	Does the applicant have any heart or neurological disorders?		
	Benign, vasovagal, >3 months	Preferred	
	Due to disease	Refer to disease	
	Unknown etiology or recurring episodes	Decline	
	Tendonitis: Inflammation of a tendon	Preferred	
	<b>Tennis Elbow:</b> Inflammation of the muscles of the forearm, or their tendons near the origin on the humerus (bone of the upper arm)	Preferred	
	Thrombocythemia (Essential): A blood disorder characterized by an increase in the number of blood platelets		
	Date of diagnosis?		
	Is the applicant taking any medication? Name(s)		
	What are the applicant's platelet levels? Date		

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

C	INC	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
		Thrombocythemia (Essential) (continued)	
		Does the applicant require phlebotomies? Frequency	
		Has the applicant ever had a Transient Ischemic Attack (TIA) or have any heart or circulatory disorders?	
		Does the applicant smoke?	
		New onset or abnormal platelet counts, <12 months	Postpone 12 months
		Normal stable platelet counts <750K, treatment-free, asymptomatic, no circulatory disorders or tobacco use, >12 months	Class 1*
		<b>Thrombocythemia:</b> Chronically elevated platelet counts >750,000, under treatment, with circulatory disorders or tobacco use, or evidence of progression to Leukemia	Decline
		Tobacco Use: Cigarettes, pipe, cigars, chew, or snuff	
		Abstinence, >12 months	Preferred
		Current use or abstinence <12 months	Select
		<b>Tourette's Syndrome:</b> A disorder characterized by repetitive muscle movements and vocal outbursts	Decline
		<b>Tracheotomy:</b> A surgical opening made through the neck into the breathing tube (trachea) in order to bypass the mouth and throat	Decline
•	*	<b>Transient Global Amnesia:</b> A memory disorder seen in middle-aged and elderly persons; characterized by an episode of amnesia and bewilderment that lasts for several hours; person is otherwise alert and intellectually active	
		Date of episode?	
		Has the applicant had any similar episodes in the past? Date(s)/Details	
		Does the applicant have diabetes, heart, or circulatory problems?	
		Was the applicant hospitalized?	
		What were the results of testing performed? (carotid studies, MRI/CT of brain)?	
		Does the applicant have any residual symptoms (memory loss/confusion, dizziness)?	
		Single episode, asymptomatic, no cognitive or physical residuals, >12 months	Class 1 w/90 day E.P.*
		2 episodes	Decline
		Residual cognitive or physical abnormalities	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

	DN / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	nsient Ischemic Attack: A brain disorder caused by temporary disturbance of blood supply an area of the brain, resulting in a sudden, brief decrease in brain functions	
10 6	Date of episode?	
	Has the applicant had any similar episodes in the past? Date(s)/Details	
	Does the applicant have diabetes, heart or circulatory problems?	
	Was the applicant hospitalized?	
	What were the results of testing performed? (carotid studies, MRI/CT of brain)?	
	Does the applicant have any residual symptoms (memory loss/confusion, dizziness)?	
	Does the applicant smoke?	
	Is the applicant disabled or experience any limitations?	
	Single episode, asymptomatic, no cognitive or physical residuals, >12 months	Class 1 w/90 day E.P.
	2 episodes	Decline Decline
	Single episode with diabetes or residual cognitive or physical abnormalities	Decline
	nsverse Myelitis: A neurological disorder caused by inflammation across both sides of one el, or segment, of the spinal cord	Decline
Tre	mor: An involuntary type of shaking movement	
	Date of diagnosis?	
	Is the applicant taking any medication or had any surgical implants? Name(s)	
	Has the applicant had a neurological evaluation? Date	
	What type of tremor has been diagnosed?	
	Has there been any progression of the tremor? Details	
	Is the applicant disabled or experience any limitations or require any assistance?	
	Negative neurological work-up, diagnosed as benign, essential, intention or familial, non-progressive, no limitations, non-disabling, untreated	Select
	Absent neurological work-up, diagnosed as benign, essential, intention or familial,	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

COI	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Tremor (continued)	
	Negative neurological work-up, diagnosed as benign, essential, intention or familial, non-progressive, no limitations, non-disabling, treated with a non-antiparkinson medication (i.e., Propranolol or Primidone)	Select
	Absent neurological work-up, diagnosed as benign, essential, intention or familial, non-progressive, no limitations, non-disabling, treated with a non-antiparkinson medication (i.e., Propranolol or Primidone), >12 months	Select
	Negative neurological work-up, diagnosed as benign, essential, intention or familial, non-progressive, no limitations, non-disabling, treated with >1 medication, >12 months	Class 1*
	Due to an underlying disease	Refer to disease
	Benign, essential, intention or familial with limitations or resulting in disability	Decline
	Benign, essential, intention or familial w/progression or treatment with an anti-Parkinson's medication, a neurostimulator implant, or >2 medications	Decline
	<b>Tuberculosis:</b> A contagious bacterial infection; the lungs are primarily involved, but the infection can spread to other organs	
	Acute episode, treatment-free, asymptomatic, baseline pulmonary function tests, FEV1 $>65\%$ , FVC $>75\%$ , $<6$ months	Postpone 6 months
	Acute episode, treatment-free, asymptomatic, baseline pulmonary function tests, FEV1 $>65\%$ , FVC $>75\%$ , $>6$ months	Select
	Symptomatic or evidence of residual disease, reduced pulmonary function tests, or oxygen use	Decline
	<b>Tumor (Benign):</b> excluding brain and pituitary tumors: A spontaneous growth of tissue which forms an abnormal mass	Preferred
	<b>Ulcerative Colitis:</b> A chronic, episodic, inflammatory disease of the large intestine and rectum characterized by bloody diarrhea	
	Date of diagnosis?	
	Is the applicant taking any medications? Name(s)/Dosage	
	Date of last flare?	
	Has the applicant ever been hospitalized for a bowel disorder? Date(s)/Details	
	Has the applicant had surgery performed (colostomy, colectomy)? Date(s)/Details	

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
Ulcerative Colitis (continued)	
Is the applicant disabled or experience limitations? Details	
Does the applicant experience problems with continence?	
New onset, recent exacerbation or flare, <6 months	Postpone 6 months
Asymptomatic, medically managed, no exacerbations/flares, >6 months	Select
Asymptomatic, medically managed w / occasional bowel obstructions/flares, >6 months	Class 1* w/90 day E.F
Chronic steroid therapy $\leq$ 7.5mg per day, no evidence of osteoporosis, asymptomatic, no limitations, non-disabling, $>$ 12 months	Class 1* w/90 day E.F
Colostomy, ileostomy, complete recovery, no limitations, non-disabling, independent management, >6 months	Class 1 w/90 day E.P., 3 year B.P.
Frequent exacerbations/flares, multiple surgeries, weight loss, surgery recommended, or incontinence	Decline
Chronic steroid use >7.5mg per day or ≤7.5mg per day with evidence of Osteoporosis	Decline
<b>Ulcer (Gastric, Duodenal, Peptic):</b> An erosion or open sore in the lining of the area of the stomach or duodenum lining	
Stable, asymptomatic, no history of bleeds	Preferred
GI bleed or hospitalization, complete recovery, asymptomatic, no limitations, >6 months	Select
Urethral Stricture: An abnormal narrowing of the urethra	
Date of diagnosis?	
Is the applicant taking any medication?	
Has the applicant been dilated? Frequency	
Has the applicant undergone any surgical procedures? Date(s)/Details	
Does the applicant have recurrent urinary tract infections? Frequency	
Does the applicant require catheterization? Frequency	
Does the applicant have any problems with continence? Explain	
Does the applicant experience any incontinence? Details	
Asymptomatic, treatment-free, no recurrent urinary tract infections, >12 months	Preferred

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

CON	DITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	Urethral Stricture (continued)	
	Independent use of an intermittent catheter, no recurrent urinary tract infections, >12 months	Class 1*
	Treated with <3 dilations within a 12 month period, stable, no recurrent urinary tract infections or incontinence >3 months	Select
	Treated w/dilations (3) within a 12 month period, stable, no recurrent urinary tract infections or incontinence >3 months	Class 1*
	Surgically treated, complete recovery, asymptomatic, >12 months	Select w/90 day E.P.
	Recurrent urinary tract infections, incontinence, surgery recommended or anticipated, chronic daily antibiotic treatment, abnormal renal functions (creatinine >2.0, BUN >35)	Decline
	Varicose Veins: Enlarged, twisted veins just below the surface of the skin, caused by defective valves in the veins, usually located in the legs	
	No underlying vascular disease or ulcerations	Preferred
	Vein stripping, completely recovered	Preferred
	Venous stasis ulcer, completely healed, asymptomatic, treatment-free, >3 months	Select
	Non-healing ulcers, recurrent ulcers, or claudication	Decline
	Ventilator: A machine that controls or assists breathing; a respirator	Decline
¥	Ventricular Fibrillation: A rapid and irregular heartbeat arising from the lower chambers of the heart	
	New onset, <3 months	Postpone 3 months
	Successful defibrillator implant, asymptomatic, ejection fraction $\geq$ 40%, no underlying cardiac conditions, $>$ 3 months	Select
	Uncontrolled, episodes of chest pain, shortness of breath, syncope or near syncope, dizziness, or ejection fraction <40%	Decline
•	Ventricular Tachycardia: A rapid heartbeat originating from the lower chambers of the heart	
	New onset, <3 months	Postpone 3 months
	Successful defibrillator implant, asymptomatic, ejection fraction $\geq$ 40%, no underlying cardiac conditions, $>$ 3 months	Select
	Uncontrolled or episodes of chest pain, shortness of breath, dizziness, syncope, or near syncope, or ejection fraction <40%	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

Vertebral Basilar Insufficiency: Insufficient blood flow to the back parts of the brain  Vertigo: A feeling of faintness or lightheadedness, making it difficult to maintain balance while	Decline	
Verting: A feeling of faintness or lightheadedness, making it difficult to maintain halance while		
standing or sitting		
New onset, <3 months	Postpone 3 months	
Acute isolated episode with complete resolution of symptoms, no underlying cardiac or neurological disorder, no limitations, treatment-free, >3 months	Preferred	
Due to disease	Refer to disease	
Symptomatic, recurring falls, or cause unknown	Decline	
Visual Loss		
Date of diagnosis?		
What is the cause?		
Does it involve one or both eyes?		
Does the applicant utilize any assistance or assistance device(s)? Details		
Is the applicant disabled or experience any limitations? Details		
Single eye, congenital or traumatic, no limitations, non-disabling, completely independent	Select	
Both eyes, congenital, no limitations, non-disabling, completely independent	Select	
Both eyes, traumatic, no limitations, non-disabling, completely independent, >12 months	Class 1*	
Due to disease	Refer to disease	
<b>Von Hippel-Lindau</b> : A rare, genetic multi-system disorder characterized by the abnormal growth of tumors in certain parts of the body	Decline	
Von Willebrand's Disease: A congenital bleeding disorder	Decline	
Waldenstrom's Macroglobulinemia: A cancer of white blood cells known as B lymphocytes	Decline	
Walker: Current use	Decline	
Wegener's Granulomatosis: A rare disorder which causes inflammation of blood vessels in the upper respiratory tract, lungs, and kidneys	Decline	

- ☐ Represents a respiratory co-morbid condition.
- O Represents a musculoskeletal co-morbid condition.
- **♥** Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

C	ONDITION / DIAGNOSIS / TREATMENTS / BENEFITS / SERVICES / DEVICES / APPLIANCES	DECISION
	<b>Wernicke-Korsakoff Syndrome</b> : A brain disorder involving loss of specific brain functions, due to a thiamine deficiency that commonly accompanies habitual alcohol use	Decline
	Wheelchair: A device used for mobility by people for whom ambulating is difficult or impossible	
	Current use	Decline
	Whipple's Disease: A rare disorder with widespread symptoms that causes malabsorption (inadequate absorption of nutrients from the intestinal tract)	Decline
	<b>Wilson's Disease:</b> An inherited disorder where there is excessive amounts of copper in the body, which causes a variety of effects including liver disease and damage to the nervous system	Decline
	<b>Wiscott-Aldrich Syndrome</b> : An immunodeficiency disorder of both T- and B-cells characterized by thrombocytopenia, eczema, and recurrent infections	Decline
	Wolff-Parkinson-White Syndrome: Episodes of rapid heart rate (tachycardia) caused by abnormal electrical pathways (circuits) in the heart	
	Asymptomatic, treatment-free, >12 months	Preferred
	Asymptomatic, medically treated, no underlying cardiac conditions, >3 months	Select
	Asymptomatic, treated with radio frequency or catheter ablation, no underlying cardiac conditions, >3 months	Select
	Uncontrolled, episodes of chest pain, shortness of breath, syncope, or near-syncope, dizziness, or ejection fraction <40%	Decline
	Worker's Compensation Disability Benefits: Compensation for a worker, contractor or layperson who is injured while working on site	
	Currently receiving	Decline
	Xeroderma Pigmentosa: An inherited inability to repair DNA damage from ultraviolet light	Decline

- ☐ Represents a respiratory co-morbid condition.
- Represents a musculoskeletal co-morbid condition.
- ♥ Represents a circulatory co-morbid condition.
- \* Represents a mental illness condition.

<sup>\*</sup>Substandard risk classifications are only eligible for 2–6 year benefit periods.

# XIII. Underwriting Guidelines (Double Accident Benefit and Family History)

## UNDERWRITING GUIDELINES FOR THE DOUBLE ACCIDENT BENEFIT\*

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

Fireman

Policeman

Ironworker (bridge, tunnel, or structural)

Coal miner

Pilot

Military personnel

Electrician

Railroad worker

Flight attendant

Explosive handler

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

Skin/scuba diving

Parachuting

Motorized racing

Rock/mountain climbing

Boxing

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

## UNDERWRITING GUIDELINES FOR THE FAMILY HISTORY QUESTION

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

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

- age 65 and older
- applying for a lifetime benefit period
- applying for a Leading Edge policy or FamilyCare II Benefit

<sup>\*</sup> Not available if the applicant is:

#### XIV. Uninsurable Medications

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

Abilify — Antipsychotic

Adriamycin — Malignant tumors

Alkeran — Multiple Myeloma

Aranesp — Anemia

Aricept — Alzheimer's Disease

Artane — Parkinson's Disease

Avinza — Chronic pain

Avonex — Multiple Sclerosis

A.Z.T. — HIV, AIDS

Cogentin — Parkinson's Disease

Cognex — Alzheimer's Disease

Cyloserine — Alzheimer's Disease

Cytoxan — Malignant tumors

D.D.I. — HIV, AIDS

Depo-Provera — Inoperable, Recurrent, and Metastatic

Endometrial, and Renal Carcinoma

Duragesic Patch — Chronic pain

Eldepryl — Parkinson's Disease

Epogen — Anemia

Estinyl — Cancer

Ergoloid — Decline in mental capacity

Exelon — Alzheimer's Disease/Dementia

Fetanyl Patch — Chronic pain

Geodon — Schizophrenia

Gleevic — Cancer, Leukemia

Gold Therapy — Arthritis

**Haldol** — Antipsychotic

Hydergine — Decline in mental capacity

Imuran — Immunosuppressant

Interferon — Immunosuppressant

Kadian — Chronic pain

Kineret — Rheumatoid Arthritis

L-Dopa — Parkinson's Disease

Larodopa — Parkinson's Disease

Leukeran — Malignant tumors, not curative

Mellaril — Antipsychotic

Mestinon — Myasthenia Gravis

Methadone — Severe pain

Mirapex — Parkinson's Disease

Morphine — Severe pain

MS Contin — Severe pain

Namenda — Alzheimer's Disease

Narvane — Antipsychotic

Neulasta — Anemia

Oxycontin — Severe pain

Parlodel — Parkinson's Disease

Parsidol — Parkinson's Disease

Permax — Parkinson's Disease

PhosLo — Kidney failure

Plenaxis — Advanced Prostate Cancer

Procrit — Anemia

Purinthenol — Severe Progressive Ulcerative Colitis

Razadyne — Alzheimer's Disease

Rebif — Multiple Sclerosis

Remicade — Rheumatoid Arthritis/Crohn's Disease

Reminyl — Alzheimer's Disease

Renagel — Kidney failure

Rezulin — Diabetes

Ridura — Rheumatoid Arthritis

Risperdal — Antipsychotic

Seroquel — Antipsychotic

Sinemet — Parkinson's Disease

Stelazine — Antipsychotic

Steroid Use — >10 mg daily

Symbyax — Antipsychotic

Symmetrel — Parkinson's Disease

Thiothixene — Antipsychotic

Thorazine — Antipsychotic

Trilifon — Antipsychotic

Tysabri — Multiple Sclerosis

Xyrem — Narcolepsy

Zyprexa — Antipsychotic

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

### XV. Male/Female Height and Weight Table

	Preferre Min.	d/Select Max.	Clas Min.	s 1 Max.	Class Min.	s 2 Max.
4′ 7″	73	150	151	168	169	185
4' 8"	76	156	157	174	175	192
4′ 9″	79	162	163	180	181	199
4' 10"	82	167	168	186	187	205
4' 11"	84	173	174	193	194	212
5′ 0″	87	179	180	199	200	220
5′ 1″	90	185	186	206	207	227
5′ 2″	93	191	192	213	214	235
5′ 3″	96	197	198	220	221	242
5′ 4″	99	204	205	227	228	250
5′ 5″	102	210	211	234	235	258
5′ 6″	106	216	217	241	242	266
5′ 7″	109	223	224	249	250	274
5′ 8″	112	230	231	256	257	282
5′ 9″	115	236	237	263	264	291
5′ 10″	119	243	244	271	272	299
5′ 11″	122	250	251	279	280	308
6′ 0″	126	258	259	287	288	316
6′ 1″	129	265	266	295	296	325
6′ 2″	133	272	273	303	304	334
6′ 3″	136	279	280	311	312	343
6′ 4″	140	287	288	320	321	353
6′ 5″	144	295	296	329	330	363
6′ 6″	147	303	304	337	338	372
6′ 7″	150	311	312	346	347	382

#### XVI. Appeal Process

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

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

- ✓ Review the specific reason(s) for the adverse decision that is outlined in the applicant's letter.
- ✓ Compare the letter to the application for insurance and the Condensed Underwriting Guide.
- ✓ Check for multiple co-morbid conditions that will increase
  the risk of using long-term care services.
- ✓ Review the letter with the applicant:
  - If the applicant disagrees with the information contained in the letter, he should review the letter with his/her physician.
  - If the physician disagrees with the contents of the letter, he should send a letter outlining the discrepancies.

If additional medical information is submitted, you will be informed of our decision within 30 days from home office receipt.

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

Notes:	



For producer use only. Not for use with the public.

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