



LONG-TERM CARE
INSURANCE

Condensed Underwriting Guide





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The mission of the Long-Term Care (LTC) Insurance Underwriting Department is to provide the highest quality of service to you and your clients. Your LTC insurance applications are underwritten by a team of seasoned underwriters and nurses led by an experienced management team and medical director.

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.”

I. Prequalification

The Underwriting area can be contacted directly to prequalify an applicant for LTC insurance or to answer inquiries in the following ways:

- Call 1-888-604-7296 (prompt 3) between 8 a.m. and 6 p.m. EST
- Email: LTCPrequal@jhancock.com
- Fax: 617-450-8052 using the Prequalifying Inquiry form (LTC-1028)

Please note that prequalification responses are only a tentative opinion based on the information provided. The more information you provide about the client the more accurate our opinion. Keep these key components in mind when trying to prequalify a client:

- age
- height and weight
- medical conditions and dates of diagnosis
- treatments and medications

Additionally, this guide contains specific prequalifying questions on over 60 conditions.

II. 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 pharmacy profile, or information from the Medical Information Bureau to further evaluate insurability.

III. Privacy and HIPAA

John Hancock is committed to protecting the privacy of its customers, and strictly abides by the rules and regulations set forth by the Health Insurance Portability and Accountability Act (HIPAA), which obligates us under the law to maintain the privacy of our client’s medical information.

HIPAA Medical Authorization

The HIPAA compliant medical authorization form must be signed and dated by the applicant and submitted with the application. A properly completed authorization is necessary to order medical requirements and to allow the application to be reviewed by the underwriting department. Failure to submit this form in good order will postpone the underwriting process.

Notice of Summary of Rights

This HIPAA compliant notice accompanies all adverse decision letters, and informs the applicant of their rights to obtain the specific reasons for the adverse decision, if not already provided, and how to access their personal health information. An applicant can also obtain their personal health information by submitting a written request. All requests for information must be signed and dated by the applicant.

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

Underwriting requires all medical records be received in English. All communications from John Hancock, whether oral or in writing, will be in English and John Hancock will be under no obligation to render such communication in any other language.

Our vendor can make accommodations to complete an interview or RN assessment in Spanish or assist in obtaining an interpreter for other languages. Please make this need known when submitting the application so we can alert our vendor.

V. Understanding Our Philosophy and Approach to Cognitive Screening

As a leader in the long-term care (LTC) insurance industry, John Hancock continues to research and refine our underwriting requirements and guidelines to continually provide a strong, reliable product for both consumers and distributors.

Claims related to cognitive impairment continue to be a significant challenge for the LTC 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 LTC 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 one out of every eight adults over 65 and almost half of those over 85, as reported by the Alzheimer’s Association,¹ 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.

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 from Univita Health and is used extensively in the LTC 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.

1. Alzheimer’s Association. 2012 Alzheimer’s Disease Facts and Figures (Alzheimer’s and Dementia: The Journal of the Alzheimer’s Association) March 2012; 8 131-168.

VI. Underwriting Requirements

The Underwriting Department has developed criteria that fall within four programs to evaluate an applicant's insurability for LTC 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

Programs

Medical Records

A copy of the applicant's medical records will be ordered from their primary care physician, if consulted within the past 18 months.

Telephone Interview

For applicants age 69 and younger who have consulted with their primary care physician in the last 18 months, will require a telephone interview. This is a phone conversation between a Univita Health nurse and the applicant consisting of standardized medical questions and usually takes 30 minutes, depending on the extent of their medical history. 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 or family history exists.

A nurse from Univita Health 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.

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

Personal Interview (On-site)

A personal interview will be conducted for all applicants age 70 or older. This is a face-to-face conversation between a Univita Health nurse and the applicant and usually lasts 45 minutes depending on the extent of their medical history. The interview consists of a series of standardized medical questions. The questions focus on 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. The nurse will take their blood pressure, as well as height and weight measurements. However, no blood work or urinalysis is needed, nor will the applicant have to undress.

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. 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.

Registered Nurse (RN) Assessment

For applicants who have **not** consulted with their primary care physician in the last 18 months and do not have any significant medical conditions,² will require this face to face assessment that is scheduled with a Univita Health nurse. The assessment includes a review of the applicant's medical history, medications, symptoms, name of their doctors, lifestyle, and daily activities such as meal preparation, transportation, bathing, and toileting. The nurse will also perform a blood pressure reading and a height and weight measurements. Additionally, the applicant will be contacted to complete a blood chemistry profile and urinalysis. Applicants **age 65 or older** will be asked to participate in a brief memory exercise.

A nurse will contact the applicant to arrange an appointment at a time that is convenient for them. The assessment will take place in the applicant's home, where they are most comfortable, and usually lasts 45 minutes, depending upon the extent of their medical history. 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 assessment. The nurse will present identification to the applicant upon arrival. Family members and friends can be present, but they must be in a separate room during the assessment.

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.

2. Medical conditions include: blood disorders (excluding compensated anemia); cancer within the past three years; cardiomyopathy; chronic obstructive pulmonary disease; coronary heart disease; diabetes; discoid lupus; emphysema; liver disorders; lymphomas; organ transplant; osteoporosis; rheumatoid/psoriatic arthritis; or transient ischemic attack (TIA) within the past five years.

Age 69 and Younger

Criteria	RN Assessment w/ Urinalysis and Blood Chemistry Profile	Telephone Interview	Medical Records
■ Has consulted primary care physician within 18 months		✓	✓
■ Has not consulted primary care physician within 18 months	✓		
■ Has not consulted primary care physician within 18 months ■ History of a significant medical condition as stated below ³	Applicant must have undergone a complete physical exam prior to application submission.		
■ Has consulted primary care physician within 18 months ■ Hearing impaired ⁴	✓		✓

Age 70 or older

Criteria	RN Assessment w/ Urinalysis and Blood Chemistry Profile	Personal Interview	Medical Records
■ Has consulted primary care physician within 18 months		✓	✓
■ Has not consulted primary care physician within 18 months	✓		
■ Has not consulted primary care physician within 18 months ■ History of a significant medical condition as stated below ³	Applicant must have undergone a complete physical exam prior to application submission.		

VII. Preferred Conditions and Uninsurable Appliances/Benefits/Devices/ Services/Treatments

Common conditions and surgical procedures that can be considered Preferred assuming there are no complications or limitations

Actinic Keratosis	Cholelithiasis	Dupuytren's Contracture	Grave's Disease	Polyps (Benign)
Allergies	Cholecystectomy	Dyspepsia	Hearing Impairment	Prolapsed Bladder
Appendectomy	Colitis (excluding ulcerative)	Fibrocystic Breast Disease	Heart Murmur	Prostatism
Basal Cell Skin Cancer	Cystitis	Fissure / Fistula (Anal)	Hernia	Tendonitis
Bell's Palsy	Cysts (Benign)	Gallstones	Hyperthyroidism	Tennis Elbow
Benign Prostatic Hypertrophy	Cystocele	Gastritis	Hypothyroidism	Tumor (Benign, excluding brain and pituitary tumors)
Calculi (Renal)	Dermatitis	GERD	Hysterectomy (Non-cancerous)	Tendonitis
Cholecystitis	Diverticulosis	Goiter	Myopia	Tennis Elbow

Current use of any of these Appliances/Benefits/Devices/Services/Treatments would be uninsurable

Adult Day Care Services	Dialysis	Nursing Home Services	Respirator	Tracheotomy
Assisted Living Services	Feeding Tube	Occupational Therapy	Scooter	Ventilator
Bedside Commode	Home Health Care Services	Oxygen	Social Security Disability Benefits	Walker
Chemotherapy	Hospital Bed	Quad Cane	Speech Therapy	Wheelchair
Crutches	Intravenous IV Treatments	Radiation Therapy	Stair Lift	Worker's Compensation Disability Benefits

- Medical conditions include: blood disorders (excluding compensated anemia); cancer within the past three years; cardiomyopathy; chronic obstructive pulmonary disease; coronary heart disease; diabetes; discoid lupus; emphysema; liver disorders; lymphomas; organ transplant; osteoporosis; rheumatoid/psoriatic arthritis; or transient ischemic attack (TIA) within the past five years.
- Urinalysis and Blood Chemistry Profile not required.

VIII. Benefit Changes

Requests for a benefit increase are subject to policy provisions and underwriting approval. Additional underwriting requirements may be requested.

IX. Ratings and Benefit Reconsiderations

Requests for a rate reduction or benefit reconsideration on a modified policy may be considered if an adverse decision letter was sent at time of issue specifying a re-evaluation date. If the adverse decision letter does not indicate a re-evaluation date, then the decision is permanent.

The policyholder should submit a written request for re-evaluation to the Underwriting Department and include a currently dated HIPAA Medical Authorization. Full underwriting will be performed, as the policyholder must meet current eligibility standards for consideration of an improved risk classification or an increase to the original benefit that was applied for at time of application.

Policies issued at the Select rate are permanent decisions, and requests for a preferred rate will require a new application and full underwriting review at the new attained age.

X. Underwriting Requirements for Christian Scientists

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 measurements, and submission of a urine specimen.

XI. Underwriting Risk Classifications by Product

Custom Care III & Custom Care III featuring Benefit Builder

- 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. Rider Limitations

Waiver of Home Care Elimination Period or Zero Day Home Care Elimination Period

Not available to applicants with health conditions in which the guideline states a 90 day EP is required.

SharedCare

Substandard risk classifications are only eligible for the SharedCare rider with a Benefit Period of 2–3 years. Except in AZ and NH where substandard risk classes can have SharedCare with a 4-year Benefit Period.

XIII. Underwriting Guidelines

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

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

Condition	Decision
Acoustic Neuroma: A benign tumor of the auditory nerve	
<i>Has the neuroma been removed? Date(s)</i>	
<i>Is applicant taking any medication or receiving physical therapy? Name(s)</i>	
<i>Has the applicant had any problems with balance or falls? Details</i>	
<i>Has there been any seizure activity? Date of last seizure</i>	
<i>Has the applicant undergone physical therapy? Date(s) and results</i>	
Surgically removed, complete recovery, with no seizures or residuals other than hearing loss, >12 months	Preferred
Present neuroma, current seizure activity, balance disturbance or falls, or inoperable tumor	Decline
Acromegaly: A chronic metabolic disorder that results in gradual enlargement of body tissues including the bones of the face, jaw, hands, feet, and skull	Decline
♥ 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	
Treated with medication or a pacemaker implant successfully per follow-up visit	Select
Symptomatic with episodes of shortness of breath, fainting, syncope, or convulsions	Decline
Addison's Disease: An endocrine or hormone disorder which occurs when the adrenal glands do not produce enough of the hormone cortisol or aldosterone	
Stable, well controlled, no complications, under treatment with <40mg hydrocortisone, >12 months	Select
* Alcoholism: A chronic illness marked by consumption of alcohol at a level that interferes with physical or mental health, social, family, or occupational responsibilities	
<i>How long has the applicant been abstinent?</i>	
<i>Has applicant ever had a relapse? Date(s)</i>	
<i>Has the applicant ever received any inpatient treatment? Date(s)</i>	
<i>Is the applicant attending any outpatient therapy or belong to a support group?</i>	
<i>Has the applicant ever had any liver problems (cirrhosis, fatty liver, abnormal liver functions)? Details</i>	
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 w/90 day EP
Abstinent with two or more hospitalizations and/or detox admission, >36 months	Class 1* w/180 day EP or Class 2*
History of alcohol abuse with cirrhosis, pancreatitis, a current fatty liver, abnormal liver function tests, multiple relapses, or continued alcohol use	Decline
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	
<i>Date of episode</i>	
<i>Has there been more than 1 episode? Details</i>	
<i>Has any diagnostic testing been performed (carotid studies, MRI/CT of brain)? Details/Results</i>	
<i>Have there been any residual vision problems?</i>	
<i>Does applicant have any history of diabetes, heart, or circulatory problems? Details</i>	
Single episode, complete recovery, asymptomatic, no cognitive or physical residuals, >12 months	Class 1* w/90 day EP
2 episodes, with diabetes, cognitive or physical residuals, or a smoker within the past 12 months	Decline

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

■ Represents a respiratory co-morbid condition.	♥ Represents a circulatory co-morbid condition.
● Represents a musculoskeletal co-morbid condition.	* Represents a mental illness condition.

*Standard risk classifications are only eligible for 2–6 year Benefit Periods. SharedCare only available with a 2- or 3-year Benefit Period. In AZ and NH a 4-year Benefit Period is allowed.

Condition	Decision
Amputation: Removal of a limb, part, or organ	
<i>Location of amputation?</i>	
<i>Date of amputation</i>	
<i>What caused the amputation?</i>	
<i>Is the applicant disabled or do they experience any limitations? Details</i>	
<i>Does the applicant use any type of assistance devices? If yes, type and frequency</i>	
Single limb due to trauma or congenital, no limitations, non-disabling, no assistive devices, >12 months	Select w/6 year BP
Due to disease or with phantom limb syndrome treated with narcotic pain relievers	Decline
Amyotrophic Lateral Sclerosis (ALS): A disorder causing progressive loss of control of voluntary muscles due to the destruction of nerves in the brain and spinal cord	Decline
Anemia: A blood disorder characterized by the decreased ability of the red blood cells to provide adequate oxygen supplies to body tissues	
<i>Date of diagnosis?</i>	
<i>What type of anemia does applicant have?</i>	
<i>What is the cause of the anemia?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Has applicant received any transfusions? Date(s)</i>	
<i>Has applicant been hospitalized? Date(s)/Details</i>	
Mild iron, B-12 or Folate deficiency anemia, no underlying chronic disease, well controlled, near normal lab values	Preferred
Chronically abnormal blood studies, weakness, or fatigue	Decline
Current treatment with hydroxyurea, steroids, blood transfusions, immunosuppressants, or treated with bone marrow or stem cell transplant	Decline
Due to disease	Refer to disease
♥ Aneurysm: A bulge in the wall of an artery	
<i>Date of diagnosis</i>	
<i>Where is the aneurysm located (abdominal-aortic, cerebral, thoracic, other)?</i>	
<i>Was the aneurysm surgically repaired? Date</i>	
<i>If present, what is the size in cm?</i>	
<i>Has the aneurysm grown? Details</i>	
<i>Does applicant have any history of diabetes, heart, or circulatory problems? Details</i>	
Abdominal-aortic, ≤5 cm in size with no growth, monitored w/routine follow-ups, >6 months	Select w/90 day EP
Abdominal-aortic, >5 cm in size, with growth, smoker within the past 12 months, or symptomatic	Decline
Abdominal-aortic, surgically repaired, complete recovery, >6 months	Select
Cerebral, surgically repaired, complete recovery, no cognitive or physical residuals, >12 months	Select
Cerebral, un-repaired, inoperable, or ruptured	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 EP
Thoracic, >5 cm in size, with growth, smoker within the past 12 months, or inoperable location	Decline

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

■ Represents a respiratory co-morbid condition.	♥ Represents a circulatory co-morbid condition.
● Represents a musculoskeletal co-morbid condition.	* Represents a mental illness condition.

*Substandard risk classifications are only eligible for 2–6 year Benefit Periods. SharedCare only available with a 2- or 3-year Benefit Period. In AZ and NH a 4-year Benefit Period is allowed.

Condition	Decision
<p>● Ankylosing Spondylitis: A chronic inflammatory disease that affects the joints between the vertebrae of the spine, and the joints between the spine and the pelvis that eventually causes the affected vertebrae to fuse or grow together</p> <p>Date of diagnosis?</p> <p>Does the applicant experience any pain? Describe</p> <p>Is applicant taking any medication? Name(s)</p> <p>Has the applicant undergone any back surgery? Date(s)/Details</p> <p>Has the applicant undergone any physical therapy or injections? Details</p> <p>Asymptomatic, no limitations</p> <p>With kyphosis, or respiratory compromise, or spinal fractures, or difficulty with mobility, or associated falls, or is advanced stage</p> <p>Treatment with Disease-modifying antirheumatic drugs, steroids or Tumor necrosis factor (TNF) blockers</p>	<p>Select – Class 1* w/90 day EP</p> <p>Decline</p> <p>Decline</p>
<p>♥ Anorexia Nervosa: An eating disorder associated with a distorted body image and marked fasting</p>	Decline
<p>* Anxiety: A feeling of apprehension or fear that lingers</p> <p>Date of diagnosis?</p> <p>Is applicant taking medication? Name(s)</p> <p>Has there been any change in treatment over the past 6 months? Details</p> <p>Has applicant ever been hospitalized? Date(s)/Details</p> <p>Does applicant have any history of depression, anxiety or other mental illness disorders? Details</p> <p>Is the applicant disabled or experience any limitations? Details</p> <p>Treatment free, asymptomatic, >3 months</p> <p>Well controlled, no limitations, non-disabling, treated with <4 medications, >3 months</p> <p>Symptomatic, with limitations, disabling, or treatment with an antipsychotic</p> <p>Single psychiatric hospitalization, well controlled, no limitations, non-disabling, and treated with <4 medications, >24 months</p>	<p>Preferred</p> <p>Select</p> <p>Decline</p> <p>Class 1* w/90 day EP</p>
<p>♥ 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</p> <p>Brain or spinal cord, successfully eliminated (surgically, embolization or radiation), no residual complications, complete recovery, >12 months</p> <p>Abdominal, successfully eliminated (surgically, embolization, or radiation), no residual complications, complete recovery, >6 months</p> <p>Present Arterious Venous Malformation</p>	<p>Select</p> <p>Select</p> <p>Decline</p>
<p>♥ Arteritis (temporal, giant cell): Inflammation of an artery</p> <p>Asymptomatic, stable, and treatment-free, no limitations, non-disabling, >24 months</p> <p>Symptomatic or requiring treatment</p>	<p>Select</p> <p>Decline</p>
<p>● Arthritis: Inflammation of a joint</p>	Refer to specific type
<p>■ Asbestosis: A lung disease</p>	Refer to Chronic Obstructive Pulmonary Disease
<p>● Aseptic Necrosis: A condition resulting from the temporary or permanent loss of blood supply to the bones</p> <p>Surgically repaired, no limitations, non-disabling, and no evidence of disease >6 months</p> <p>Un-operated</p>	<p>Select</p> <p>Decline</p>

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

<p>■ Represents a respiratory co-morbid condition.</p> <p>● Represents a musculoskeletal co-morbid condition.</p>	<p>♥ Represents a circulatory co-morbid condition.</p> <p>* Represents a mental illness condition.</p>
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*Standard risk classifications are only eligible for 2–6 year Benefit Periods. SharedCare only available with a 2- or 3-year Benefit Period. In AZ and NH a 4-year Benefit Period is allowed.

Condition	Decision
■ Asthma: A respiratory disease marked by attacks of breathing difficulty, wheezing, and coughing Date of diagnosis? Is 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 controlled, on short-term treatment, no other respiratory disorders or prior hospitalizations	Preferred
Chronic treatment, mild, asymptomatic, normal and stable baseline pulmonary function tests	Select
Chronic oral steroid use, frequent hospitalizations, oxygen use, or multiple exacerbations	Decline
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 Due to underlying disease Current or with associated falls	
Etiology unknown with normal neurological work-up, completely resolved, no limitations, >12 months	Select
Due to underlying disease	Refer to disease
Current or with associated falls	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	
Normal sinus rhythm, well-controlled, no underlying cardiac disease, >6 months	Select
Chronic, well controlled, >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 60 and older, MRI or CT scan showing "Mild cerebral atrophy" no evidence of neurological symptoms	Individual Consideration
* Attention Deficit Disorder (ADD): 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, active lifestyle, no limitations, non-disabling, >3 months	Select
Barrett's Esophagus: A condition in which the lining of the esophagus changes from its normal lining to a type that is usually found in the intestines No dysplasia Low grade dysplasia and 3 follow-up EGD's showing no progression With high-grade dysplasia	
No dysplasia	Preferred
Low grade dysplasia and 3 follow-up EGD's showing no progression	Select
With high-grade dysplasia	Decline

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

■ Represents a respiratory co-morbid condition. ● Represents a musculoskeletal co-morbid condition.	♥ Represents a circulatory co-morbid condition. * Represents a mental illness condition.
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Condition	Decision
* Bipolar/Manic Disorder: A mood disorder characterized by mood swings from mania (exaggerated feeling of well-being) to depression	
<i>Date of diagnosis?</i>	
<i>Is applicant taking any medication? Name(s)</i>	
<i>Has applicant ever been hospitalized or treated in facility for any type of mental illness? Date(s)/Details</i>	
<i>Has applicant ever received any electroconvulsive shock therapy?</i>	
<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	
Well controlled on non-antipsychotic medication, no limitations, and non-disabling, >12 months	Class 1* w/90 day EP – Class 2 w/90 day EP, 3 year BP
Single psychiatric hospitalization, well controlled, no limitations, non-disabling, and treated with <4 medications, >24 months	Class 1* w/90 day EP
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	
<i>Date of diagnosis?</i>	
<i>Is applicant taking any medication/inhalers? Name(s)</i>	
<i>Date of last flare</i>	
<i>Have pulmonary function tests been performed? Date(s)/Results</i>	
<i>Has applicant ever used oxygen or steroids? Frequency</i>	
<i>Has applicant ever been hospitalized for a respiratory disorder? Date(s)/Details</i>	
<i>Has applicant smoked within the past 12 months?</i>	
Mild, asymptomatic, normal and stable baseline pulmonary function tests, >6 months	Select
Symptomatic, severe, multiple hospitalizations, reoccurring infections, or smoker within the past 12 months	Decline
■ Bronchitis (Chronic): An inflammation of the bronchi, the main air passages in the lungs, which persists for a long period or repeatedly recurs	Refer to Chronic Obstructive Lung Disease
■ Buerger's Disease: A chronic circulatory disease that leads to obstruction of the blood vessels of the hands and feet	Decline
● Bulimia: An illness of uncontrolled episodes of overeating, usually followed by self-induced vomiting	Decline
■ Cancer (Internal): An uncontrolled growth of abnormal cells which have mutated from normal tissue <i>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.</i>	
<i>Date of diagnosis?</i>	
<i>Where was the cancer located?</i>	
<i>What stage/grade was the cancer?</i>	
<i>Was there any lymph node involvement? # of nodes involved?</i>	
<i>Was the cancer diagnosed as metastatic?</i>	
<i>Is this a recurrent cancer or does the applicant have a history of other cancers? Dates(s)/Details</i>	
<i>What type of treatment did applicant receive (surgery, x-ray therapy, chemotherapy)? Date completed</i>	
<i>Any complications or residual problems?</i>	
Bladder, Stage 0 or I, non-smoker	Select
Bladder, Stage II or III, non-smoker, >12 months	Select w/90 day EP – Select w/180 day EP
Bladder, Stage IV	Decline

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Condition	Decision
Cancer (continued)	
Breast, Stage 0 or I	Select – Select w/90 day EP
Breast, Stage IIA or IIB	Select w/90 day EP – Select w/180 day EP
Colon, Stage 0, I, or In-Situ	Select – Select w/90 day EP
Colon, Stage IIA – If treated w/colostomy, best risk class will be Class 1	Select w/90 day EP – Select w/180 day EP
Colon, Stage IIB or IIIA, >6 months – If treated w/colostomy, best risk class will be Class 1	Select w/90 day EP – Select w/180 day EP
Endometrial, Stage I or II	Select – Select w/90 day EP
Endometrial, Stage III, >6 months	Select w/90 day EP – Select w/365 day EP
Endometrial, Stage IV	Decline
Melanoma, Stage 0, I, or In Situ	Select – Select w/90 day EP
Melanoma, Stage II, IIA or IIB	Select w/90 day EP – Select w/180 day EP
Prostate, Stage I or II - Successful Prostatectomy: Stable PSA levels <0.1 - Successful Radiation Therapy: Stable PSA levels <1.0	Select – Select w/90 day EP
Prostate, Stage III, >6 months - Successful Prostatectomy: Stable PSA levels <0.1 - Successful Radiation Therapy: Stable PSA levels <1.0	Select w/90 day EP – Select w/180 day EP
Prostate, Watchful Waiting	Decline
Renal, Stage 0, I, or In-Situ, Non-smoker	Select – Select w/90 day EP
Renal, Stage II, non-smoker	Select w/90 day EP – Select w/180 EP
Renal, Stage III, non-smoker, >24 months	Select w/90 day EP – Select w/180 EP
Renal, Stage IV or smoker any stage	Decline
Site not otherwise defined and internal, Stage 0, I, II, or In-Situ	Select – Select w/365 day EP
Site not otherwise defined and internal, Stage III, >12 months	Select w/90 day EP – Select w/365 EP
Site not otherwise defined and internal, Stage III, >12 months	Select w/90 day EP – Select w/365 day EP
Site not otherwise defined and internal, Stage IV, or >2 cancers	Decline
♥ Cardiomyopathy: A disorder affecting the heart muscle, which usually results in inadequate heart pumping	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Has the applicant ever had congestive heart failure or other heart disorders? Date(s)/Details</i>	
<i>Has an echocardiogram been done? Date/Ejection Fraction?</i>	
<i>Does the applicant have shortness of breath, fatigue, or weakness? Details</i>	
Asymptomatic, stable and well controlled, >12 months	Select
History of congestive heart failure, asymptomatic, or smoker within the past 12 months	Decline

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Condition	Decision
Carotid Artery Disease: A circulatory condition characterized by narrowing or stenosis of the carotid artery in the neck	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Has the applicant experienced any dizziness, visual disturbances, or weakness?</i>	
<i>Has there been any history of a TIA (transient ischemic attack) or stroke?</i>	
<i>What were the results (% of stenosis) of the last carotid study? Date</i>	
<i>Has the applicant had any carotid surgery? Date(s)/Details</i>	
<i>Does the applicant have diabetes?</i>	
<i>Has the applicant smoked within the past 12 months?</i>	
<i>Does the applicant have any heart or other circulatory problems? Details</i>	
Mild-moderate stenosis, <50%, asymptomatic, no progression, >12 months	Select – Class 1*
Moderate-moderately severe stenosis 50 -70%, asymptomatic, no progression, no history of TIA, >24 months	Class 2* w/90 day EP
Symptomatic or >70% stenosis	Decline
Endarterectomy, complete recovery, asymptomatic, no other circulatory disorders or history of TIA, released from care with post-op visit	Select
With diabetes, cerebrovascular disease, recurrent stenosis, or smoker 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 EP
Utilized due to an underlying disease	Refer to disease
Requiring assistance with management, recurring infections, 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
Cerebral Palsy: A group of disorders characterized by loss of movement or loss of other nerve functions	Decline
♥ Cerebral Vascular Disease: A vascular disease of the brain, including abnormalities of the vessels, blood flow, or quality of flow	
Evidence of white matter changes, small vessel disease, ischemic changes, microvascular changes, infarcts	Decline
Charcot-Marie-Tooth: A slowly progressive disorder that results in wasting of muscles	Decline
● 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.	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Has applicant ever been hospitalized for a chronic fatigue related problem? Date(s)/Details</i>	
<i>Does the applicant experience any weakness, joint pain, or fatigue? Details</i>	
<i>Does the applicant have any history of Depression or Fibromyalgia? Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	

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Condition	Decision
● Chronic Fatigue Syndrome (continued)	
Asymptomatic, no limitations, non-disabling, >6 months	Select w/90 day EP
Co-existing Fibromyalgia or Depression, asymptomatic, no limitations, non-disabling, >6 months	Class 1*
Symptomatic, limitations, disabling, or treated with narcotics or steroids	Decline
■ Chronic Obstructive Pulmonary Disease: A respiratory disease process that decreases the ability of the lungs to perform ventilation	
<i>Date of diagnosis?</i>	
<i>Is applicant taking any medication/inhalers? Name(s)</i>	
<i>Date of last flare</i>	
<i>Have pulmonary function tests been performed? Date(s)/Results (FEV1 & FVC%)</i>	
<i>Has applicant ever used oxygen or steroids? Frequency?</i>	
<i>Has applicant ever been hospitalized for a respiratory disorder? Date(s)</i>	
<i>Has the applicant smoked within the past 12 months?</i>	
Mild, asymptomatic	Select
Moderate to moderately severe, stable baseline pulmonary function tests	Class 1* w/90 day EP – Class 2* w/90 day EP
Exacerbation requiring hospitalization, >6 months	Class 1* w/90 day EP – Class 2* w/90 day EP
Symptomatic, severe, daily steroid use, multiple hospitalizations, or smoker within the past 12 months	Decline
Moderate to severe with currently treated cardiomyopathy	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	Decline
● Confusion: Not being aware of or oriented to time, place, or person	
Asymptomatic, now resolved with normal neuropsychological workup, >24 months	Select
Current or etiology unknown	Decline
♥ Congestive Heart Failure: A condition where the heart loses its ability to pump blood efficiently	Decline
♥ Cor Pulmonale: Enlargement or failure of the right ventricle due to pulmonary hypertension	Decline
♥ Corneal Impairment: An impairment affecting the cornea, the curved transparent covering at the front of the eye	
No vision loss	Preferred
Transplant, no vision impairment, released from care with post-op visit	Preferred
♥ Coronary Artery Disease: Narrowing of the coronary arteries that supply blood to the heart	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Has the applicant been hospitalized for any heart or circulatory disorders? Date(s)/Details</i>	
<i>Has applicant undergone heart surgery? Date(s)/Details</i>	
<i>Does the applicant smoke?</i>	
<i>Does the applicant have any other heart or circulatory disorders? Details</i>	
<i>Does the applicant have diabetes?</i>	
Asymptomatic, <50% stenosis in any artery with a follow-up visit showing stability	Select w/90 day EP
Asymptomatic, 50% to 75% stenosis in any artery with a follow-up visit showing stability, >6 months	Select w/90 day EP
Angioplasty/stent, <75% stenosis in any artery, complete recovery, asymptomatic with a post-op visit showing a complete recovery	Select

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Condition	Decision
♥ Coronary Artery Disease (continued)	
Bypass surgery, asymptomatic with post-op visit showing a complete recovery	Select
Single heart attack, asymptomatic with follow-up visit showing complete recovery and stability, >6 months	Select w/90 day EP
With Diabetes, >75% stenosis in any artery, or <40 years old	Decline
Smoker w/in the past 12 months, 3 or more heart attacks, uncontrolled, or with other circulatory disease involving 2 or more sites	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	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Name(s)/Dosage</i>	
<i>Date of last flare</i>	
<i>Has the applicant ever been hospitalized or had surgery performed (colostomy, colectomy)? Date(s)/Details</i>	
<i>Is the applicant disabled or experience limitations? Details</i>	
<i>Does the applicant experience problems with continence?</i>	
Asymptomatic, medically managed, no limitations, non disabling, >6 months	Select – Class 1* w/90 day EP
Chronic low dose steroid use, asymptomatic, no limitations, non-disabling, >12 months	Class 1 w/90 day EP, 3 year BP – Decline
Colostomy, complete recovery, no limitations, non-disabling, independent management, >6 months	Class 1* w/90 day EP
Frequent flares, severe, end stage, multiple surgeries, weight loss, or fecal incontinence	Decline
Cushing's Syndrome: An endocrine disorder caused by prolonged exposure of the body's tissues to the hormone cortisol, or by excessive use of cortisol or other steroid hormones	
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
Cystic Fibrosis: An inherited disease that affects the respiratory and digestive systems	Decline
♥ Defibrillator (Internal cardioverter defibrillator – ICD): 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, with follow-up visit showing complete recovery and stability	Select
♥ Deep Venous Thrombosis (DVT): A condition where there is a blood clot in a deep vein	
<i>Date of the event</i>	
<i>Is the applicant on any medication? Name(s)</i>	
<i>Has the applicant been hospitalized? Date(s)</i>	
<i>How many total clots/embolisms has the applicant had? Date(s)</i>	
<i>Has the applicant had a Greenfield Filter implanted? Date</i>	
<i>Does the applicant have any circulatory or respiratory disorders?</i>	
<i>Is the applicant disabled or experience any limitations?</i>	
<3 DVT's complete recovery, no underlying blood disorders or limitations, >6 months	Select – Class 1*
Greenfield Filter implant, no further events, complete recovery, no limitations, >6 months	Class 1*
>2 DVT's, underlying blood disorder, limitations or complications	Decline

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Condition	Decision
<ul style="list-style-type: none"> ● Degenerative Disc Disease: The gradual deterioration of the disc between the vertebrae 	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Has any testing been performed (X-ray, MRI, or CAT scan)? Date(s)/Results</i>	
<i>What is the severity (mild, moderate, severe)?</i>	
<i>Has the applicant ever undergone any back surgery? Number/Date(s)</i>	
<i>Has the applicant undergone any physical therapy or injections? Date(s)/Details</i>	
<i>Does the applicant experience any pain, numbness or tingling in the legs or arms? Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	
Mild, asymptomatic, no prior treatment	Preferred
Mild, well controlled, no limitations, non-disabling	Select
Moderate, successful completion of physical therapy or injections, asymptomatic, no limitations, high functioning	Select – Class 1* w/90 day EP
Single spinal surgery, complete recovery, successful completion of Physical Therapy, no limitations or complications, high functioning	Select – Select w/90 day EP
Daily narcotic pain relievers, chronic pain resulting in limitations or disability, gait or balance issues, radiculopathy or related symptoms to the extremities, use of assistive devices, or 3 or more spinal surgeries	Decline
<ul style="list-style-type: none"> ● Degenerative Joint Disease: 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
<ul style="list-style-type: none"> Dementia: Cognitive deficit, including memory impairment 	Decline
<ul style="list-style-type: none"> * Depression: A mental disorder marked by altered mood 	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Names(s)</i>	
<i>Has this been diagnosed as situational?</i>	
<i>Has the applicant ever been hospitalized for depression, anxiety, or other mental illness? Date(s)/Details</i>	
<i>Has the applicant ever received electroconvulsive shock therapy?</i>	
<i>Does applicant have any history of anxiety or other mental illness disorders? Details</i>	
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	Select – Class 1*
Multiple hospitalizations, treatment with an antipsychotic, disabling, or unstable	Decline
<ul style="list-style-type: none"> Dermatomyositis: An inflammatory disease marked by muscle weakness and a distinctive skin rash 	Decline
<ul style="list-style-type: none"> Detached Retina: A condition where the retina becomes completely or partially detached 	
Successfully surgically treated, complete recovery, no residual complications, or blindness	Preferred
Legally blind, completely independent, no limitations, >24 months	Class 1* w/90 day EP, 3 year BP

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Condition	Decision
♥ Diabetes: A lifelong disease of high blood sugar caused by too little insulin, resistance to insulin, or both	
<i>Date of diagnosis?</i>	
<i>What type of diabetes does the applicant have (Juvenile, Type I, Type II)?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Is the applicant taking any insulin?</i>	
<i>Does the applicant have any history of circulatory or heart disorders? Details</i>	
<i>Does the applicant smoke?</i>	
<i>What is the applicant's most recent glycohemoglobin A1c reading? Date</i>	
<i>Does the applicant have any history of neuropathy (numbness, pain, or tingling of the extremities), nephropathy (kidney complications), or retinopathy (visual complications)? Details</i>	
<i>Has the applicant had any amputations? Details</i>	
<i>Hemoglobin A1c <7.0, treated with diet or oral medication</i>	
Age <30	Decline
Age 30-39	Individual Consideration
Age 40-59	Class 1*
Age ≥60	Select
<i>Hemoglobin A1c 7.0 to 7.5, treated with diet and oral medication</i>	
Age 30-39	Individual Consideration
Age 40-49	Class 2*
Age 50-69	Class 1*
Age ≥70	Select
<i>Hemoglobin A1c 7.6 to 7.9, treated with diet or oral medication</i>	
Age <40	Decline
Age 40-59	Individual Consideration
Age 60-69	Class 2*
Age ≥70	Class 1*
<i>Mild-non proliferative retinopathy, no laser treatment, no progression A1c <8.0</i>	
Age 40-59	Individual Consideration
Age 60-69	Class 2*
Age ≥70	Class 1*
Age <40, mild-non proliferative retinopathy, no laser treatment, no progression A1c <7.5	Individual Consideration
Retinopathy (all types) excluding mild, non-progressive and untreated non proliferative retinopathy	Decline
New onset with A1c >7.9	Postpone 6 months
History of coronary artery disease, peripheral artery disease, carotid artery disease, amaurosis fugax, or transient ischemic attack	Decline
Amputation, blindness, uncontrolled or recurrent hyperglycemia or diabetic ketoacidosis, microalbuminuria, nephropathy, proteinuria, neuropathic ulcers, or progressive neuropathy	Decline
Diagnosed as Type 1, Juvenile, treated with insulin, or a smoker w/in the past 12 months	Decline
Diverticulitis: An inflammation of an abnormal pouch in the intestinal wall, usually found in the colon	
Well controlled, asymptomatic, medically or diet managed	Preferred
Flare(s) requiring hospitalization, complete recovery, >3 months	Select

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Condition	Decision
Down Syndrome: A chromosome abnormality resulting in moderate to severe mental retardation and other abnormalities	Decline
* Drug Abuse/Dependency: 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
Dwarfism: Abnormally short stature with abnormal body proportions, caused by a deficiency of growth hormone	Decline
Dysphagia: Inability or difficulty swallowing	Refer to underlying cause
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	
Single episode, treatment-free, complete recovery, normal follow-up echo, >6 months	Select
Recurrent episodes	Decline
Epstein-Barr: The virus responsible for infectious mononucleosis and is associated with the development of non-Hodgkin's lymphoma in patients with immune compromise	
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	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Has the applicant undergone any dilations? Date(s)</i>	
<i>Has the applicant ever been hospitalized for an esophageal disorder? Date(s)/Details</i>	
Single dilation within a 12 month period, asymptomatic, no dysphagia, stable weight, with follow-up visit	Select
Multiple or frequent need for dilations, symptomatic, or unstable weight	Decline
Esophageal Varicies: A dilation of an esophageal vein	Decline
Fatty Liver: An accumulation of fat within the liver cells	
Asymptomatic, treatment-free, normal liver function tests, occasional or no alcohol use	Select
Abnormal liver function tests or daily alcohol use	Decline
Felty's Syndrome: A disorder characterized by rheumatoid arthritis, an enlarged spleen, a decreased white blood cell count, and recurrent infection	Decline
● Fibromyalgia: Chronic pain in muscles and soft tissues surrounding joints	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Has applicant ever been hospitalized for any condition related to the Fibromyalgia? Date(s)</i>	
<i>Does the applicant experience any weakness, joint pain, or fatigue? Details</i>	
<i>Does the applicant have any history of Depression, Anxiety, or Chronic Fatigue syndrome? Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	

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Condition	Decision
● Fibromyalgia (continued)	
Asymptomatic, mild	Select – Class 1* w/90 day EP
Co-existing Chronic Fatigue Syndrome or Depression, asymptomatic, no limitations, non-disabling, >6 months	Class 1* w/90 day EP
Symptomatic, chronic fatigue, pulmonary compromise, disabling or resulting in limitations	Decline
Treated with chronic oral steroids or narcotic pain relievers	Decline
Foot Drop: Foot weakness or paralysis	Refer to underlying cause
Forgetfulness: Inability to remember something previously known or learned	
Current or etiology unknown	Decline
Asymptomatic, now resolved w/normal neuropsychological workup, >24 months	Select
● Fractures: Sudden breaking of a bone	
<i>What was the date of the fracture(s)?</i>	
<i>What bone(s) were affected?</i>	
<i>What was the cause of the fracture(s)?</i>	
<i>Does the applicant have any history of osteoporosis? T-Score/Date</i>	
<i>Did the applicant require PT? Dates(s)</i>	
<i>Has the applicant fully recovered from the fracture and been released from care?</i>	
<i>Does the applicant use any type of assistive device (i.e., cane, walker, brace)? Details</i>	
<i>Is the applicant disabled or experience any limitations?</i>	
Complete recovery, treatment free, no limitations or history of osteoporosis	Preferred
Chronic non-healing fracture(s), evidence of osteomyelitis, use of assistance devices, chronic pain, limitations, treatment with narcotic pain relievers, or resulting in disability	Decline
Gastric Bypass/Stapling/Banding: Surgical alteration of the stomach	
1st procedure or revision, complete recovery, stable acceptable build, asymptomatic, no limitations, >24 months	Select
Due to disease	Refer to disease
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	
<i>Date of diagnosis?</i>	
<i>Was condition diagnosed as Acute or Chronic? Details</i>	
<i>What type of treatment did the applicant receive? Details</i>	
<i>Has the applicant ever undergone dialysis? Date</i>	
<i>Has the applicant ever been hospitalized for kidney problems? Date(s)/Details</i>	
<i>What were the results of the last blood workup (Creatinine, BUN)? Date</i>	
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
Gout: A disease marked by uric acid deposits in the joints, causing painful arthritis especially in the joints of the feet and legs	
Well controlled	Preferred – Select
Severe recurrent flares or disabling	Decline

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Condition	Decision
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
♥ Heart Attack: A condition when an area of heart muscle dies or is damaged because of an inadequate supply of oxygen to that area	Refer to Coronary Artery Disease
♥ Heart Block: A condition in which the signal from the heart's upper to lower chambers is impaired or doesn't transmit	
First-degree AV Block, asymptomatic, treatment-free, no underlying cardiac conditions	Preferred
Second-degree AV Block, Mobitz I, asymptomatic	Select
Second or Third-degree AV Block, asymptomatic with successful pacemaker implant	Select
Symptomatic with episodes of shortness of breath, dizziness, or syncope	Decline
Third-degree AV Block or complete heart block, asymptomatic without successful pacemaker implant	Decline
♥ Heart Valve Disease: The heart valves can malfunction either by leaking (valve regurgitation) or by failing to open adequately (valve stenosis); either problem can seriously interfere with the heart's ability to pump blood	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>Has the applicant ever been hospitalized for a heart or circulatory disorder? Date(s)/Details</i>	
<i>Has valvular surgery been performed? Date(s)/ Details</i>	
<i>When was the last echocardiogram performed? Results</i>	
<i>Does the applicant have other heart or circulatory problems? Details</i>	
<i>Does the applicant experience any shortness or breath or limitations? Details</i>	
Mild, asymptomatic, treatment-free	Preferred
Moderate to moderately severe, asymptomatic	Class 1* – Class 2* w/90 day EP
Severe, symptomatic, associated with atrial septal defect, or surgically treated with re-stenosis	Decline
Valve replaced, repaired, reconstructed, asymptomatic, >6 months	Select
Hematuria: Blood in the urine	Refer to underlying cause
Hemochromatosis: A genetic disease that results in excess iron deposits throughout the body	
<i>Date of diagnosis?</i>	
<i>When was the applicant's last phlebotomy?</i>	
<i>Does the applicant have any joint, liver, or pancreatic problems? Details</i>	
<i>What were the results of the last blood workup? Date</i>	
Asymptomatic, stable with near normal blood studies, on maintenance phlebotomy, >6 months	Select
Complications, organ or joint involvement, or abnormal blood studies	Decline
Hemophilia: A hereditary bleeding disorder in which it takes a long time for the blood to clot and abnormal bleeding occurs	
Mild hemophilia, no history of spontaneous bleeding or use of replacement factor therapy outside of surgery/trauma indication, asymptomatic, no indication of severe anemia, >12 months	Select – Class 1* w/90 day EP
Recurrent episodes of bleeding, or evidence of severe anemia, or requiring frequent blood transfusions	Decline
Moderate or severe hemophilia	Decline

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Condition	Decision
Hepatitis: An inflammation of the liver	
<i>Date of diagnosis?</i>	
<i>What type of Hepatitis?</i>	
<i>What type of treatment has the applicant received? Date(s)/Details</i>	
<i>Has the applicant ever been hospitalized? Date(s)/Details</i>	
<i>What were the results of the last blood workup? Date</i>	
<i>Does the applicant use alcohol? Frequency/Amount</i>	
Type A, complete recovery, normal liver function tests	Select
Acute Hepatitis B, completely resolved, normal liver functions tests, >12 months	Select
Type C, successively treated, undetectable viral load and normal liver function tests, >6 months	Select
Chronic Hepatitis B or Type C, not treated or failed treatment	Decline
Chronic, active, currently treated, abnormal liver function studies, autoimmune, or evidence of damage	Decline
Herniated Disc: A disc that, due to use, injury or disease, bulges outside its normal area, causing pain and limiting function	Refer to Degenerative Disc Disease
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	
<i>Date of diagnosis?</i>	
<i>What stage has the applicant been diagnosed with?</i>	
<i>What type of treatment has the applicant received?</i>	
<i>Has there been any recurrence? Date(s)</i>	
<i>What was the date of the last treatment?</i>	
<i>Is applicant in complete remission?</i>	
Stage I and II, complete remission, stable-normal blood studies, asymptomatic, treatment-free, >12 months	Select w/180 day EP
Stage III and IV, complete remission, stable-normal blood studies, asymptomatic, treatment-free, >36 months	Class 1* w/90 day EP or Select w/180 day EP
Hunter Syndrome: A hereditary disease that causes a characteristic facial appearance and abnormal function of multiple organs	Decline
Huntington's Disease: 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 and or LDL <130, no underlying circulatory disorders	Preferred
Total cholesterol >240 and or LDL 130-189, no underlying circulatory disorders	Select – Class 1*
Cholesterol ≥300 and or LDL ≥190	Decline
♥ Hypertension/White Coat Syndrome: Higher than normal blood pressure	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>What is the applicant's last three blood pressure readings? Date(s)</i>	
<i>Has the applicant ever been hospitalized for hypertension or hypertensive complications? Date(s)/Details</i>	
<i>Does the applicant have any other heart or circulatory problems? Details</i>	
<i>Does the applicant have any kidney problems? Details</i>	

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Condition	Decision
♥ Hypertension/White Coat Syndrome (continued)	
6 month average reading <135/85	Preferred
Average (6 month) reading 140/90 to 160/90, smoker within the past 12 months	Class 1* w/90 day EP
Average readings 135/85 to 160/90	Select
Average reading >160/90	Postpone 3 months
Chronically uncontrolled, >160/90	Decline
Idiopathic Thrombocytopenia Purpura (ITP): A bleeding disorder characterized by low platelet counts resulting from platelet destruction by the immune system	
<i>Date of diagnosis?</i>	
<i>What type of treatment has the applicant received? Date(s)/Details</i>	
<i>Is the applicant taking any steroids? Dosage</i>	
<i>Has the applicant ever had a splenectomy? Date</i>	
<i>Has the applicant ever been hospitalized for a blood related disorder? Date(s)/Details</i>	
<i>Has there been any progressive weight loss? Details</i>	
<i>What was the applicant's last platelet count? Date</i>	
Mild ITP with no underlying disorder, asymptomatic, treatment free, stable and well controlled, >12 months	Select w/90 day EP
Moderate to severe or currently treated	Decline
Incontinence: The inability to retain urine or feces	
<i>Type of incontinence (stress, urge urinary, bowel)</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>Has the applicant undergone surgery? Date(s)</i>	
<i>Has the applicant been advised to have surgery? Details</i>	
<i>Does the applicant require the use of protective undergarments? Details</i>	
Stress or urge (urinary), well-controlled, self managed	Preferred
Due to disease	Refer to disease
Fecal	Decline
Intellectual Impairment: A disability characterized by significant limitations both in intellectual functioning and in adaptive behavior, which covers many everyday social and practical skills and originates before the age of 18.	Decline
Interstitial Cystitis: A condition causing recurring discomfort or pain in the bladder and surrounding pelvic region	
Successfully treated with no limitations	Select – Select w/90 day EP
Use of a urinary catheter	Refer to Catheter (urinary) guideline
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
Ischemic Colitis: A sudden swelling of a part of the large intestine that occurs when there is a temporary loss of blood flow to the colon	Decline
● 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

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Condition	Decision
Kidney Disease, Chronic: A condition which occurs when one suffers from gradual loss of kidney function	
Stage 1 and 2, well controlled blood pressure, stable near normal kidney function tests, >12 months	Select w/90 day EP
Stage 3, well controlled blood pressure, stable near normal kidney function tests, >12 months	Class 1* w/90 day EP
History of diabetes or stage 4 or 5	Decline
Kidney Failure: Failure of the kidney to perform its essential functions	Decline
Kidney Transplant: A surgical procedure where a healthy kidney is implanted into a person with kidney disease or failure	
Asymptomatic, normal renal function studies, >60 months	Class 1*
Symptomatic, abnormal renal function blood studies, or renal failure	Decline
Labyrinthitis: An ear disorder involving inflammation of the canals of the inner ear, resulting in dizziness	
Stable, well controlled with medications	Preferred
Evidence of neurological symptoms or hospitalization, <6 months	Postpone 6 months
Leukemia: A malignancy of the blood-forming cells in the bone marrow	
<i>Date of diagnosis?</i>	
<i>What type of leukemia does applicant have? Stage?</i>	
<i>What type of treatment did applicant receive (surgery, radiation therapy, chemotherapy)?</i>	
<i>What was the date of the last treatment?</i>	
<i>Is the applicant in complete remission? Date</i>	
<i>What were the results of the last blood workup? Date</i>	
<i>Has there been any recurrence? Date(s)/Details</i>	
<i>Any complications or residual problems? Details</i>	
CLL Stage 0, stable WBC, >24 months	Class 1* w/180 day EP
>Stage 0 or unstable WBC	Decline
Lou Gehrig's Disease: A disorder causing progressive loss of control of muscles due to destruction of nerve cells in the brain and spinal cord	Decline
● Lumbar Strain/Sprain: A sudden stressful injury to the lower back, causing stretching or tearing of the muscle, tendons, or ligaments of the lower back	
Stable with non-steroidal anti-inflammatories, no history of PT or underlying spinal disorders	Preferred
Symptoms of paresthesia, weakness, wasting, or currently undergoing PT	Postpone 6 months
Lupus (Systemic Lupus Erythematosus): A chronic, inflammatory auto-immune disorder that may affect organ systems including the skin, joints, and internal organs	Decline
Lupus (Discoid): A chronic disease of the skin characterized by remissions and exacerbation of a scaling, red, macular rash	
<i>Date of diagnosis?</i>	
<i>Has a skin biopsy been performed? Results</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
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	Preferred – Select
Symptomatic, neurological, or cardiac impairment	Decline

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Condition	Decision
Lymphedema: Swelling that occurs due to a lymphatic obstruction (a blockage of the lymph vessels, which drain fluid from tissues throughout the body)	
Primary lymphedema, no ulcerations, non-disabling, no limitations	Select
Current or recurrent ulcerations, multiple prescriptions (>2), limitations or disabling	Decline
Lymphoma: A usually malignant lymphoid tumor or growth	Refer to Non-Hodgkins Lymphoma
Macular Degeneration: A disorder that affects the macular (the central part of the retina) causing decreased visual acuity and possible loss of central vision	
<i>Date of diagnosis?</i>	
<i>Are both eyes involved?</i>	
<i>Is there any vision loss? Details</i>	
<i>Has there been any progression of vision loss? Details</i>	
<i>Is the applicant legally blind? How long?</i>	
<i>Does the applicant utilize any assistance or assistance device(s)? Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	
No deterioration in vision, independent, 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 EP, 3 year BP
Macular Hole: An abnormal opening which forms in the center of the macular over weeks to months	Refer to Macular Degeneration
* Major Depression: 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
Marie Strumpell Disease: 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, >24 months	Select
Meniere's Disease: A disorder of the inner ear characterized by abnormal sensation of movement, loss of hearing in one or both ears, or noises and ringing	
Mild, stable, >6 months	Preferred – Select
New onset, hospitalization, or neurological symptoms	Postpone 6 months
Meningitis: 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	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>How many meningiomas does applicant have?</i>	
<i>When was the last MRI or brain scan performed? Results</i>	

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Condition	Decision
Meningioma (continued)	
<i>Has the meningioma been surgically removed or radiated? Date</i>	
<i>Any problems with balance, dizziness, falls, paresthesia, or seizures? Details</i>	
Benign, asymptomatic, non-progressive, no neurological deficits or limitations, >24 months	Select – Class 1* w/90 day EP
Single tumor, benign, successfully removed surgically or radiated, asymptomatic, no re-growth, neurological deficit or complications, >12 months	Select
>2 meningiomas, surgically removed or radiated with evidence of re-growth, neurological deficits, or limitations	Decline
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	See Intellectual Disability
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	
Well controlled, non-debilitating	Preferred – Select
Migraine with auras, temporary blindness, aphasia or paresthesia, single episode within past 5 years	Class 1* w/90 day EP
Migraine with aura, temporary blindness, aphasia or paresthesia and evidence of white matter changes, small vessel disease, chronic ischemic changes or microvascular changes	Decline
♥ 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	Preferred – 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	
Asymptomatic, treatment-free, no progression, >24 months	Select w/180 day EP or Class 1*
With progression or smoldering myeloma	Decline
Multiple Myeloma: A cancer of the bone marrow	Decline
* Multiple Personalities: A state in which two or more personalities alternate in the same individual, usually with each personality unaware of the other	Decline
Multiple Sclerosis: A disorder of the central nervous system involving decreased nerve function associated with the formation of scars on the covering of nerve cells	Decline
Muscular Dystrophy: 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	
Asymptomatic, treatment-free, no deterioration in vision, no limitations, >24 months	Class 1*
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

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Condition	Decision
Neurogenic Bladder: A urinary bladder problem in which there is abnormal emptying of the bladder; it may empty spontaneously or may not empty at all	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>Does the applicant use a catheter at any time? Frequency</i>	
<i>Does the applicant experience urinary tract infections? Frequency</i>	
<i>Has the applicant ever been hospitalized for bladder related problems? Date(s)/Details</i>	
<i>Does the applicant require the use of protective undergarments?</i>	
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 EP
>2 urinary tract infections within a 12 month period, or chronic antibiotic or narcotic pain reliever treatment	Decline
Neuropathy: A disease of the nerves	
<i>Date of diagnosis?</i>	
<i>What is the cause of the neuropathy?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>Does the applicant have diabetes, circulatory, or back problems?</i>	
<i>Does the applicant use any assistive devices (i.e., cane, walker, brace)?</i>	
<i>Is the applicant disabled or experience any limitations</i>	
Mild, idiopathic, non-limiting, non-progressive, >12 months	Select – Class 1* w/90 day EP
Progressive, uncontrolled, use of adaptive devices, balance problems, or falls	Decline
Polyneuropathy	Decline
Non-Hodgkin's Lymphoma: A cancer of the immune system whereby cells in lymph nodes abnormally reproduce which eventually leads to tumors that spread throughout the body	
Stage I and II, complete remission, stable-normal blood studies, asymptomatic, treatment free >12 months	Select w/180 day EP or Class 1* w/90 day EP
Mycosis Fungoides/Cutaneous T-Cell Lymphoma, complete remission, treatment-free >24 months	Select w/180 day EP or Class 1* w/90 day EP
* Obsessive Compulsive Disorder: An anxiety disorder characterized by the presence of obsessions or compulsions	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>Has the applicant ever been hospitalized? Date(s)</i>	
<i>Is the applicant disabled or experience any limitations? Describe</i>	
<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details?</i>	
Asymptomatic, non-disabling, no limitations, >6 months	Select
Chronic, uncontrolled, limited activities, or disabling	Decline
Optic Neuritis: Inflammation of the optic nerve	Refer to underlying cause
Optic Neuropathy: Damage of the optic nerve due to a blockage of its blood supply	Refer to underlying cause

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Condition	Decision
<ul style="list-style-type: none"> ● Osteoarthritis: A chronic musculoskeletal disease causing deterioration of the joint cartilage and the formation of new bone at the margins of the joints 	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>What joints are affected?</i>	
<i>What is the severity (mild, moderate, severe)?</i>	
<i>Has the applicant received any steroid or Synvisc injections? Date(s)</i>	
<i>Has the applicant had any orthopedic surgeries or has any been recommended? Date(s)/Details</i>	
<i>Has the applicant undergone any PT? Date(s)/Results</i>	
<i>Does the applicant use any assistive devices (i.e., cane, walker, brace)?</i>	
Non-weight bearing extremities, mild, treatment free, asymptomatic	Preferred
Mild to Moderate, well controlled with no limitations	Select – Select w/90 day EP
History of joint replacement, treatment-free, no assistive devices, established post treatment follow-up indicating a complete recovery and no complications	Select
Severe, symptomatic, limitations, use of an assistance device, treated with chronic narcotic pain relievers, recurrent PT or multiple steroidal injections	Decline
<ul style="list-style-type: none"> ● Osteomyelitis: An acute or chronic bone infection 	
Asymptomatic, complete recovery, no limitations, >6 months	Select
Symptomatic or residuals	Decline
<ul style="list-style-type: none"> ● Osteopenia: A thinning of the bones, typically the stage before true osteoporosis 	
Preventative treatment, asymptomatic	Preferred
With compression fracture(s), complete recovery, >12 months	Class 1* w/90 day EP
With compression fracture(s), chronic pain, or limitations	Decline
<ul style="list-style-type: none"> ● Osteoporosis: The progressive loss of bone density and thinning of bone tissue 	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>What were the T-score(s) of the last bone density study? Date</i>	
<i>Has the applicant had any bone or spinal fractures? Date(s)/Details</i>	
<i>Does the applicant have degenerative disc disease or scoliosis? Details</i>	
<i>Does the applicant smoke?</i>	
<i>What type of exercise does the applicant engage in? Frequency</i>	
Stable bone density T-scores (-2.5 to -3.5), no evidence of fracture	Select – Class 1*
Stable bone density T-scores (-2.5 to -3.5), 1 related fracture, complete recovery, >12 months	Class 1* w/90 day EP – Class 2* w/90 day EP
Moderate to Severe, stable bone density studies (-3.6 to -4.0)	Class 1* w/90 day EP – Decline
Weight bearing location with bone density T-score >4.0, multiple fractures, limitations, or disabling	Decline
<ul style="list-style-type: none"> ■ Pancreatitis: An inflammation or infection of the pancreas 	
<i>Date of diagnosis?</i>	
<i>Was the Pancreatitis acute or chronic?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>Has the Pancreatitis completely resolved?</i>	
<i>What were the results of the last blood workup? Date</i>	

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Condition	Decision
Pancreatitis (continued)	
Acute, complete recovery, asymptomatic, >6 months	Select
Chronic, active, history of alcohol abuse, or abnormal blood studies	Decline
* Panic Disorder: Repeated, unpredictable attacks of intense fear, accompanied by severe anxiety symptoms in the body that may last from minutes to hours	
<i>Date of diagnosis?</i>	
<i>Is applicant taking medication? Name(s)</i>	
<i>Has there been any change in treatment over the past 6 months? Details</i>	
<i>Has applicant ever been hospitalized for a panic disorder or any other type of mental illness disorder? Date(s)/Details</i>	
<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	
Well controlled, no limitations, non-disabling, >3 months	Select
Symptomatic, uncontrolled, resulting in limitations or disability, or multiple emergency room visits	Decline
Paralysis/Paresis: Temporary suspension or permanent loss of function, especially loss of sensation or voluntary motion	
Single partial limb, due to trauma, no limitations, >12 months	Class 1* w/90 day EP
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 tremor and difficulty with walking, movement, and coordination	Decline
♥ Paroxysmal Supraventricular Tachycardia: A rapid heart rhythm that occurs inside the atria and occurs sporadically	
Asymptomatic, treatment-free, no underlying cardiac conditions	Preferred
Asymptomatic, treated with medication	Select
Symptomatic	Decline
♥ Pericarditis: Inflammation of the pericardium, the sac covering the heart	
Single episode, treatment-free, complete recovery, >6 months	Select
Recurrent episodes	Decline
♥ Peripheral Artery Disease (PAD)/Peripheral Vascular Disease (PVD): 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	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>Has the applicant smoked within the past 12 months?</i>	
<i>Does the applicant have any symptoms of claudication, cramping, or pain in the lower extremities? Details</i>	
<i>Has the applicant had leg surgery or has any been recommended? Date(s)/Details</i>	
<i>Does the applicant have diabetes, heart or other circulatory problems? Details</i>	
<i>Has the applicant experienced any lower extremity skin changes, swelling, or ulcers? Date(s)/Details</i>	
Mild, asymptomatic, no claudication or limitations, good pulses	Select
Surgically treated, complete recovery, asymptomatic, no claudication or limitations, good pulses, >6 months	Select
With claudication, diabetes, ulcerations, or smoking within the past 12 months	Decline

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Condition	Decision
Physical Therapy: 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
Pituitary Tumor: A growth that arises in the pituitary gland	
Benign, stable, monitored annually without signs of progression, no limitations or complications	Preferred – Select w/180 day EP
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
Polycystic Kidney Disease: An inherited kidney disorder that enlarges the kidneys and interferes with their function because of multiple cysts on the kidneys	Decline
Polycythemia Vera: A blood disorder characterized by abnormal increase in red blood cells resulting from increased blood cell production by the bone marrow	
<i>Date of diagnosis?</i>	
<i>Is applicant taking any medications? Name(s)</i>	
<i>When was the applicants last phlebotomy?</i>	
<i>Has the applicant ever had a transient ischemic attack, blood clot, or gastrointestinal bleed? Details</i>	
<i>Does the applicant have any ongoing fatigue or anemia? Details</i>	
<i>Has there been any indication of progression to Leukemia? Details</i>	
Successfully treated, normal blood studies, >12 months	Select – Class 1* w/90 day EP
Successfully treated with splenectomy, normal blood studies, no history of recurrent infections	Select
History of Transient Ischemic Attack (TIA), blood clots, splenomegaly, hepatomegaly, neurological complaints, chronic fatigue, progression to leukemia, or smoking within the past 12 months	Decline
● Polymyalgia Rheumatica: A disorder of unknown cause, usually afflicting persons over the age of 50, involving pain and stiffness in the hip and shoulder area	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)/Dosage</i>	
<i>When was the last flare? Date</i>	
<i>Does the applicant have any osteoarthritis or back disorders? Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	
Asymptomatic, in remission and treatment-free, >6 months	Select
Asymptomatic, well controlled on low dose steroid therapy, >6 months	Class 1*
Symptomatic, daily narcotic use, chronic daily steroid therapy >7.5 mg, or muscle weakness or wasting	Decline
● Polymyositis: A systemic connective tissue disease, characterized by inflammation and degeneration of the muscles	Decline
Post Polio Paralytic Syndrome: A variety of musculoskeletal symptoms and muscular atrophy that create new difficulties with activities of daily living 25 to 30 years after the original attack of acute paralytic poliomyelitis	Decline

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Condition	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	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medications? Name(s)</i>	
<i>Has the applicant been hospitalized for PTSS or any other mental illness disorder? Date(s)/Details</i>	
<i>Does applicant have any history of depression, anxiety or other mental illness disorders? Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	
Well controlled, no limitations, non-disabling, >3 months	Preferred – Select
Symptomatic, uncontrolled, or resulting in limitations or disability	Decline
Pregnancy: The state of carrying a developing embryo or fetus within the female body	
Currently pregnant	Postpone
Successful delivery, no residual complications, and released from care	Preferred
♥ Premature Atrial Contractions (PACs): An early or premature heartbeat originating from the atria	
Asymptomatic, no underlying cardiac condition, treatment-free	Preferred
Asymptomatic, treated with single medication	Select
♥ Premature Ventricular Contractions (PVCs): An early or premature heartbeat originating from the ventricle	
Asymptomatic, no underlying cardiac condition, treatment-free	Preferred
Asymptomatic, treated with single medication	Select
● Psoriatic Arthritis: Arthritis associated with psoriasis	Refer to Rheumatoid Arthritis
* Psychosis: A general term referring to a loss of contact with reality	Decline
♥ Pulmonary Embolism (PE): A blockage of an artery in the lungs by a blood clot or an unknown substance	
■ <i>Date of the event?</i>	
<i>Is the applicant on any medication? Name(s)</i>	
<i>Has the applicant been hospitalized? Date(s)</i>	
<i>How many total clots/embolisms has the applicant had? Date(s)</i>	
<i>Has the applicant had a Greenfield Filter implanted? Date</i>	
<i>Does the applicant have any circulatory or respiratory disorders or complications?</i>	
<i>Is the applicant disabled or experience any limitations?</i>	
<3 PE's complete recovery, no underlying blood disorders or limitations, >6 months	Select – Class 1*
Greenfield filter implant, no recurrence of clot since inserted, complete recovery and no limitations, >6 months	Class 1*
>2 PE's, underlying blood disorder, limitations or complications	Decline
■ Pulmonary Fibrosis: A respiratory condition of unknown cause, characterized by scarring, thickening, and inflammation of the deep lung tissues	
Localized, incidental finding on chest x-ray, normal pulmonary function tests, no underlying respiratory disease, >6 months	Select
Symptomatic, or evidence of respiratory disease, connective tissue disease, or systemic disease	Decline
♥ Pulmonary Hypertension: A chronic and deadly disease characterized by increased pulmonary pressure and right-sided heart failure	
Mild, incidental finding by echocardiogram, asymptomatic, treatment free	Select
Moderate to severe finding by echocardiogram, symptomatic, or under treatment	Decline
■ Quadriplegia: Paralysis of all four extremities and usually the trunk, caused by injury to the spinal cord	Decline

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Condition	Decision
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	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>Does the applicant have any history of Lupus, Scleroderma, or Connective Tissue Disease? Details</i>	
<i>Has the applicant had any amputations? Date(s)/Details</i>	
Asymptomatic, treatment-free	Preferred
Stable, treated, no underlying disease, or limitations	Select
Due to disease	Refer to Disease
Rectocele: Protrusion or herniation of the posterior vaginal wall with the anterior wall of the rectum through the vagina	
Asymptomatic	Preferred
With fecal incontinence	Decline
■ Reflex Sympathetic Dystrophy (RSD): 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
Restless Leg Syndrome: A sleep disorder characterized by leg discomfort during sleep, which is only relieved by frequent movements of the legs	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>Does the applicant have sleep apnea?</i>	
Well controlled, treated	Select – Class 1*
Treated with >2 medications	Decline
Retinal Artery Occlusion: A blocking of one of the retinal arteries, typically caused by a clot in the blood stream and resulting in vision loss	Decline
Retinitis Pigmentosa: A progressive degeneration of the retina in the eye that affects night vision and peripheral vision	
Progressive visual loss, or existing neurological symptoms	Decline
Legally blind, completely independent, no limitations, >24 months	Class 1* w/90 day EP, 3 year BP
● Rheumatoid Arthritis: A chronic, inflammatory, systemic disease that primarily affects the joints and surrounding tissues but also affects other organ systems within the body	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)/Dosage</i>	
<i>Is the RA classified as juvenile or was it diagnosed prior to age 25?</i>	
<i>Does the applicant have any joint swelling or limited range of motion? Details</i>	
<i>Does the applicant have joint deformities? Details</i>	
<i>Has the applicant had any joint repair or replacement? Date(s)/Details</i>	
<i>Has the applicant had to have any joints aspirated to remove fluid? Date(s)/Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	
Asymptomatic, normal range of motion, treatment-free, no assistance devices or joint replacement, no limitations, non-disabling	Select
Asymptomatic, treated, no joint deformities or limitations	Select w/90 day EP – Class 1 w/90 day EP

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Condition	Decision
<ul style="list-style-type: none"> ● Rheumatoid Arthritis (continued) 	
History of joint replacement, complete recovery, no assistance devices, no limitations, non-disabling, >6 months	Select w/90 day EP – Class 1* w/90 day EP
Asymptomatic, on non-steroidal maintenance medications (i.e., Plaquenil, MTX) with chronic steroid treatment	Decline
Symptomatic, Juvenile, severe or multiple joint deformities, >2 joint replacements, limitations, disabling, or current PT or OT	Decline
<ul style="list-style-type: none"> ■ Sarcoidosis: A disease of unknown cause in which inflammation consisting of granulomas occurs in lymph nodes, lungs, liver, eyes, skin, and other tissues 	
<i>Date of diagnosis?</i>	
<i>What areas of the body are affected?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>If lung involvement, have pulmonary function tests been performed? Date/Results (FEV1 & FVC%)</i>	
Asymptomatic, no complications or limitations, treatment-free, >12 months	Select
Multiple sites, under treatment, symptomatic, or with limitations	Decline
<ul style="list-style-type: none"> * Schizophrenia: A group of psychotic disorders characterized by disturbances in thought, perception, affect, behavior, and communication lasting longer than 6 months 	Decline
<ul style="list-style-type: none"> ● Schwannoma: A benign tumor situated in the hearing canal 	
<i>Has the neuroma been removed? Date</i>	
<i>Has there problems with balance or falls? Details</i>	
<i>Has there been any seizure activity? Date of last seizure?</i>	
<i>Is applicant taking any medication? Name(s)</i>	
<i>Is the applicant receiving physical therapy?</i>	
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
<ul style="list-style-type: none"> ● Sciatica: A condition involving impaired movement and/or sensation in the leg, caused by damage to the sciatic nerve 	
Asymptomatic, normal range of motion, treatment-free, no underlying disease of the spine, >12 months	Preferred
<ul style="list-style-type: none"> ● Scleroderma: A diffuse connective tissue disease characterized by changes in the skin, blood vessels, skeletal muscles, and internal organs 	Decline
<ul style="list-style-type: none"> ● Scoliosis: A lateral (away from the middle) or sideways curvature of the spine 	
<i>Is the applicant on any medication? Name(s)</i>	
<i>Does the applicant have osteoporosis? T-Score?</i>	
<i>Has the applicant undergone any physical therapy? Date</i>	
<i>Has the applicant had any back surgeries performed? Date(s)/Details</i>	
<i>What is the severity (mild, moderate, severe)?</i>	
<i>Does applicant have any associated pulmonary problems?</i>	
Mild, asymptomatic and treatment-free, >6 months	Preferred
Mild to moderate, asymptomatic, treated with NSAID, no limitations, non-disabling	Select
Successfully treated with physical therapy or injections, no limitations, non-disabling, >6 months	Select w/90 day EP – Class 1* w/90 day EP
Severe, with limitations or any pulmonary compromise, multiple surgeries, or disabling	Decline

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Condition	Decision
Seizure Disorder: A sudden violent, uncontrollable contraction of a group of muscles	
<i>Date of diagnosis?</i>	
<i>When was the applicant's last seizure?</i>	
<i>What type of seizures does applicant have?</i>	
<i>What is the cause?</i>	
<i>Is the applicant on any medication? Name(s)</i>	
<i>Has the applicant had a recent EEG and/or MRI? Date, Results</i>	
Well controlled, seizure-free, normal EEG/MRI, >12 months	Select
Ongoing or uncontrolled seizure activity	Decline
Shunt: A surgically placed tube designed to divert excess cerebrospinal fluid from the brain and carry it to other parts of the body. It usually sits outside the skull, but beneath the skin, behind the ear.	Decline
Shy-Drager Syndrome: A degenerative disorder characterized by progressive damage to the autonomic nervous system, muscle tremor and rigidity, and other widespread neurological losses	Decline
♥ Sick Sinus Syndrome: A form of bradycardia in which the sinoatrial node (the heart's natural pacemaker) is not functioning properly	
Successful pacemaker implant, asymptomatic with follow-up visit	Select
Symptomatic with episodes of syncope or near-fainting, shortness of breath, dizziness, or weakness	Decline
Sickle Cell Anemia: 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 with follow-up visit	Select
Symptomatic with episodes of syncope or near-fainting, shortness of breath, dizziness, or weakness	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 with follow-up visit	Select
Symptomatic with episodes of syncope or near-fainting, shortness of breath, dizziness, or weakness	Decline
Sjogren's Syndrome: A systemic, inflammatory disorder characterized by dry mouth, decreased tearing, and other mucous membranes often associated with auto-immune rheumatic disorders	
Asymptomatic, treatment-free, >6 months	Preferred
Well controlled, treated, no systemic involvement	Select
Due to disease	Refer to disease
■ Sleep Apnea: Repeated, prolonged episodes of cessation of breathing during sleep	
<i>Date of diagnosis?</i>	
<i>Does the applicant require the use of CPAP or BIPAP?</i>	
<i>Does the applicant require the use of supplemental oxygen with their breathing device?</i>	
<i>Have pulmonary function tests been performed? Date and results (FEV1 and FVC%)</i>	
<i>Does the applicant have any other respiratory conditions? Details</i>	
<i>Does the applicant smoke? Frequency</i>	
Mild, stable with or without C-PAP mask	Select
Respiratory compromise or failure, severe with non-compliance of treatment, or oxygen use	Decline
● Spina Bifida: A congenital disorder where the backbone and spinal cord do not close before birth	Decline

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Condition	Decision
<ul style="list-style-type: none"> ● Spina Bifida (Occulta): 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: A permanent injury to the spinal cord	Decline
<ul style="list-style-type: none"> ● Spinal Stenosis: A narrowing of the lumbar or cervical spine canal, which causes compression on nerve roots 	
Mild to moderate, well controlled, no limitations	Select – Class 1* w/90 day EP
Moderate, status post steroid injections, no evidence of radiculopathy or related symptoms to the extremities, no limitations, > 6 months	Select w/90 day EP
Single spinal surgery, complete recovery, successful completion of Physical Therapy, no limitations or complications, high functioning	Select – Select w/90 day EP
Severe, chronic pain, limitations, disabling, radiculopathy or related symptoms to the extremities, use of assistance devices, or multiple surgeries (>2)	Decline
<ul style="list-style-type: none"> ● Spondylolisthesis: Forward slippage of a lumbar vertebra on the vertebra below it 	Refer to Degenerative Disc Disease
<ul style="list-style-type: none"> ♥ Squamous Cell Carcinoma (disease- and treatment-free): A malignant skin tumor involving the middle portion of the epidermal skin layer 	
Localized to the skin w/biopsy confirmation, no internal organ involvement	Preferred
Of an internal organ	Refer to Cancer (Internal)
<ul style="list-style-type: none"> ♥ Stroke (CVA): Occurs when the blood supply to any part of the brain is interrupted, resulting in the death and loss of brain function and tissue 	Decline
Subdural Hematoma: A collection of blood on the surface of the brain	
Complete recovery, no limitations or cognitive deficits, >12 months	Select
Diagnosed as chronic, with limitations or cognitive deficit	Decline
Syncope: A transient loss of consciousness due to inadequate blood flow to the brain	
<i>Date of diagnosis?</i>	
<i>What is the cause of the syncope?</i>	
<i>What type of work-up has the applicant undergone?</i>	
<i>Is the applicant receiving any treatment? Details</i>	
<i>How many episodes has the applicant had?</i>	
<i>Does the applicant have any heart or neurological disorders?</i>	
Benign, vasovagal per work-up, >6 months	Preferred
Due to disease	Refer to disease
Unknown etiology or recurring episodes	Decline
Thrombocythemia (Essential or Secondary Thrombocytosis): A blood disorder characterized by an increase in the number of blood platelets	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication? Name(s)</i>	
<i>What are the applicant's platelet levels? Date</i>	
<i>Does the applicant require phlebotomies? Frequency</i>	
<i>Has the applicant ever had a Transient Ischemic Attack (TIA) or have any heart or circulatory disorders?</i>	
<i>Does the applicant smoke?</i>	
Stable platelet counts, treatment free, asymptomatic, >6 months	Select w/90 day EP – Class I*
Current treatment, tobacco use within the past 12 months, any progression, TIA, or complications	Decline

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Condition	Decision
Tobacco Use: Cigarettes, pipe, cigars, chew, or snuff	
Abstinence, >12 months	Preferred
Current use or abstinence <12 months	Select
♥ Transient Global Amnesia: A memory disorder seen in middle-aged and elderly persons; characterized by an episode of amnesia and bewilderment that lasts for several hours; person is otherwise alert and intellectually active	
<i>Date of episode?</i>	
<i>Has the applicant had any similar episodes in the past? Date(s)/Details</i>	
<i>Does the applicant have diabetes, heart, or circulatory problems?</i>	
<i>Was the applicant hospitalized?</i>	
<i>What were the results of testing performed? (carotid studies, MRI/CT of brain)?</i>	
<i>Does the applicant have any residual symptoms (memory loss/confusion, dizziness)?</i>	
Single episode, asymptomatic, no cognitive or physical residuals, >12 months	Class 1* w/90 day EP
2 episodes, or residual cognitive or physical abnormalities	Decline
♥ Transient Ischemic Attack: A brain disorder caused by temporary disturbance of blood supply to an area of the brain, resulting in a sudden, brief decrease in brain functions	
<i>Date of episode?</i>	
<i>Has the applicant had any similar episodes in the past? Date(s)/Details</i>	
<i>Does the applicant have diabetes, heart or circulatory problems?</i>	
<i>Was the applicant hospitalized?</i>	
<i>What were the results of testing performed? (carotid studies, MRI/CT of brain)?</i>	
<i>Does the applicant have any residual symptoms (memory loss/confusion, dizziness)?</i>	
<i>Does the applicant smoke?</i>	
<i>Is the applicant disabled or experience any limitations?</i>	
Single episode, asymptomatic, no cognitive or physical residuals, >12 months	Class 1* w/90 day EP
2 episodes, diabetes, smoking w/in the past 12 months, or residual cognitive or physical abnormalities	Decline
Transverse Myelitis: A neurological disorder caused by inflammation across both sides of one level, or segment, of the spinal cord	Decline
Tremor: An involuntary type of shaking movement	
<i>Date of diagnosis?</i>	
<i>Is the applicant taking any medication or had any surgical implants? Name(s)</i>	
<i>Has the applicant had a neurological evaluation? Date</i>	
<i>What type of tremor has been diagnosed?</i>	
<i>Has there been any progression of the tremor? Details</i>	
<i>Is the applicant disabled or experience any limitations or require any assistance?</i>	
Negative neurological work-up, diagnosed as benign, essential, or familial, non-progressive, no limitations, non-disabling	Select – Class 1*
Absent neurological work-up, diagnosed as benign, essential, or familial, non-progressive, no limitations, non-disabling, >12 months	Select
Due to an underlying disease	Refer to disease
Intention tremor, or any other tremor type resulting in limitations or disability, treatment with an anti-parkinsons medication, or progression	Decline

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Condition	Decision
■ Tuberculosis: A contagious bacterial infection; the lungs are primarily involved, but the infection can spread to other organs Acute episode, treatment free, asymptomatic, no residual damage, >6 months Symptomatic, evidence of residual disease, or reduced pulmonary function tests	Select Decline
Ulcerative Colitis: 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 Is the applicant disabled or experience limitations? Details Does the applicant experience problems with continence? Asymptomatic, medically managed with or without an ostomy, no limitations, non-disabling, >6 months Chronic low dose steroid therapy, asymptomatic, no limitations, non-disabling, >12 months Colostomy, ileostomy, complete recovery, no limitations, non-disabling, independent management, >6 months Frequent exacerbations/flares, multiple surgeries, limitations, complications, or disabling	Select – Class 1* w/90 day EP Class 1* w/90 day EP Class 1* w/90 day EP, 3 year BP Decline
Ulcer (Gastric, Duodenal, Peptic): An erosion or open sore in the lining of the area of the stomach or duodenum lining Stable, asymptomatic, no history of bleeds GI bleed or hospitalization, complete recovery, asymptomatic, no limitations, >6 months	Preferred 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 Independent use of an intermittent catheter with no recurrent urinary tract infections, or surgically treated, complete recovery, >12 months Treated with <4 dilations w/in a 12 month period, stable, no recurrent urinary tract infections or incontinence >3 months Recurrent urinary tract infections, incontinence, chronic daily antibiotic treatment, or abnormal renal functions	Preferred Select – Class 1* Select – Class 1* 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, with or without successful vein stripping, stable, no-limitations Non-healing ulcers, recurrent ulcers, or claudication	Preferred Decline
♥ Ventricular Fibrillation: A rapid and irregular heartbeat arising from the lower chambers of the heart Successful defibrillator implant, asymptomatic with follow-up visit Uncontrolled, episodes of chest pain, shortness of breath, syncope or near syncope, or dizziness	Select Decline

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Condition	Decision
♥ Ventricular Tachycardia: A rapid heartbeat originating from the lower chambers of the heart	
Successful defibrillator implant, asymptomatic with follow-up visit	Select
Uncontrolled, episodes of chest pain, shortness of breath, syncope or near syncope, or dizziness	Decline
♥ Vertebral Basilar Insufficiency: Insufficient blood flow to the back parts of the brain	Decline
Vertigo: A feeling of faintness or lightheadedness, making it difficult to maintain balance while standing or sitting	
Benign positional vertigo, mild, stable, no limitations, >6 months	Preferred
Due to disease	Refer to disease
Symptomatic, recurring falls, or cause unknown	Decline
Visual Loss	
<i>Date of diagnosis?</i>	
<i>What is the cause?</i>	
<i>Does it involve one or both eyes?</i>	
<i>Does the applicant utilize any assistance or assistance device(s)? Details</i>	
<i>Is the applicant disabled or experience any limitations? Details</i>	
Single eye, congenital or traumatic, no limitations, non-disabling, completely independent	Select
Both eyes, congenital or traumatic, no limitations, non-disabling, completely independent, >12 months	Select – Class 1*
Due to disease	Refer to disease
Von Hippel-Lindau: 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	
Mild to Moderate types I or II, stable, >12 months	Select – Class 1* w/90 day EP
Type III VWD, or severe types I and II, or requiring replacement therapy	Decline
Waldenstrom's Macroglobulinemia: A cancer of white blood cells known as B lymphocytes	Decline
Wegener's Granulomatosis: A rare disorder which causes inflammation of blood vessels in the upper respiratory tract, lungs, and kidneys	Decline
Wernicke-Korsakoff Syndrome: A brain disorder involving loss of specific brain functions, due to a thiamine deficiency that commonly accompanies habitual alcohol use	Decline
Whipple's Disease: A rare disorder with widespread symptoms that causes malabsorption (inadequate absorption of nutrients from the intestinal tract)	Decline
Wilson's Disease: An inherited disorder where there is excessive amounts of copper in the body, which causes a variety of effects including liver disease and damage to the nervous system	Decline
Wiscott-Aldrich Syndrome: 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 or successful treatment with radio-frequency or catheter ablation with follow-up visit, no underlying cardiac disease	Select
Uncontrolled, episodes of chest pain, shortness of breath, syncope or near syncope, or dizziness	Decline
Xeroderma Pigmentosa: An inherited inability to repair DNA damage from ultraviolet light	Decline

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

- | | |
|---|---|
| ■ Represents a respiratory co-morbid condition. | ♥ Represents a circulatory co-morbid condition. |
| ● Represents a musculoskeletal co-morbid condition. | * Represents a mental illness condition. |

*Standard risk classifications are only eligible for 2–6 year Benefit Periods. SharedCare only available with a 2- or 3-year Benefit Period. In AZ and NH a 4-year Benefit Period is allowed.

XIV. Underwriting Guidelines for the Double Coverage for Accident Benefit

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

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

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

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

Not available if the applicant is age 65 and older.

Decisions not to include this benefit are permanent and cannot be reconsidered at a future time.

XV. Uninsurable Medications

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

Medication	Use	Medication	Use	Medication	Use
Abilify	Antipsychotic	Gleevec	Cancer, Leukemia	PhosLo	Kidney failure
Adriamycin	Malignant tumors	Gold Therapy	Arthritis	Plenaxis	Advanced Prostate Cancer
Alkeran	Multiple Myeloma	Haldol	Antipsychotic	Procrit	Anemia
Aranesp	Anemia	Hydergine	Decline in mental capacity	Purinethol	Severe Progressive Ulcerative Colitis
Aricept	Alzheimer's Disease	Imuran	Immunosuppressant	Razadyne	Alzheimer's Disease
Artane	Parkinson's Disease	Interferon	Immunosuppressant	Rebif	Multiple Sclerosis
Avinza	Chronic pain	Kadian	Chronic pain	Remicade	Rheumatoid Arthritis/ Crohn's Disease
Avonex	Multiple Sclerosis	Kineret	Rheumatoid Arthritis	Reminyl	Alzheimer's Disease
AZT	HIV, AIDS	L-Dopa	Parkinson's Disease	Renagel	Kidney failure
Cerefolin	Memory Loss	Larodopa	Parkinson's Disease	Ridura	Rheumatoid Arthritis
Cogentin	Parkinson's Disease	Leukeran	Malignant tumors, not curative	Risperdal	Antipsychotic
Cognex	Alzheimer's Disease	Mellaril	Antipsychotic	Seroquel	Antipsychotic
Cyloserine	Alzheimer's Disease	Mestinon	Myasthenia Gravis	Sinemet	Parkinson's Disease
Cytosan	Malignant tumors	Methadone	Severe pain	Stelazine	Antipsychotic
DDI	HIV, AIDS	Mirapex	Parkinson's Disease	Steroid Use	>10 mg daily
Depo-Provera	Inoperable, Recurrent, and Metastatic Endometrial, and Renal Carcinoma	Morphine	Severe pain	Symbyax	Antipsychotic
Duragesic Patch	Chronic pain	MS Contin	Severe pain	Symmetrel	Parkinson's Disease
Eldepryl	Parkinson's Disease	Namenda	Alzheimer's Disease	Thiothixene	Antipsychotic
Epogen	Anemia	Navane	Antipsychotic	Thorazine	Antipsychotic
Estinyl	Cancer	Neulasta	Anemia	Trilafon	Antipsychotic
Ergoloid	Decline in mental capacity	Oxycontin	Severe pain	Tysabri	Multiple Sclerosis
Exelon	Alzheimer's Disease/Dementia	Parlodel	Parkinson's Disease	Xyrem	Narcolepsy
Fentanyl Patch	Chronic pain	Parsidol	Parkinson's Disease	Zyprexa	Antipsychotic
Geodon	Schizophrenia	Permax	Parkinson's Disease		

XVI. Male/Female Height and Weight Table

	Preferred BMI 18.5-29.9		Select BMI 30.0-34.9		Class 1 - Class 2* BMI 35.0-39.9	
	Min.	Max.	Min.	Max.	Min.	Max.
4' 7"	80	128	129	150	151	171
4' 8"	83	133	134	155	156	178
4' 9"	86	138	139	161	162	184
4' 10"	89	143	144	167	168	191
4' 11"	92	148	149	173	174	197
5' 0"	95	153	154	178	179	204
5' 1"	98	158	159	184	185	211
5' 2"	101	163	164	191	192	218
5' 3"	105	169	170	197	198	225
5' 4"	108	174	175	203	204	232
5' 5"	111	179	180	210	211	239
5' 6"	115	185	186	216	217	247
5' 7"	118	191	192	223	224	254
5' 8"	122	196	197	229	230	262
5' 9"	125	202	203	236	237	270
5' 10"	129	208	209	243	244	278
5' 11"	133	214	215	250	251	286
6' 0"	137	220	221	257	258	294
6' 1"	140	227	228	264	265	302
6' 2"	144	233	234	272	273	310
6' 3"	148	239	240	280	281	319
6' 4"	152	246	247	287	288	327
6' 5"	156	252	253	294	295	336
6' 6"	160	259	260	302	303	345
6' 7"	164	265	266	310	311	353

*Class 2: BMI 35.0-39.9 with history of arthritis of weight-bearing joints, bariatric surgery, coronary artery disease, high cholesterol, hypertension, or obstructive sleep apnea.

XVII. 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 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/she should send a letter outlining the discrepancies and include supporting documentation.
- If the physician disagrees with the contents of the letter, he/she should send a letter outlining the discrepancies and include supporting documentation.

Appeals should be submitted within 90 days of the underwriting decision. You will be informed of our decision within 30 days of 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.



LONG-TERM CARE
INSURANCE

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