



UNDERWRITING GUIDELINES

Agent Guide to Basic Underwriting Information and Requirements





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How to Submit a Life Application

Before Completing a Life Application Remember

- The agent must be licensed and appointed, according to applicable state regulations.
- Applications cannot be dated prior to the agent’s license appointment effective date with the company.
- Any application submitted from an agent that is not appointed with the company will be held in the Administrative Office pending compliance with state licensing appointment requirements.
- If state licensing appointment requirements are not met, the application will be incompleting.
- American National is not obligated to accept any business that is not in compliance with state regulations.

What are my options for submission?

American National currently accepts life applications in the following formats:

Electronic application through ExpertApp	Preferred Method! Access via the IMG website img.anicoweb.com or login to your ExpertOffice account		
ExpertScan Application	Scanned life apps can be submitted through your ExpertOffice account		
Faxed Application	You can fax all documents to 1-888-237-1012		
Paper Application	Paper applications can be mailed to: <table border="0"><tr><td>Regular Mail: American National Processing Center Life New Business PO BOX 3297 Springfield, MO 65808-3297</td><td>Overnight Mail: American National Insurance Company Mail Processing Center Attn: LNB 3297 1949 E Sunshine St., Springfield, MO 65899-3297</td></tr></table>	Regular Mail: American National Processing Center Life New Business PO BOX 3297 Springfield, MO 65808-3297	Overnight Mail: American National Insurance Company Mail Processing Center Attn: LNB 3297 1949 E Sunshine St., Springfield, MO 65899-3297
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Life Application Tips

- The agent should examine the application thoroughly and become familiar with it before completing the information.
- All questions should be asked and all answers recorded completely and legibly, using black ink.
- Dashes, ditto marks and crosses have no legal meaning and are not valid answers.
- All boxes should be marked with Xs and not check marks. Those questions that do not apply should be left blank unless instructions are given to write “none.”
- The agent has no right to change a signed application without the applicant’s consent. Every alteration, erasure, correction, or addition made on the application must be initialed by the applicant.
- “White Out” is not acceptable on the application.

Underwriting Requirements

The charts below illustrate the underwriting requirements for American National life policies. In order to set your client's expectations properly, the charts below separate requirements by what will be ordered by the agent and what will be ordered by the home office.

Before ordering requirements listed as "Agent Orders", please check with your agency to see if they handle the order of any requirements on your behalf.

Legend

●	Automatic requirement. Agent can order the requirements now.
▲	Wait! No automatic exam is required. The agent orders the exam only at American National's direction.
■	Automatically ordered by American National
Blood/HOS	Blood/HOS: Blood chemistry profile & urinalysis
EKG	Resting Electrocardiogram

PFS	Financial Supplement: Form 4165 (Business Financial Statement for Buy/Sell)
SAS	Senior Age Supplement
PFIF	Premium Funding Intent Form
MVR	Motor Vehicle Report
APS	Attending Physician Statement
TPF	Third Party Financials (The agent/agency may provide this instead of American National, if they prefer. If the agent/agency is providing, please notify us by cover letter.)

Insured Age 18-40

	Face Amount	Agent Orders			Home Office Orders				
		Blood/HOS/Paramed	EKG	PFS	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Xpress No automatic exams	0 – 49,999	▲							
	50,000 – 99,999	▲							
	100,000 – 249,999	▲			■				
Xpress Plus No automatic exams	250,000 – 500,000 (e-App)	▲			■				
	500,001 – 1,000,000 (e-App)	▲			■				
Traditional Underwriting	250,000 – 500,000 (Paper)	●			■				
	500,001 – 1,000,000 (Paper)	●			■				
	1,000,001 – 1,500,000	●			■	■			
	1,500,001 – 3,000,000	●			■	■		■	
	3,000,001 – 5,000,000	●		●	■	■		■	
	5,000,001 – 7,500,000	●		●	■		■	■	■
	7,500,001 and up	●	●	●	■		■	■	■

Insured Age 41-50

	Face Amount	Agent Orders			Home Office Orders				
		Blood/HOS/Paramed	EKG	PFS	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Xpress No automatic exams	0 – 49,999	▲							
	50,000 – 99,999	▲							
	100,000 – 249,999	▲			■				
Xpress Plus No automatic exams	250,000 – 500,000 (e-App)	▲			■				
	500,001 – 1,000,000 (e-App)	▲			■				
Traditional Underwriting	250,000 – 500,000 (Paper)	●			■				
	500,001 – 1,000,000 (Paper)	●			■				
	1,000,001 – 1,500,000	●			■	■			
	1,500,001 – 3,000,000	●			■	■		■	
	3,000,001 – 5,000,000	●		●	■	■		■	
	5,000,001 – 7,500,000	●	●	●	■		■	■	■
	7,500,001 and up	●	●	●	■		■	■	■

Insured Age 51-60

	Face Amount	Agent Orders			Home Office Orders				
		Blood/HOS/Paramed	EKG	PFS	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Xpress No automatic exams	0 – 49,999	▲							
	50,000 – 99,999	▲							
	100,000 – 249,999	▲			■				
Xpress Plus No automatic exams	250,000 – 500,000 (e-App)	▲			■				
Traditional Underwriting	250,000 – 500,000 (Paper)	●			■				
	500,001 – 1,000,000	●			■				
	1,000,001 – 1,500,000	●			■	■			
	1,500,001 – 3,000,000	●			■	■		■	
	3,000,001 – 5,000,000	●		●	■	■		■	
	5,000,001 – 7,500,000	●	●	●	■		■	■	■
	7,500,001 and up	●	●	●	■		■	■	■

Insured Age 61–65

	Face Amount	Agent Orders			Home Office Orders				
		Blood/HOS/Paramed	EKG	PFS	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Xpress No automatic exams	0–49,999	▲							
	50,000–99,999	▲							
	100,000–249,999	▲			■				
Traditional Underwriting	250,000–500,000	●			■				
	500,001–1,000,000	●			■			■	
	1,000,001–1,500,000	●			■	■		■	
	1,500,001–3,000,000	●			■	■		■	
	3,000,001–5,000,000	●		●	■	■		■	
	5,000,001–7,500,000	●	●	●	■		■	■	■
	7,500,001 and up	●	●	●	■		■	■	■

Insured Age 66–70

	Face Amount	Agent Orders			Home Office Orders				
		Blood/HOS/Paramed	EKG	PFS	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Traditional Underwriting	0–24,999								
	25,000–49,999	● ¹							
	50,000–99,999	●							
	100,000–249,999	●			■				
	250,000–500,000	●			■				
	500,001–1,000,000	●			■			■	
	1,000,001–1,500,000	●		●	■	■		■	
	1,500,001–3,000,000	●		●	■	■		■	
	3,000,001–5,000,000	●	●	●	■		■	■	■
	5,000,001–7,500,000	●	●	●	■		■	■	■
	7,500,001 and up	●	●	●	■		■	■	■

Insured Age 71 & Up

	Face Amount	Agent Orders					Home Office Orders				
		Blood/HOS/Paramed	EKG	PFS	SAS	PFIF	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Traditional Underwriting	0–24,999									■	
	25,000–49,999	● ¹								■	
	50,000–99,999	●			●					■	
	100,000–249,999	●			●		■			■	
	250,000–500,000	●			●		■			■	
	500,001–1,000,000	●	●	●	●	●	■		■	■	
	1,000,001–1,500,000	●	●	●	●	●	■		■	■	■
	1,500,001–3,000,000	●	●	●	●	●	■		■	■	■
	3,000,001–5,000,000	●	●	●	●	●	■		■	■	■
	5,000,001–7,500,000	●	●	●	●	●	■		■	■	■
	7,500,001 and up	●	●	●	●	●	■		■	■	■

1) HOS and Paramedical Exam only.

Paramedical and Inspection Services

The numbers below are national numbers provided to assist agency staff in contacting a local servicing company representative. Appointments are arranged at the local level.

	Company	Phone Number	Website
Setting Up Examinations Agent to order and indicate from which company on the application's agent checklist.	APPS	1-800-635-1677	https://appslive.com/
	ExamOne	1-800-768-2056	https://portal.examone.com/
	IMS	1-877-808-5533	https://www.imsparmed.com/
Inspections Underwriting to order unless the agent indicates otherwise on the application's agent checklist.			

Important Information

1. An exam by an applicant's personal physician is usually unacceptable.
2. Medical requirements will not be waived if the amount is reduced after the application is submitted.
3. Any application written in excess of \$500,000 must not have premium submitted with the application. Any policy that is table 4 or over should also not have premium taken at submission.
4. HIV consent form should be collected by the agent at the time of application, and submitted to the Administrative Office if required by state.

Cash With Application (CWA) Refund Checks: When a file is incomplete, declined, or postponed, American National will issue a refund check. Refund checks will not be accepted as Cash With Application (CWA) on any rewritten or reopened case. A new check must be obtained. Any refund check that is submitted as Cash With Application (CWA) will be returned directly to the client.

American National reserves the right to order any requirement it deems necessary for sound underwriting practice. Clients will be given the option to receive text notification of the availability of results from our lab provider. Those results can be obtained electronically by the client. If this is not an option, in order for the client to obtain a copy of their lab results, please send written request to the address below. This request must be over the proposed insured's signature. To obtain a copy of an abnormal blood profile and/or information from an APS on rated, declined or postponed cases, write to the address below. (This written request must be over applicant/insured's signature and contain the name and address of the doctor whose records are in question.)

Life Underwriting

American National Insurance Company
 PO Box 1720
 Galveston, Texas 77553



Underwriting Requirements Shelf Life

Ages up to 65 (Standard Risks or Better)

Medical Exams, labs, EKG's, and MVR's are good for 12 months on Standard risks or better. Underwriting reserves the right to order "for cause" requirements. After six months, a new non-medical application with completed medical questions will be required. The company will also order a new prescription check and MIB after six months.

Ages up to 65 (Substandard Risks)

Medical Exams, labs, EKGs, and MVR's are good for six months. Underwriting reserves right to order "for cause" requirements. A newly completed application or Good Health Statement may be required.

Ages 66–75

Medical Exams, labs, EKG's and MVR's are good for six months. Underwriting reserves right to order "for cause" requirements. A Good Health Statement and updated prescription check will be required upon delivery if exam or fully completed application is over three months old.

Ages 76+

Medical Exams, labs, EKG's, and MVR's are good for three months. May allow up to four months if there has been a complete physical in the medical records in the past three months. Underwriting reserves right to order "for cause" requirements. Updated prescription checks and Good Health Statements may also be required.

Preferred Risk Underwriting

Available on Designated Plans Only

Preferred risk contracts are designed and priced to produce better mortality results than can be expected from an average block of business. In other words, to support pricing assumptions, preferred lives must be better than standard lives.

Item	Preferred Criteria: Ages 0 – 60			Preferred Criteria: Ages 61 +		
	Preferred Plus	Preferred	Standard Plus	Preferred Plus	Preferred	Standard Plus
Cholesterol	300	300	300	300	300	300
Ratio	4.5	5.5	6.0	5.0	5.5	6.0
Cholesterol Treatment	Treated or untreated can be considered. (Untreated chol of <130 will not be eligible for standard plus, pref, or preferred plus.)					
Non-Nicotine User	5 Years	3 Years	2 Years	5 Years	3 Years	2 Years
	Cigar or smokeless tobacco use of no more than 2 per month and negative HOS					
Blood Pressure to age 60	No RX	RX/UN	RX/UN	No RX	RX/UN	RX/UN
	135/80	140/90	150/90	140/85	150/90	155/95
Family History²	No death or occurrence CAD, CVA or Familial Cancers (breast, colon, lung, ovarian, prostate or melanoma) in parents or siblings prior to age 65	No death from CAD, CVA, or Familial Cancers (breast, colon, lung, ovarian, prostate or melanoma) in parents or siblings prior to age 60	No death from CAD or CVA in parents or siblings prior to age 60	Not considered at ages 71 & up. Ages 61–70: See family history rules for ages 60 and under		
Weight	According to Build Table					
Driving	No DUI/DWI or reckless driving for 5 years. No moving violations >2 in 5 years	No DUI/DWI or reckless driving for 5 years. No moving violations >2 in 3 years	No DUI/DWI for 5 years and not ratable for driving history.	No DUI/DWI or reckless driving for 5 years. No moving violations >2 in 5 years	No DUI/DWI or reckless driving for 5 years. No moving violations >2 in 3 years	No DUI/DWI for 5 years.
Aviation	See Aviation Ratings Table on next page.					
Residency	Typically 1 year in the U.S. Must be a U.S. or Canadian Citizen or permanent resident.					
Travel	Travel to undeveloped countries, or countries where political violence or terrorism is a significant risk, may be rated or declined. If the risk is acceptable, there may be times a permanent plan is required.					
Personal Medical History	No personal history of heart disease, cancer, diabetes, or other medical conditions or lab or exam results deemed as a non-preferred risk by the underwriting department.					
Recreational Marijuana	Typically, Standard Non-Nicotine possible if urine is negative for nicotine and there has been no use of nicotine in the past 12 months. Preferred Consideration is possible if all the criteria is met.					
Alcohol & Drug Use	No alcohol or drug abuse in the past 10 years.					

2) For Preferred and Standard Plus: Multiple family members diagnosed with same cancer prior to age 60 will limit to Standard.



Item	Preferred Criteria: Ages 0 – 60			Preferred Criteria: Ages 61 +		
	Preferred Plus	Preferred	Standard Plus	Preferred Plus	Preferred	Standard Plus
Risk Classifier	Characteristics determined using Risk Classifier report outside our tolerance will be limited to standard. Risk Classifier utilized characteristics derived from public records and credit history.					
Minimum Build	BMI must be greater than 18.5 to be considered Std. Plus, Pref. or Pref. Plus					
Serum Albumin	4.0 or greater					
eGFR	60+					
Cognitive/Functional	No indications of cognitive impairment or inability to perform Activities of Daily Living (ADLs)					

Private Aviation Ratings

Solo Experience < 300 hours		Solo Experience >300 hours	
Flying Hours per Year		Flying Hours per Year	
Less than or equal to 100	Standard ³	< 200	Standard ³
101 to 250	\$2 per M	201 to 350	\$2 per M
Greater than 250	\$3 per M up	> 350	\$3 per M up

If pilot has IFR: deduct \$1 per M.

Student Pilots : \$2 per M.

Other Considerations

- Pilots age 71 and over Individual consideration for ratings. No Preferred.
- Age 75+ requires Aviation Exclusion
- Scheduled Commercial Pilots in North America can be considered for Pref Plus rates if all other criteria is met

3) Preferred if meets all other criteria

Build Table


Preferred Plus				Preferred				Standard Plus			
Height		Weight		Height		Weight		Height		Weight	
Feet	Inches	Low	High	Feet	Inches	Low	High	Feet	Inches	Low	High
5	0	95	146	5	0	95	159	5	0	95	169
5	1	98	151	5	1	98	165	5	1	98	175
5	2	101	156	5	2	101	170	5	2	101	181
5	3	105	162	5	3	105	176	5	3	105	187
5	4	108	167	5	4	108	181	5	4	108	193
5	5	111	172	5	5	111	187	5	5	111	199
5	6	115	177	5	6	115	193	5	6	115	205
5	7	118	182	5	7	118	198	5	7	118	211
5	8	122	188	5	8	122	204	5	8	122	218
5	9	125	193	5	9	125	210	5	9	125	224
5	10	129	199	5	10	129	217	5	10	129	230
5	11	133	205	5	11	133	223	5	11	133	237
6	0	136	211	6	0	136	229	6	0	136	244
6	1	140	217	6	1	140	235	6	1	140	251
6	2	144	222	6	2	144	242	6	2	144	258
6	3	148	229	6	3	148	247	6	3	148	265
6	4	152	234	6	4	152	255	6	4	152	272
6	5	156	241	6	5	156	262	6	5	156	279
6	6	160	247	6	6	160	269	6	6	160	286
6	7	164	253	6	7	164	276	6	7	164	293
6	8	168	260	6	8	168	283	6	8	168	301
6	9	172	266	6	9	172	290	6	9	172	308



Precision Credit Underwriting Rate Class Reductions

Success Stories

During the process of reviewing a medically underwritten case, underwriters can apply “credits” for healthy characteristics. Individuals with three or more credits may qualify for a rate class reduction.

			
	Female, Age 57	Female, Age 55	Male, Age 56
Applied For	\$1,000,000 Life Insurance	\$500,000 Life Insurance	\$700,000 Life Insurance
Risks	Height: 5'4" Weight: 232	Rheumatoid Arthritis	Family history of death before age 60 from heart attack
Initial Offer	TABLE 3 RISK	TABLE 2 RISK	STANDARD RISK
Favorable Precision Credits Added	<ul style="list-style-type: none"> Cholesterol/HDL ratio: 2.6 Hemoglobin A1c: 5.4 Blood Pressure average: 116/76 Serum Albumin 4.6 NTproBNP: 17 Very Favorable Risk Classifier 	<ul style="list-style-type: none"> Hemoglobin A1c: 5.3 Serum Albumin: 4.5 NTproBNP: 21 Blood Pressure average: 121/78 Both parents lived past age 80 Build within Preferred Plus 	<ul style="list-style-type: none"> LDL: 91 NTproBNP: 27 Very Favorable Risk Classifier
Final Offer	STANDARD	STANDARD	PREFERRED

Financial Underwriting Guidelines

Personal Coverage – Income Replacement and Estate Preservation

Earned Income Replacement Table

Age	Income Factor
18–40	20 x
41–50	15 x
51–60	10 x
61–65	8 x
>65	5 x

Estate Preservation Calculation

1. Assess value of net worth.
2. Apply reasonable factors for growth and years compounding to determine future value. See “Growth Rates and Years Projected for Estate Preservation” below.
3. Multiply future value by 50% (estate tax rate) = Total amount needed for estate preservation.
Subtract any personal life insurance coverage not being replaced.

Growth Rates and Years Projected for Estate Preservation

Use higher annual growth rates when asset allocation/situation indicates that higher rates of return could be reasonably expected:

Age	Years Projected	Annual Growth Rate
50 or less	25 years	6% Max
51 to 60	20 years	4% Max
61 to 70	15 years	3% Max
71 to 75	10 years	3% Max
Over 75	5 years	3% Max

Special Financial Requirements

Personal Coverage – Income Replacement and Estate Preservation

Ages	PFS Personal Financial Statement (Form Series 4165)	EIR Electronic Inspection Report (Ordered by Home Office Only)	IR Traditional Phone Inspection	TPF Third Party Financials
Under 66	>\$3,000,000	\$1,000,001 – \$5,000,000	>\$5,000,000	>\$5,000,000
66–70	>\$1,000,000	\$1,000,001 – \$3,000,000	>\$3,000,000	>\$3,000,000
71+	>\$500,000	N/A	>\$500,000	>\$1,000,000

Notes:

For amounts requiring third party financials, the inspection company will attempt to obtain this information from client's CPA. If the agent, or client, prefers to obtain this information instead of the inspection company, please provide at time of application.

Acceptable 3rd Party Financials:

- Tax returns from past two years.
- W-2s from past two years.
- Personal Financial Statement outlining income and signed by CPA (credentials will be confirmed)

For Estate Preservation cases, net worth may need to be confirmed if the income doesn't justify total line of coverage. In these situations, net worth can be confirmed by the following sources:

- Personal Financial Statement documenting net worth and income signed by CPA (credentials will be confirmed).
- Personal Financial Statement signed by proposed insured with supporting documentation: Bank Statements, Tax Returns, Property Tax Assessment or Appraisal, Brokerage statements.

	Gross Income	% of income available for Life Insurance Premium
Premium to Income Ratio	<\$50,000	Up to 10%
	\$50,001–75,000	10–15%
	\$75,001–100,000	15–20%
	>\$100,000	20–25%
Non-Income Earning Spouses	<ul style="list-style-type: none"> • Allow up to 100% of insurance in force on the employed spouse up to \$1,000,000 if no dependent children (and up to \$2,000,000 if there are dependent children) as long as household income justifies the amount on the wage earning spouse. • Amounts exceeding these guidelines would need a detailed cover letter explaining reason for face amount (estate planning needs, for example). 	
Personal Loans	<ul style="list-style-type: none"> • Term of loan must be five years or more. • Generally up a maximum of 75% of the loan. • Loans between individuals will typically not be considered. 	
Juvenile Coverage	<ul style="list-style-type: none"> • There must be equal coverage on all siblings. • For amounts up to \$249,999 there must be equal coverage for at least one parent. For \$250,000 to \$500,000 both parents must have equal coverage. For amounts over \$500,000 both parents should have at least twice the amount of life coverage. • Amounts of \$500,000+ require facultative reinsurance. <p>NOTE: Guidelines may differ for states that have specific guidelines for juvenile coverage.</p>	

Charitable Coverage	<ul style="list-style-type: none"> • Multiply amount of annual giving by 10 for typical maximum face amount (average amount from the past three years x 10). • Should have adequate personal coverage already in force. • Cover letter explaining how face amount determined. • For amounts over \$250,000 will require documentation of prior giving. Underwriter discretion below \$250,000.
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Special Financial Requirements

Business Coverage

When a business is listed as the owner of a contract, the Employer Owned Life Insurance form (10244) will be required.

The following will be requirements, based on the face amount that is requested:	
Amounts up to \$1,000,000	<ul style="list-style-type: none"> • Business Financial Questionnaire (BFQ) provided by agent.
\$1,000,000 – \$3,000,000	<ul style="list-style-type: none"> • Business Financial Questionnaire (BFQ) provided by agent. • Electronic Inspection Report (EIR) to be ordered by home office.
Amounts Over \$3,000,000	<ul style="list-style-type: none"> • Business Financial Questionnaire (BFQ) provided by agent. • Inspection Report with Business Beneficiary Report (BBR) to include 3rd party business financials from the past two years (preferably balance and income statements). Home office will order. <p>If the inspection does not include 3rd party financials, the underwriter will request this documentation from agent. Note: If the agent prefers to provide business financials, please advise in cover letter.</p> <p>For Key Person coverage, Inspection report will verify income/salary by obtaining tax returns or W-2s from the past two years. Note: If the agent prefers to provide tax returns or W-2s from the past two years, please advise in cover letter.</p> <ul style="list-style-type: none"> • Cover letter detailing the purpose of coverage and how the face amount was determined is strongly encouraged.

Requirements for Special Business Situations	
Buy/Sell	<ul style="list-style-type: none"> • Fair Market Value of company multiplied by percent of ownership to determine maximum face amount.
Key Person	<ul style="list-style-type: none"> • 10 x annual income to determine typical maximum face amount.
Business Loan or Creditor Coverage	<ul style="list-style-type: none"> • Typically cover face amounts up to 75% of the loan. • Terms of loan typically must be five years or more. • Proposed Insured must be a key person.
New Business/ Start Up Companies	<ul style="list-style-type: none"> • Considered on case-by-case basis. • Total line of coverage not to exceed 50% of the loan or investment. • Cover letter explaining amount and source of funding, experience of the owners in the field and their prior success strongly encouraged. • Balance sheet and income/expense statements, pro-forma statements and business plans should be submitted with the application.

Retention Limits

American National Insurance Company

Age	Retention Limits	Maximum Table Rating
0-75	\$5,000,000	All
76-80	\$2,000,000	Table 8
81-85	\$1,000,000	Table 4

Autobind

The amount of insurance on a life that can be underwritten in-house without sending papers to reinsurance.

Ages	Standard – T4	T5 – T-8	T9 – T16
18-70	\$20 Million	\$20 Million	\$20 Million
71-80	\$10 Million	\$ 5 Million	No Autobind
81-85	\$ 5 Million	No Autobind	No Autobind

Jumbo Case Limit

The point at which the amount of insurance in-force and applied for with all companies on a life necessitates sending facultative to reinsurance.

Age	Limit	Rate Classes
18-85	\$50 Million	All Classes

STOLI/IOLI

It is American National's policy that life insurance should only be purchased to provide protection to those with an insurable interest in the life of the insured. We will not knowingly participate in life insurance sales motivated by the possible sale of policies in a secondary market or participation of investors in policy death benefits. This includes Stranger-Owned Life Insurance (STOLI), Investor-Owned Life Insurance (IOLI), life settlements or viatication.

In order to control the issuing of policies intended for these purposes, we require that Form 4439 "Customer Identification Verification" be completed on all cases. If any of the questions on this form are answered "Yes," additional forms will need to be completed, per the instructions on the form. Form Series10051 "Premium Funding Intent Form" will also need to be completed for all cases in which the proposed insured is age 70 or older and the face amount applied for is \$500,000 or more.

Rebating

American National complies with all anti-rebate laws and expects its producers to also comply.

Side-by-Side Accelerated Underwriting Comparisons

	Xpress	Xpress Plus ⁴
Program Description	A program designed to provide a quick underwriting process for limited ages and face amount and will not automatically require an exam to be ordered.	A program designed to enhance the underwriting process when using electronic applications. Xpress Plus will not automatically require an exam to be ordered. Instead, the agent will be notified via ExpertOffice if an exam is required.
Who Can Apply	Individual Applications	Individual Applications
Issue Ages	0–65	18–60
Face Amounts	Up to \$249,999	Ages 18–50: \$250,000 – \$1,000,000 Ages 51–60: \$250,000 – \$500,000
eApp Available	Yes	Yes
eApp Required	No	Yes
Underwriting Classes	Standard Substandard	Preferred Plus Preferred Standard Plus Standard ⁵
Exam Required	No Automatic Exam Required. The need for an exam is determined based on answers to the application, MIB, and Rx. ⁶	No Automatic Exam Required. The need for an exam is determined based on answers to the application, MIB, Rx, and Risk Classifier. ⁶ When submitted through ExpertApp: <ul style="list-style-type: none"> • Step 1: ExpertApp If answers on the application prompt the need for an exam, the agent will receive a notification immediately in ExpertApp. • Step 2: Underwriting If the MIB, Rx, Risk Classifier and/or underwriter review prompt the need for an exam, the agent will receive a notification via ExpertOffice and email.
Available Products	All	All

Cases outside of the parameters of the programs above will require traditional underwriting.

4) Not applicable in New York. 5) Characteristics determined using Risk Classifier report outside our tolerance will be limited to standard. Risk Classifier utilizes characteristics derived from public records, driving history, and credit history. 6) Cases rated substandard will be disqualified from the Xpress and Xpress Plus program but are still eligible for issue with full underwriting.

Xpress & Xpress Plus FAQs

Q: What is the Xpress program?

A: An underwriting program that is used to process applications for insured's age 65 or under and applying for a face amount of \$249,999 or less that is designed to speed up the underwriting process to allow for quicker issues and faster turnarounds. Xpress is available for both paper and electronic applications. No automatic exam is required. The need for an exam is determined based on answers to the application, MIB, and Rx. If an exam is required, the agent will receive a notification.

Q: What is the Xpress Plus program?

A: Xpress Plus is a new underwriting program that expedites the application process and saves your clients time and hassle by automating a portion of the underwriting process for applications submitted electronically. When you submit an individual application that is within the parameters of the Xpress Plus program, exams are not automatically required. The need for an exam is determined based on answers to the application, MIB, Rx, and Risk Classifier. If an exam is required, you will be notified, either immediately or via ExpertOffice.

If submitted through ExpertApp:

- If answers on the application prompt the need for an exam, the agent will receive a notification immediately in ExpertApp. The agent will then order the additional required exams.
- If the MIB, Rx, and/or Risk Classifier prompt the need for an exam, the agent will receive a notification via ExpertOffice and email. The agent will then order the additional required exams.

Q: What is the Risk Classifier?

A: The Risk Classifier classifies risk by utilizing characteristics derived from public records and credit history. By using a Risk Classifier as part of the underwriting process, American National can avoid ordering exams and labs. This allows policies to be issued more quickly and, in turn, commissions are paid faster. And remember, even if the Risk Classifier is outside our parameters for accelerated underwriting, a client may still be eligible for life insurance, but additional exams may be required.

Q: Will you still use the Risk Classifier if my client is not in an accelerated underwriting program?

A: Yes, all applications for policies with a face amount of \$100,000 – \$1,000,000 will use the Risk Classifier.

Q: What products are underwritten using the Xpress and Xpress Plus Programs?

A: All individual life products issued by American National Insurance Company.

Q: What ages and face amounts are included in the Xpress program?

A: Ages 0–65: Up to \$249,999

Q: What ages and face amounts are included in the Xpress Plus program?

A: Ages 18–50: \$250,000 – \$1,000,000
Ages 51–60: \$250,000 – \$500,000

Q: What underwriting classes are available for the Xpress program?

A: Standard and substandard.

Q: What underwriting classes are available for the Xpress Plus program?

A: Preferred Plus, Preferred, Standard Plus, Standard Cases rated substandard will be disqualified from the Xpress Plus program but are still eligible for issue with full underwriting.

Q: Are the Xpress and Xpress Plus programs used only to underwrite electronic applications?

A: Xpress Plus: Yes, electronic applications (ExpertApp) are required.

Xpress: No, paper and electronic applications are both accepted.

Q: Does American National still accept paper applications?

A: Yes. However, the Xpress Plus program requires an electronic application.

Q: What if my client's application does not meet the parameters of either the Xpress or Xpress Plus programs?

A: If American National is not able to issue a policy through the Xpress or Xpress Plus underwriting programs, we will offer traditional underwriting to the applicant.

Q: Will applications that require a medical exam still be eligible for preferred plus rates?

A: Yes. The requirement of a medical exam does not automatically eliminate the possibility of still obtaining a preferred plus rate class.

Q: If I know my client will not meet the parameters for the Xpress Plus program should I go ahead and order the exam and labs?

A: Yes, if your client is applying for more than \$249,999 of coverage and will be excluded for face amount, age, or one of the conditions listed on the program disqualification list

(see Underwriting Guidelines), you can expedite the application process by ordering the typical exam and labs as you would for traditional underwriting.

Q: Are commissions affected?

A: Accelerated underwriting does not change any commission structure.

Q: What riders are available?

A: All riders are available when using the Xpress and Xpress Plus programs.

Q: Is this Simplified Issue?

A: No, Simplified Issue generally implies a short form application, non-medical underwriting with an accept/reject decision and in many cases, higher insurance premiums. Xpress and Xpress Plus require a full application while maintaining the ultimate goal of rapid underwriting decisions and competitive premiums. Simplified Issue programs have been consolidated/simplified, and Xpress Plus can be used in situations where the group does not meet the eligibility requirements for the Simplified Issue program.

Q: Is this Guaranteed Issue Life Insurance?

A: No. Xpress and Xpress Plus require underwriting to maintain competitive premiums. Guaranteed Issue programs have limited death benefits, a benefit waiting period, and higher premiums.

Q: What application will be used and will there be sections that do not need to be completed?

A: The standard full application will need to be completed in its entirety.

Q: Is a tele-app required for Xpress or Xpress Plus?

A: No.

Common conditions that require additional Labs, Exams, and/or APS

Not all applications will be issued without additional exams. Common conditions that will require additional exams to be ordered are listed in the charts below.

Xpress	Exam/ Labs	APS
Undisclosed Diabetes	X	
Diabetes Requiring more than one medication	X	
Diabetes requiring insulin	X	
Undisclosed ratable Obesity	X	
Hypertension age 35 and under	X	
Hypertension over age 35 requiring three or more medications	X	
Undisclosed Hypertension	X	
Heart Disease		X
Suspected kidney function abnormality without diagnosis	X	
Kidney Disease		X
Liver Disease		X
Suspected Liver Enzyme elevations without diagnosis	X	
Cancer		X
Substance Abuse	X	X
Cerebral Vascular Disease		X
Peripheral Vascular Disease		X
COPD		X

Xpress	Exam/ Labs	APS
Barrett's Esophagus		X
Crohn's Disease		X
Ulcerative Colitis		X
Lupus		X
Multiple Sclerosis		X
Parkinson's		X
Criminal History	X	
History of DUI in the past two years	X	
Underweight	X	
Non Disclosure of material medical history (including smoking, nicotine, tobacco history)	X	
Bipolar/Schizophrenia or any indication of more than mild anxiety or depression (such as specialty of prescribing physician or historic medications)	X	X

Since each case is different, the underwriter reserves the right to order APS's or other requirements depending on the merits of each individual case.

Xpress Plus	Exam/ Labs	APS
Diabetes or Glucose Intolerance	X	
Hypertension (when any of the following apply: diagnosed within 6 months, applicant is under age 35, applicant requires >2 medications to control, or is undisclosed/suspected)	X	
Heart Disease	X	X
Renal Disease	X	X
Liver Disease	X	X
Cancer	X	X
Substance Abuse	X	X
Marijuana Use	X	
Cerebral Vascular Disease	X	X
Peripheral Vascular Disease	X	X
COPD	X	X
Barrett's Esophagus	X	X
Crohn's Disease	X	X
Ulcerative Colitis	X	X
Epilepsy/Seizure	X	
Gastric Bypass/Lap Band	X	X
Lupus	X	X
Multiple Sclerosis	X	X
Parkinson's Disease	X	X
Rheumatoid Arthritis	X	
Sleep Apnea	X	
Criminal History that is not an automatic decline.	X	
Driving History that is not an automatic decline.	X	
Disability	X	X

Xpress Plus	Exam/ Labs	APS
Unemployed – when specifically listed as such (does not apply to homemaker)	X	
Over-insurance/Stacking	X	
Inforce/Applied with American National and subsidiaries exceeds our max limits for Xpress Plus	X	
HIV	X	X
Underweight	X	X
Build Table 2 or higher	X	
Other characteristics determined using the Risk Classifier report are outside our tolerance.	X	
Rx record not found and >50 years old	X	
Previous substandard or declined case with American National or other company	X	X
Any occurrence of parent or sibling cardiovascular disease or stroke prior to age 65	X	
Any occurrence of parent or sibling colon, lung, melanoma, ovarian, prostate or breast cancer prior to age 65	X	
If labs completed in past 12 months for insurance purposes, we will attempt to obtain those requirements. If unable to obtain, we will order our own exam, labs.	X	
Nondisclosure of material medical history (including smoking/nicotine/tobacco history)	X	
Bipolar/Schizophrenia or any indication of more than mild anxiety or depression (such as specialty of prescribing physician or historic medications)	X	X

Since each case is different, the underwriter reserves the right to order APS's or other requirements depending on the merits of each individual case.

Underwriting Strengths

<p>Preferred Plus</p>	<p>Cigar and Smokeless Tobacco User</p> <ul style="list-style-type: none"> • Preferred Plus rates for occasional cigar and smokeless tobacco users. • Two times a month or less and negative specimen.
<p>Preferred</p>	<p>Sleep Apnea Individuals with this condition who are well-controlled, compliant with treatment, and have other favorable risk factors may receive preferred rates.</p> <p>Mild Situational Depression or Anxiety Mild situational depression and anxiety with favorable characteristics may receive preferred rates.</p> <p>Adult Attention Deficit Disorder Individuals with this condition who are very well controlled and do not represent any increased risk may receive preferred rates.</p> <p>Preferred Exceptions Our preferred guidelines require that we exclude preferred if there has been a death from breast, colon, lung, ovarian, prostate cancer, or melanoma in parents or siblings prior to the age of 60. We now allow for some exceptions for preferred:</p> <ul style="list-style-type: none"> • Colon Cancer: Allow one family history of colon cancer death prior to age 60 for preferred rates if client has had a normal colonoscopy in the past 24 months (No adenomatous polyps or ulcerations consistent with inflammatory bowel disease). Limit to age 50+ • Coronary Artery Disease: Allow for one family history of death from CAD before age of 60 with a negative Stress EKG with good exercise tolerance (at least 8 METS) in the past 12 months. Limit to age 50+ • Prostate Cancer: Allow a family history of prostate cancer if current PSA is <2.0 and there has been a normal prostate exam in the past 24 months. Limit to age 50+
<p>Standard Plus</p>	<p>Prostate Cancer Ages 70+ with low grade prostate tumor treated with surgery may receive standard plus rates with evidence of good follow-up and no other significant medical problems.</p> <p>Type 2 Diabetes Type 2 diabetics' ages 50+ with good control and optimal control of other risk factors (blood pressure, lipids, build) may receive Standard Plus rates on any permanent product.</p>
<p>Standard</p>	<p>Coronary Artery Disease Ages 70+ with single vessel (right coronary artery) disease and other favorable factors, may receive standard rates.</p>
<p>Family History</p>	<p>"Family history of cancer" only includes these cancers (breast, colon, lung, ovarian, prostate, and melanoma).</p>
<p>Obesity</p>	<p>Generous credits for individuals who have favorable risk factors such as optimal blood pressure readings, favorable lipids, recent favorable stress testing or an EBCT.</p>

Scenarios listed in the Underwriting Strengths section reflect the best possible case and individuals with such conditions are not guaranteed rates listed.

General Reinstatement Procedures

Applying for Reinstatement

<p>Policies with original face amounts between \$1 and \$500,000</p>	<ol style="list-style-type: none"> 1. Call customer service at 1-800-899-6806 to obtain the calculated reinstatement premium amount. 2. Have the client complete a reinstatement form. This form varies by state and is available at www.img.anicoweb.com. 3. Submit reinstatement form and premium to American National 4. American National's Underwriting team will review the application, if additional requirements are needed, they will be ordered at this time. Note: Premium will be returned to the client if any pending requirements are not received within 30 days of request. 5. Once a reinstatement decision has been made, American National will send a letter of either acceptance or decline to the client and the agent. 6. If American National does not receive enough premium to reinstate, a letter will be sent to the client (with an email to the agent). At that point, the client has 30 days to send the difference of premium. Note: If premium is NOT received in 30 days, the file is closed and the client will have to restart the reinstatement process.
<p>Policies with original face amounts of \$500,001 or higher</p>	<ol style="list-style-type: none"> 1. Do NOT submit a premium with application. 2. Have the client complete a reinstatement form. This form varies by state and is available at www.img.anicoweb.com 3. Submit the reinstatement form to American National 4. American National's Underwriting team will review the application, if additional requirements are needed, they will be ordered at this time. The file will be closed if any pending requirements are not received within 30 days of request. 5. If the reinstatement is approved, American National will overnight a request for premium to the client (and email the agent) along with a modification application, which must be signed. If the reinstatement is declined, American National will send a letter informing the client and the agent. 6. The signed modification application and premium must be received by American National within 30 days of the date the overnight envelope was delivered to the client. Note: If the premium and application are NOT received in 30 days, the client will have to complete a declaration of insurability and the premium may need to be adjusted for additional underwriting. 7. If complete application and correct premium is received, American National will send a letter of acceptance to the client and the agent.

Where to send Reinstatement Form and/or Premium

Mail	Overnight	Fax
<p>American National PO Box 3257 Springfield MO, 65808</p>	<p>American National 1949 E. Sunshine Street Springfield MO, 65899</p>	<p>409-621-7505</p>

Service Turnaround and Expectations

Policies with original face amounts between \$1 and \$500,000	<p>If the policy has been lapsed for less than one year and the insured has not had a significant change in health:</p> <ul style="list-style-type: none"> • In Good Order: Typically, one week from the time the application is received to the acceptance/approval letter being mailed. • Not In Good Order: The typical reinstatement depends on the response time from agent/client to receive the outstanding requirements. Average turnaround time is less than two weeks to complete the reinstatement process.
Policies with original face amounts of \$500,001 or higher	<p>If the policy has been lapsed for less than six months:</p> <ul style="list-style-type: none"> • In Good Order: Typically, three weeks from the time the application is received to the acceptance/approval letter being mailed. • Not In Good Order: The typical reinstatement depends on the response time from agent/client to receive the outstanding requirements. Average turnaround time is approximately four weeks to complete the reinstatement process. <p>If the policy has been lapsed for more than six months:</p> <ul style="list-style-type: none"> • This situation involves the same process, underwriting time frames, as it would for newly submitted life insurance cases. The underwriting process could take up to a total of two to three weeks to order, receive, and analyze questionnaires and medical records to render a decision. Then, there are the additional days it takes to receive the reinstatement premiums and modification application back from the client. Average turnaround is typically a month to perform the entire reinstatement process.

Reinstatement Underwriting Requirements

(Underwriter reserves the right to order requirements based on individual situations)

Length of Lapse	Amount of Insurance	Underwriting Requirements (Bold must be ordered by the agent)
90 Days or Less	Up to \$100,000	Reinstatement Application
	\$100,001 – \$1,000,000	Reinstatement Application, MIB
	\$1,000,001 +	Reinstatement Application, MIB, Scriptcheck
91 to 180 days	Up to \$1,000,000	Reinstatement Application, MIB, Scriptcheck
	\$1,000,001 +	Reinstatement Application, MIB, Exam, Urine, Blood Profile , Scriptcheck
181 to 365 days	Up to \$500,000	Reinstatement Application, MIB, Scriptcheck
	\$500,001 to \$1,000,000	Reinstatement Application, MIB, Blood, Urine , Physical Measurements
	\$1,000,001 +	Reinstatement Application, MIB, Exam, Urine, Blood Profile , Scriptcheck
365 days+	Up to \$250,000	Reinstatement Application, MIB, Scriptcheck
	\$250,001 to \$1,000,000	Reinstatement Application, MIB, Scriptcheck, Blood, Urine, Exam
	\$1,000,001 and up	Reinstatement Application, MIB, Scriptcheck, Blood, Urine, Exam

Other Underwriting Expectations

Attending Physician Statements	Normal new business age/amount requirements will be followed. APS may also be ordered at underwriter discretion.
Financial Requirements	If it is determined there is a discrepancy between the original financials and the financials provided on the Application for Reinstatement, it will be at the underwriter's discretion if additional financial documents are required.

Impairment Guide

Ratings may not apply to children: Please consult your underwriter.

Impairment (Alphabetical)	Rating
Acromegaly	Table 4–8
Addison's disease	Standard – Table 3
ADD/ADHD	Standard – Table 2
AIDS or ARC	Decline
Alcohol treatment then 2 years sobriety	Standard – Table 8
Alpha1 Antitrypsin Def (no meds, good pulmonary, favorable A1P, NS)	Standard
Alzheimer's disease	Decline
Amyloidosis	Standard – Decline
Amyotrophic lateral sclerosis	Decline
Anemia	Standard – Decline
Aortic aneurysm	Table 2 – Decline
Angina	Standard – Decline
Angioedema	Standard
Ankylosing spondylitis	Standard – Table 4
Anorexia nervosa	Standard – Decline
Anxiety	Standard – Table 2
Aortic insufficiency	Standard – Table 8
Arteriosclerosis obliterans	Table 4 – Decline
Arteriovenous malformations	Standard – Decline
Arthritis – osteoarthritis	Standard
Arthritis – rheumatoid or psoriatic	Standard – Table 6
Asbestosis	Standard – Decline
Ascites	Decline
Asthma	Standard – Table 4
Atrial fibrillation or flutter	Table 2 – Decline
Atrial septal defect	Standard – Decline
Atrioventricular block 1st and 2nd degree	Standard – Table 2
Atrioventricular block 3rd degree – complete	Table 4 – Decline
Barlow's syndrome	Standard – Table 2
Basal cell carcinoma	Standard
Bells palsy	Standard

Impairment (Alphabetical)	Rating
Benign prostate hypertrophy	Standard
Berger's disease	Table 2–8
Bicuspid aortic valve	Standard – Table 8
Bigeminy	Standard – Table 8
Bipolar mental illness	Table 2 – 8
Bright's disease	Standard – Decline
Bronchiectasis	Table 3 – Decline
Bronchitis chronic	Table 4 – Decline
Buerger's disease	Standard – Table 4
Bundle branch block – hemiblock or right	Standard – Table 2
Bundle branch block – left	Table 4 – Decline
Cancer – two years after treatment, no metastases, no recurrence	Standard – Decline
Cardiomyopathy	Table 2 to Decline
Carotid bruit	Standard – Table 3
Celiac disease	Standard – Table 4
Cerebral palsy – gainfully employed & no assistance in walking	Standard – Table 3
Cerebrovascular accident	Table 4 – Decline
Charcot Marie Tooth disease	Standard – Decline
Cholecystitis – recovered	Standard
Cholelithiasis – no symptoms	Standard
Christmas disease (Factor IX deficiency)	Table 2–8
Chronic Fatigue Syndrome	Standard – Table 2
Chronic obstructive pulmonary disease (COPD)	Table 4 – Decline
Chronic pain – regular narcotic use	Table 4 – Decline
Chronic renal insufficiency / failure	Decline
Cirrhosis	Decline
Cocaine use – no use in past three years	Standard – Decline
Colitis – not ulcerative & full recovery	Standard

Impairment (Alphabetical)	Rating
Colon polyp(s) – benign	Standard
Congestive Heart Failure	Decline
Cor Pulmonale	Decline
Coronary artery disease – bypass or stent	Table 2 – Decline
Costochondritis	Standard
Crohn’s disease	Table 2–8
Cushing’s syndrome	Standard – Table 4
Cystic fibrosis	Decline
Cystitis	Standard
Deep Venous Thrombosis (two months after recovery)	Standard
Dementia	Decline
Depression	Standard – Table 8
Diabetes – NS – dx <5 years – age <50	Table 3 – 8
Diabetes – NS – dx <5 years – age ≥50	Standard – Table 4
Diabetes – NS – dx >5 years – age <50	Table 4 – Decline
Diabetes – NS – dx >5 years – age ≥50	Table 2 – 6
Dialysis	Decline
Discoid lupus (more than one year after clear diagnosis)	Standard
Diverticulitis/Diverticulosis – recovered	Standard
Down’s syndrome	Decline
Drug abuse or addiction – no drug use in three years	Standard – Table 8
Eclampsia – recovered	Standard
Emphysema	Table 4 – Decline
Encephalitis – recovery no residuals	Standard
Endocarditis – recovered no residuals	Standard
Epilepsy	Standard – Decline
Erythema nodosum – recovered	Standard
Esophageal varices	Decline

Impairment (Alphabetical)	Rating
Factor VII or IX Deficiency	Table 2 – Decline
Fibrocystic breast disease	Standard
Fibromyalgia	Standard
Fibromuscular Dysplasia (treated after 6 months)	Standard – Table 2
Gastric bypass – one year after surgery	Standard – Table 3
GERD	Standard
Gestational diabetes – not currently pregnant and normal labs	Standard
Gilbert’s syndrome	Standard
Glomerulonephritis	Table 4 – Decline
Graves’ disease – controlled	Standard
Guillain – Barre syndrome- recovered no residuals	Standard
Hashimoto’s disease – controlled	Standard
Heart attack	Table 4 – Decline
Hemochromatosis – six months after dx well controlled	Standard – Table 4
Hemophilia	Table 2 – Decline
Hematemesis (unresolved or unexplained)	Decline
Hematochezia (fully investigated and benign)	Standard
Hematuria (resolved or no genitourinary disease)	Standard
Hemoptysis (unresolved or unexplained)	Decline
Hepatitis A – recovered	Standard
Hepatitis B – no acute symptoms	Standard – Table 8
Hepatitis C – no acute symptoms	Table 2 – Decline
Hirschsprung’s disease – surgically corrected	Standard
Histoplasmosis	Standard – Table 2
HIV	Individual Consideration

Impairment Guide

Ratings may not apply to children: Please consult your underwriter.

Impairment (Alphabetical)	Rating
Hodgkin's disease – postpone one to five years depending on Stage	Table 2 – Decline
Huntington's chorea	Decline
Hydrocephalus	Table 2–8
Hyperglycemia – medically monitored and not diabetes	Standard
Hyperlipidemia – controlled	Standard
Hypertension – controlled	Standard
Hyperthyroidism or hypothyroidism	Standard
Hypoglycemia	Standard
Idiopathic Hypertrophic Sub Aortic Stenosis	Table 4 – Decline
Ileitis	Standard – Table 8
Intermittent claudication	Table – Decline
Irritable Bowel Syndrome	Standard
Inflammatory Bowel Disease	Table 2 – Table 8
Kaposi's sarcoma	Decline
Kidney stones	Standard
Labyrinthitis	Standard
Left Anterior Hemiblock	Standard
Left Posterior Hemiblock	Standard
Legionnaire's Disease (full recovery)	Standard
Leukemia (five years after end of treatment)	Table 4 – Decline
Lyme Disease (full recovery)	Standard
Lymphoma – postpone one to five years depending on stage	Table 4 – Decline
Mallory-Weiss Syndrome (currently under treatment)	Decline
Marfan's Syndrome (no cardiac or vascular impairments)	Table 2-Table 8
Marijuana Use (infrequent and no criminal record)	Standard non-nicotine (if no use of nicotine for past 12 months) – Table 4 non-nicotine.
Melanoma (complete excision and established pathology)	Standard – Decline

Impairment (Alphabetical)	Rating
Melena (unresolved or unexplained)	Decline
Meniere's Disease (controlled or resolved)	Standard
Meningitis (fully recovered without complications)	Standard
Migraines (fully evaluated)	Standard
Mitral insufficiency or regurgitation	Standard – Decline
Mitral Valve Prolapse	Standard
Monoclonal Gammopathy or MGUS (after two years stable labs)	Table 2 – Table 4
Mononucleosis (recovered)	Standard
Motor Neuron Disease	Decline
Multiple Sclerosis	Table 2 – Decline
Muscular Dystrophy	Standard – Decline
Myasthenia Gravis	Standard – Decline
Myelofibrosis	Decline
Myeloma	Decline
Myeloproliferative Disorders	Table 2 – Decline
Myocardial Bridging (asymptomatic)	Standard
Myocardial Infarction	Table 4 – Decline
Myocarditis (single incident, one year full recovery)	Standard
Myositis (chronic or progressive)	Decline
Narcolepsy	Standard – Table 4
Nephritis	Standard – Decline
Neuritis	Standard – Table 2
Neuropathy	Standard – Table 4
Organic Brain Syndrome	Decline
Osteomyelitis (chronic stable, not progressive)	Table 2 – Table 4
Osteoporosis	Standard
Pacemaker	Table 2 – Decline
Paget's Disease of Bone (not progressive)	Standard

Impairment (Alphabetical)	Rating
Palpitations (normal cardiac workup)	Standard
Pancreatitis (chronic or recurrent)	Decline
Paraplegia	Table 6 – Decline
Parkinson’s Disease	Table 2 – Decline
Patent Ductus Arteriosus (surgically corrected)	Standard
Pericarditis (full recovery)	Standard
Peripheral Vascular Disease (non-smoker)	Standard – Table 4
Phlebitis (full recovery)	Standard
Plasma Cell Disorder (two years after diagnosis, stable labs)	Table 2 – Decline
Poliomyelitis (stable no wheelchair)	Standard – Table 3
Polycystic Kidney Disease	Table 2 – Decline
Polycythemia (diagnosed two years, stable CBC)	Table 2 – Table 6
Polymyositis	Standard – Decline
Polyp (benign pathology)	Standard
Post-Polio Syndrome (stable no wheelchair)	Standard – Table 3
Post-Traumatic Stress Disorder	Standard – Table 6
Prostatitis (treated)	Standard
Proteinuria	Standard – Decline
Psoriasis	Standard
Psoriatic Arthritis	Standard – Table 6
Pulmonary Embolism (after six months full recovery)	Standard – Table 4
Pulmonary Hypertension	Decline
Pyelonephritis (full recovery)	Standard
Quadriplegia	Decline
Regional Enteritis	Table 2 – Table 8
Renal Artery Stenosis (six months after treatment, no HTN)	Standard – Table 3
Renal Dialysis	Decline
Renal Insufficiency / Failure	Decline

Impairment (Alphabetical)	Rating
Renal Transplant	Decline
Restless Leg Syndrome	Standard
Right Bundle Branch Block	Standard
Rheumatic Fever (full recovery no cardiac residuals)	Standard
Rheumatoid Arthritis	Standard – Table 6
Sarcoidosis (lungs/skin only and remission six months)	Standard
Schizophrenia	Decline
Scleroderma (skin only, two years after diagnosis)	Standard
Sclerosing Cholangitis	Decline
Sickle Cell Disease (normal CBC, no hospitalizations past five years)	Table 3 – Decline
Sickle cell trait	Standard
Sjogren’s Syndrome	Standard
Sleep apnea (treated)	Standard – Table 3
Spina Bifida (asymptomatic)	Standard
Spina Bifida (symptomatic)	Table 4 – Decline
Stroke (after first year)	Table 4 – Decline
Suicide attempt (after first year)	Flat extra \$5/M – Decline
Suicide attempts (two years after last) (>1 attempt)	Table 4 – Decline
Systemic Lupus Erythematosus	Table 2 – Table 8
Tachycardia (cardiac workup neg)	Standard – Table 2
Transient Ischemic Attack (after six months)	Table 3 – Table 6
Tremor (negative neurological evaluation)	Standard
Ulcerative Colitis	Table 2 – Table 8
Varicose veins	Standard
Vertigo (after neurological evaluation)	Standard
Ventricular Septal Defect (no surgery needed)	Standard – Table 4
Wolff-Parkinson-White (WPW)	Standard
Xeroderma Pigmentosum	Decline

Foreign Nationals Living in the U.S. Guidelines

In order to comply with anti-laundering requirements and manage underwriting risk, American National has established the following guidelines for foreign nationals.

<p>Green Card (Permanent Resident Card)</p>	<ul style="list-style-type: none"> An individual who is a permanent resident and is a green card holder is an acceptable underwriting risk. The application and requirements must be completed in the U.S. in the jurisdictions in which the agent and American National is licensed and in which the applicant is residing or has a substantial connection. The billing address and owner address must be in the U.S. A copy of the permanent resident card (green card) is required. 																						
<p>Canadian Citizens</p>	<ul style="list-style-type: none"> Canadian citizens in the U.S. on a passport can be considered if they have strong ties to the U.S. – 2nd home or business in the U.S. Application and requirements must be completed in the U.S. in the jurisdictions in which the agent and American National is licensed and in which the applicant is residing or has a substantial connection. The billing address and owner address must be in the U.S. 																						
<p>VISAs</p>	<ul style="list-style-type: none"> Individuals who have been in the U.S typically for 1 year and have stable employment can be considered if they have one of the following Visas: <table border="1" data-bbox="386 772 1438 1297"> <tr> <td>H1-B</td> <td>Foreign workers in specialty occupations</td> </tr> <tr> <td>H-4</td> <td>Spouse of H-1</td> </tr> <tr> <td>E-3</td> <td>Australia specialty occupations</td> </tr> <tr> <td>L-1A</td> <td>Executive/managerial</td> </tr> <tr> <td>L-1B</td> <td>Special knowledge</td> </tr> <tr> <td>L-2</td> <td>Spouse of L-1</td> </tr> <tr> <td>K-1,2,3,4</td> <td>Spouse, child, fiancée of U.S. citizen</td> </tr> <tr> <td>V-1,2,3</td> <td>Spouse/unmarried child of permanent resident</td> </tr> <tr> <td>E-1,2</td> <td>Treaty traders</td> </tr> <tr> <td>G-1,2,3,4,5</td> <td>Designated international organization's employees and NATO</td> </tr> <tr> <td>Nato-1,2,3, & 7</td> <td>Military personnel of a foreign country stationed in the US</td> </tr> </table> Application and requirements must be completed in the U.S. in the jurisdictions in which the agent and American National is licensed and in which the applicant is residing or has a substantial connection. The billing address and owner address must be in the U.S. A copy of the Visa showing type and date of entry in the U.S. is required. Country of origin must be considered a standard risk (see next page). 2 year tax returns required. Individuals under the age of 25 or over age 70 must go facultative. Amounts \$500,000 or greater or individuals who spend less than 3 months out of the year in the U.S. must go facultative. Proposed insured/owner must have a social security number or ITIN. If the proposed insured or owner has an ITIN, include IRS W-9 form and W-8BEN form. Verification of this number is required. No political figures, judges, military, journalists, sports figures, entertainers, police force, trade union officials, missionaries. Non-working spouse and dependents will not be provided coverage unless the main visa holder (wage-earner) is properly insured. Amounts may be limited on the non-working spouse or dependent. Preferred Plus available if otherwise qualifies Foreign Travel Questionnaire required if travel question is answered "yes" on application (not applicable in Florida) Stable employment Have significant legitimate interests in the US including property or business ownership 	H1-B	Foreign workers in specialty occupations	H-4	Spouse of H-1	E-3	Australia specialty occupations	L-1A	Executive/managerial	L-1B	Special knowledge	L-2	Spouse of L-1	K-1,2,3,4	Spouse, child, fiancée of U.S. citizen	V-1,2,3	Spouse/unmarried child of permanent resident	E-1,2	Treaty traders	G-1,2,3,4,5	Designated international organization's employees and NATO	Nato-1,2,3, & 7	Military personnel of a foreign country stationed in the US
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VISAs Continued	<ul style="list-style-type: none"> Established bank account Typically needs to be legally residing in the US continuously over one year. All others would be Individual Consideration APS required on all amounts exceeding \$1,000,000 POLICY OWNER, PROPOSED INSURED, OR BENEFICIARY CANNOT BE A CITIZEN OF OR RESIDE IN A COUNTRY SUBJECT TO OFAC SANCTIONS. FOR CURRENT INFORMATION, REFER TO OFAC WEBSITE: http://www.treasury.gov/resource-center/sanctions/Programs/Pages/Programs.aspx 			
Non-U.S. Citizen without Green Card or VISA	<ul style="list-style-type: none"> SSN/ITIN required Residence in the U.S. for 5 or more years (Residency Questionnaire required) 2 year tax returns required Cover Letter explaining status of obtaining VISA or green card. Gainfully employed (pay stub or W-2 required as proof of employment) Country of origin must be considered a Standard Risk No preferred classes available No Acceleration (exam/labs required for amounts >= 100,000) Amounts >\$1 million must go facultative For amounts >= \$250,000 on individuals age under 25 or over 70 must go facultative <p>As with all Foreign Resident business, the following must be met:</p> <ul style="list-style-type: none"> No foreign beneficiary designations No foreign policy ownership Premiums to be paid from U.S. Bank Unable to consider politicians, public figures, government leaders, foreign military personnel or other high profile occupations Benefits/Riders not allowed on sub-standard risks. 			
Standard Risk Countries As of 02/22/2021. Countries are subject to change due to rapidly changing political and/or environmental circumstances.	<ul style="list-style-type: none"> Albania American Samoa Andorra Anguilla Antigua Barbuda Argentina Aruba Australia Austria Bahrain Barbados Belarus Belgium Bermuda Brunei Bulgaria Canada Canary Islands Cayman Islands Chile China Costa Rica Croatia Cyprus Czech Republic Denmark Dominica Estonia Falkland Islands Finland France French Polynesia Germany Greece Greenland Grenada Guadeloupe Guam Hong Kong Hungary Iceland Ireland Israel (excluding West Bank & Gaza Strip) Italy Japan Jordan Kuwait Latvia Liechtenstein Lithuania Luxembourg Macau Macedonia Malta Marshall Islands Martinique Mexico Monaco Montenegro Netherlands New Caledonia New Zealand Norway Oman Palau Poland Portugal Qatar Romania Samoa Serbia Singapore Slovakia Slovenia South Korea Spain Saint Kitts and Nevis Saint Lucia Saint Martin Saint Vincent and The Grenadines Sweden Switzerland Taiwan Turks and Caicos Islands United Arab Emirates United Kingdom Uruguay Virgin Islands (U.S. and British) 			

Life New Business Quick Reference

Electronic application through ExpertApp	Preferred Method! Access via the IMG website or login to your ExpertOffice account
Faxed Application	You can fax all documents to 1-888-237-1012
Paper Application	Paper applications can be mailed to: Regular Mail: American National Processing Center, Life New Business, PO BOX 3297, Springfield, MO 65808-3297 Overnight Mail: American National Insurance Company, Mail Processing Center , Attn: LNB 3297, 1949 E Sunshine St., Springfield, MO 65899-3297
Pending Life Application Status	800-672-9960
Life New Business Case Managers	Email: IMGteam@americannational.com Phone: 1-800-773-0924 Fax: 1-888-237-1012
Underwriting Contacts	Phone: 1-800-773-0924 Fax: 1-888-237-1012
IMG Contacts	For Quotes/Illustrations: Field Support Center 1-888-501-4043 Website: img.anicoweb.com

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