



Underwriting guidelines and requirements

Consideration without additional underwriting requirements such as an exam, blood, urine and APS are dependent on the information received on third-party database results ordered for underwriting or quality control measures including random hold outs. The information may include (but not limited to) driving information, pharmacy information, lab results, claims results, random holdouts, etc.) In order to maintain the integrity of our underwriting program no exceptions will be made to our underwriting requirements requested.

Face amount	Ages 18-40 ¹	41-50	51-55	56-60	61-65	66-69	70 and over
\$25,000 - \$50,000	- App Part I (eApp or paper) - Medical Supplement Part II (eMed or Non-Med)						- App Part I (eApp or paper) - Paramed Exam - Urine - Older Age Q (Age ≥ 80) - APS
\$50,0001 - \$99,999	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Refer to Key considerations (page 2) for additional details				- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Urine	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Urine - APS	- App Part I (eApp or paper) - Paramed Exam - Urine - Older Age Q - APS
\$100,000 - \$249,999							
\$250,000 - \$1,000,000			- App Part I (eApp or paper) - Medical Supplement Part II (eMed) Refer to Key consideration 1 (Page 2) for additional details	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - CMP/Lipid Panel³	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Blood and Urine	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Blood and Urine - APS	- App Part I (eApp or paper) - Paramed Exam - Blood and Urine - Older Age Q - APS
\$1,000,001 - \$2,000,000							
\$2,000,001 - \$3,000,000⁴		- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - CMP/Lipid Panel³			- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Blood and Urine - EKG - APS	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Blood and Urine - EKG - APS - LBS or Signed Financial Supplement (by agent and client)	- App Part I (eApp or paper) - Paramed Exam - Blood and Urine - EKG - Older Age Q - APS - Third-Party Financial Documentation
\$3,000,001 - \$5,000,000	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Blood and Urine	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Blood and Urine - APS					
\$5,000,001 - \$10,000,000	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Blood and Urine - APS - LBS or Signed Financial Supplement (by agent and client)	- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Blood and Urine - EKG - APS - LBS or Signed Financial Supplement (by agent and client)				- App Part I (eApp or paper) - Medical Supplement Part II (eMed) - Physical Measurements Exam² - Blood and Urine - EKG - APS - Third-Party Financial Documentation	
\$10,000,001 and over	- App Part I (eApp or paper) - Paramed Exam - Blood and Urine - APS - Third-Party Financial Documentation	- App Part I (eApp or paper) - Paramed Exam - Blood and Urine - EKG - APS - Third-Party Financial Documentation					

1 Juveniles Ages 0-17 refer to Juvenile Underwriting section (page 4).

2 A Paramed Exam can be completed in lieu of an eMed and Physical Measurements Exam.

3 If a CMP/Lipid panel was completed in the last 18 months, these results can be used instead of ordering new blood and urine requirements.

4 The following lifetime maximums for Guardian coverage without labs (insurance blood and urine) apply: **Ages 18-50: \$3,000,000. Ages 51-60: \$2,000,000. Some exclusions apply.**

Key:

Non-Med = Paper Medical Supplement form completed with agent

eMed = Medical Supplement completed electronically by client

Paramed Exam = Paramedical examination

Physical Measurements = Height, weight, blood pressure, pulse and chest measurements (males only) collected by Paramed examiner.

CMP/Lipid Panel = Comprehensive Metabolic Panel and Lipid Panel are common lab tests. The Home Office will attempt to obtain CMP/Lipid results from the client's physician if completed in the last 18 months. If unavailable, blood and urine collected by an approved Paramed examiner will be required.

Blood = Full Blood Profile

APS = Attending Physician Statement containing doctor's records and notes

Older Age Q = Older Age Questionnaire includes cognitive and mobility assessments administered by an examiner.

LBS⁵ = The Living Balance Sheet® is a detailed financial document of assets.

Key considerations

- 1 Underwriting reserves the right to order additional requirements including physical measurements, blood and urine based on the evidence profile for the client or for quality control purposes. (Example: 3rd party database search results, Medical or Non-Medical information developed, etc.)
- 2 Underwriting requirements are based on the total amount currently applied for at Guardian, plus any insurance issued by Guardian within the last six months. The following lifetime maximums for Guardian coverage without labs (insurance blood and urine) apply:
Ages 18-50 \$3,000,000
Ages 51-60 \$2,000,000
Some exclusions apply (ex. Juvenile underwriting, purchase option riders, etc.)
 - If applying for Guaranteed Purchase Option (GIO), Whole Life Purchase Option (WLPO) and/or ADB riders, the underwriting requirements are based on the total first-year coverage and do not include the death benefit amount of the riders.
 - For survivorship cases: Underwriting requirements are based on 60% of the total death benefit, except for laboratory requirements (i.e., blood/urine), which are determined at 100%.
- 3 The paramed exam/eMed/Medical Supplement Part 2 is considered current if completed within the last 6 months. In general, underwriting requirements such as the Physical Measurements/Vitals, Labs, EKG's, treadmill EKG's are considered current if completed within the last 12 months for applicants ages 65 or younger, and within the last 6 months for applicants age 66 and older. The underwriter has the discretion to request updated requirements including a current paper Medical Supplement, if needed, or to require a Health Certificate.
- 4 An approved paramedical facility must be used for all medical underwriting requirements. Medical supplements from other carriers are not accepted.

Additional information

Examples of acceptable third-party financial documentation

Income (Earned)	Federal tax return, W-2, 1099
Cash/CDs	Current bank/financial institution statement
Equities	Current brokerage statement
Real Estate	Complete listing of properties held, including addresses and ownership percentages, current property tax statements or assessments, appraisals and title (to prove ownership if not on property tax statement)
Business Interests	Federal tax return along with audited statements (balance sheet and income statement), proof of ownership via articles of organization or incorporation

Use the "Personal Financial Supplement" and/or "Business Financial Supplement" form, signed by the applicant, agent, and qualified third-party can also be used for third-party financial documentation.

Please note: Signed financial statements (from a CPA or attorney) or audited financial documents may be used in lieu of the suggested documentation listed, subject to underwriter approval.

Financial underwriting requirements

Age	Amount	Requirement
Up to age 65	\$5,000,001 to \$10,000,000 \$10,000,001 and greater	LBS or Signed Financial Supplement (by the agent and client) Database search and third-party financial documentation
Ages 66 – 69	\$3,000,001 to \$5,000,000 \$5,000,001 and greater	LBS or signed financial supplement (by the agent and client) Database search and third-party financial documentation
Ages 70 and older	\$1,000,001 and greater	Third-party financial documentation

Please note: Underwriting reserves the right to request additional financial verification as needed.

Attending Physician's Statement (APS) guideline summary

When to order an APS

There are certain conditions that will almost always require an APS. They include, but are not necessarily limited to:

- Alcohol/drug treatment
- Cancer and tumors within 10 years (include pathology reports)
- Cerebrovascular accidents/transient ischemic attack (TIA)/stroke
- Crohn's disease/ulcerative colitis
- Diabetes
- Emphysema/COPD
- Epilepsy/seizures
- Heart disease (coronary artery disease [CAD]/valvular disease/heart attack/arrhythmia, etc.)
- Liver and kidney disorders
- Mental disorders requiring multiple medications or hospitalization
- Neurological disorders (Parkinson's disease/multiple sclerosis [MS])

When not to order an APS

Do **not** order an APS for the following:

- Impairments such as hypertension or where there is a recent comprehensive physical examination including physical measurements and lab results (Comprehensive Metabolic Panel (CMP) and Lipid panel). Consider obtaining an Electronic Health Records report for applicants age 0-50 and coverage amounts up to \$3,000,000
- Examination/consultation for employment, premarital, school, military, Federal Aviation Administration (FAA), routine gynecological exams if application indicates "Within Normal Limits"
- Simple fractures, pregnancy resulting in routine delivery, or routine surgery (such as tonsillectomy, hernia repair, or an appendectomy)
- If the consultation was before the date of the last application (Life or Disability) to Guardian, GIAC, or Berkshire Life and an APS was included in the prior underwriting file

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APS ordering reminders

Unless otherwise specified by the record requestor, all APS orders will default to the last 5 years of records for Individual Life cases and the last 10 years of records for Berkshire Disability Insurance cases.

Providing additional instructions may assist vendors in obtaining all required records. For example: "All records from the past 5 years to include mammogram and EKG results from Sept 2019".

Avoid inserting limiting instructions such as, "Records from Dr. Smith ONLY." Instead, we recommend indicating, "Please include all records from all treatment providers at this facility" to ensure that all records are retrieved, regardless of whether the client saw a different doctor for one or more of their appointments.

Underwriting reserves the right to request or order any additional APS or underwriting requirements as deemed necessary.

APS: ordering priority – multiple physicians:

For ages under 50 for \$1,000,000 or less, please do not order multiple APS's without prior underwriter approval.

Where several physicians are mentioned for a condition, attempt to establish from whom to request the APS on the following basis:

1. The principal physician who has treated the most recent disorder
2. The regular family physician, if indications are that he/she has been consulted for that disorder

If more than one doctor has been consulted for a condition, the APS should be sent to the one who would have the complete, up-to-date record. If a specialist has been consulted, the regular physician will usually have the specialist's report.

SafeGuard360™ financial requirements

Underwriting requirements for SafeGuard360™ are the same as age and amount requirements for L99 Whole Life with LTC and Waiver of Premium riders with additional financial qualifications. For additional information on underwriting, please refer to "Underwriting Guidelines and Requirements" along with other publications available in the Life Underwriting section of GOL.

Ideal candidates are those who would qualify for both Waiver of Premium and LTC.

Additional financial requirements:

- Financials section of the application
- SafeGuard360™ supplement, found on iPipeline or eApp
- For amounts \$5,001-\$10,000, for business owners and 1099 contractors, 1 year of tax returns

Juvenile underwriting (Ages 0 through 17)

- For all amounts, the Application for Individual Life Insurance and the Medical Supplement are required. An APS may be requested at the underwriter's discretion.
- For amounts of \$1,000,001 and up, an APS is required. An M172 completed by the child's physician is required if the child has not had a checkup in the past year.

Guardian Health Advantage Underwriting program

Clients aged 20-60 who have regular full check-ups with their personal doctor can qualify for up to \$10 million in coverage without an insurance exam.

Requirements:

- Whole life (may include Expanded Standard Program) and Term policies only.
- APS records to include a comprehensive physical exam including height, weight, blood pressure reading within the past 12 months. Lab results must include a Comprehensive Metabolic Panel (CMP) and Lipid Panel. We will obtain a complete APS from the physician seen for the physical.
- An eApp and eMed.
- Oral fluid testing using our new [Insurcheck process](#).
- Additional APS's and other requirements may be necessary based on a client's medical history or information developed from other data sources such as the MIB and pharmacy search.

Please notify underwriting upon case submission that you wish for a client to be underwritten under this program.

**The Guardian Life Insurance
Company of America**

guardianlife.com

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