Transamerica Life Insurance Company
Transamerica Financial Life Insurance Company



Field Underwriting Guide

We Make It Easy

Transamerica®
Long Term Care

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TRANSAMERICA®
Long Term Care



Mission Statement

Our Mission is to assist you, the agent, in placing suitable and sustainable LTC insurance business and provide exceptional customer service to you and your client.

Each application is underwritten, in a timely manner, by a member of our highly experienced underwriting staff based on the information made available on the application and information collected by us through the underwriting process.

While we cannot insure all applicants, particularly those with chronic or progressive disorders that appear likely to result in functional or cognitive impairment, we will give every consideration to making the best possible offer where prudent and reasonable underwriting practice permits.

Underwriters will respond to your phone calls and emails, providing you with the answers you need when you need them.

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Timely decisions | Real time Status | Accessibility | Notification on adverse decisions | Superior Service

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What's In It *for* Me

We believe selling Long Term Care insurance is about building long-lasting relationships. Therefore, we've designed this guide to act as a sales tool, bridging the sale of Long Term Care insurance with the support necessary to build your business. The guide is intended to assist you in finding solutions to the most common underwriting concerns and provide a greater understanding of our business, underwriting practices and procedures.

The guide was created to help provide predictability during the underwriting process. This predictability is seen throughout the Field Underwriting guide which we believe will help improve agent/customer expectations and lead to higher probability of policy placement.

- Easy to understand underwriting evidence criteria
- "*" next to medical conditions indicate when medical records will be ordered
- Guidance on medical histories with a combination of conditions (co-morbidities)
- Guidance on stability periods and class ratings
- Listing of uninsurable medications and conditions

The Field Underwriting guidelines are applicable as of the date of this edition and are subject to change without notice. We reserve the right to alter handling of specific situations at our discretion, regardless of the guidelines contained herein.



The Application Process

The application package contains the application as well as all other state required forms.

To ensure that your application is processed promptly:

- ✓ Submit the most current state application as well as all state required forms (Personal Worksheet, HIPAA, Replacement forms.)
    - All forms must be received in the Home Office within 30 days of the signed date on the application.
    - HIPAA and MIB Authorization forms must be signed and dated on the date the application is signed before Underwriting processing can begin.
- ✓ Complete the application in its entirety, including complete details of any questions answered “yes” in the medical sections.
- ✓ The modal premium payment or a minimum of two months premium is required with all Individual sales, unless in CA which requires only one monthly premium.
- ✓ Upon receipt of your licensing application in our Administrative Office, your agent/broker license, compliance with continuing education requirements, and appointment status will be verified.

COMPLETING THE APPLICATION



HELPFUL HINTS

The Helpful Hints on the front of the application package provide a quick reference to those pages requiring signature as well as the number of signatures required.



APPLICANT INFORMATION

Fully complete the personal information on the applicant. Note: We need the applicant's telephone number to enable us to conduct a Phone Interview or arrange for a Face-to-Face Assessment, depending upon age. The driver's license or passport information is necessary for anti-money laundering purposes.



HEALTH AND PERSONAL HISTORY

All questions must be answered. Please note that a "yes" answer to any of the questions requires that additional details be provided. Space is available to provide that information; however, an additional sheet may be attached if more space is needed. Any additional sheets must also be signed and dated by the applicant.



PLAN SELECTION

Complete this section in its entirety, as appropriate. This section should reflect only those benefits available in the state of issuance.



AGENT'S REPORT

The information you provide here gives our underwriters a more complete picture of the applicant. We ask that you answer these questions to the best of your ability and knowledge. The additional questions regarding Long Term Care insurance policies you've sold the applicant are mandated by state laws. Note that regardless of any replacement, all such prior policies must be listed even if they've long since lapsed.



Notice About Insurance Fraud

Transamerica Long Term Care is committed to reducing fraud. You should make applicants aware that any person who, facilitates a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud.

COMPLETING THE OTHER FORMS



Personal Worksheet

The Agent must review with the applicant the income and assets section of this form. The applicant will be required to either:

- Complete the Personal Worksheet and indicate that the answer to the questions on the Personal Worksheet describe their financial situation.
- Indicate that they choose not to complete this information, but do wish to purchase coverage.



HIPAA Authorization

The Applicant must sign and date this form before the Underwriting process may begin.

PREMIUM PAYMENT MODES AND OPTIONS

Premium Payment Modes

- Bank draft monthly
- Quarterly
- Semi- Annually
- Annually

The more often the applicant pays, the higher the premium cost per year.

Premium Payment Options

- Personal Check
- Electronic Funds Transfer Form
  - Payment of initial premium as well as future recurring premiums.
- Credit Card Authorization Form
  - Payment of initial premium is available via Credit Card (Except AK, CA, MD, NC, NJ, NV and NY)

**Cash or cash equivalents such as money orders and cashier's checks are not accepted

FIRST APPLICATION RULE

In the event that two applications are submitted for the same individual from two different producers, we will process the first application received by us in good order and will return the subsequent application to the submitting agent.

DELIVERY RECEIPT

A delivery receipt will be included with each issued policy. The delivery receipt must be signed, returned and received in the administrative office within 30 days or the new policy will be mailed directly to the policy owner for signature. This procedure will ensure compliance with requirements under the IRS code which mandates that tax-qualified long term care policies be delivered to the policyholder within 30 days of approval.

SIGNATURES AND EFFECTIVE DATES

1. The applicant must sign and date the application in all requested areas. We do not accept Power of Attorney signatures on any application.
2. All applications must be received in the Home Office within 30 days of the signed date.
3. Please print, as well as sign, your name on the application.
4. You must include your Agent number (please consult your local agency or MA for assistance). If we cannot identify the writing agent, and determine that his/her license and continuing education credits are current, the case will not be issued and paid. The application and deposit will be returned directly to the applicant.
5. Effective Date: Policies will be effective the date the application is signed (Issue date, not the approval date) and the initial premium is paid, unless alternate dating is requested on the application. However, if either date is the 29th, 30th or the 31st of the month, the effective date will be the first of the following month.

SIGNATURES AND EFFECTIVE DATES *cont.*

ADVANCED DATING

An advanced date may be requested, but only at time of application and not to exceed 90 days. If a specific advanced date, which may include indicating Upon Approval, is requested there will be no conditional coverage. And the applicant's premium will be based upon the age as of effective date of the policy.

BACK DATING

Back dating is allowed to accommodate recent age changes. We will permit such requests, to a maximum of 30 days. In all cases, where backdating is allowed, back premiums must be paid upon placement.

Please refer to the Conditional Receipt for all conditions governing when insurance becomes effective. Answers to questions on the application must be as of the date the application is completed.

CONDITIONAL RECEIPT

You must collect premium with each application for LTCI in order for Transamerica Long Term Care to initiate the processing. When you do, be sure to provide the applicant with a copy of our Conditional Receipt. The amount received should equal the modal premium. In lieu of a full modal premium, the applicant must submit two months premium (CA only allows one month's premium to be submitted with the application).

UNDERWRITING PROCEDURES

1. The file is reviewed by the Underwriting Department and any necessary medical information will be requested.
2. Follow up correspondence for any outstanding underwriting evidence will be sent out periodically. A copy of the correspondence will go to the applicant as well as to the appropriate party indicated on the new business transmittal. Additionally, real time status is available for all outstanding underwriting evidence on www.taltc.com.
3. All requirements, medical records and other forms and information must be received within 60 days of application date. If not, the file will be closed as incomplete and the premium will be refunded directly to the applicant.
4. In the event an application is declined or issued other than as applied for, we will contact the appropriate party indicated on the new business transmittal directly, give the specific medical reason for that action and the source of that information to the extent permitted by law. For histories such as HIV/AIDS status, Drug or Alcohol abuse and some significant mental nervous disorders such as Schizophrenia, our adverse decision letters will reflect that the decision was based upon sensitive information. Additionally, we will send an advance copy of the adverse decision correspondence to the appropriate party indicated on the new business transmittal. In some cases, the underwriter will notify you that reconsideration may be possible after a waiting period. A letter with a detailed explanation of the adverse underwriting decision will be sent directly to the applicant along with any refund due.

CANCELLING APPLICATIONS DURING THE UNDERWRITING PROCESS

If your applicant wishes to cancel their pending application at any time during the underwriting process, they must submit a written request to do so. The written request must be signed and dated by the individual applicant only.

REOPENING OF AN APPLICATION

Applications will be closed as incomplete if we do not have all necessary evidence sixty (60) days from the application date. If you wish to reopen an applicant's case once incompleted, we require a new, fully completed application with a current date.

PREQUALIFICATION

Our Field Underwriting Guide will not address every situation and circumstance that could arise. If you are unable to find the information you need in the guide, or if the applicant has a complicated history requiring guidance by one of our highly trained underwriting staff, we have two available opportunities to improve the predictability of your case.

In order to provide the best possible guidance, we suggest the following information be provided at time of prequalification: Age, Gender, Marital Status, Medications (name and dosage) and corresponding Medical Conditions (include age of onset). Please note that prequalification responses are only a tentative opinion based on the information provided. The more information provided about your client, the more accurate our opinion.

THE FOLLOWING ARE EXAMPLES OF A SCENARIO WHERE WE CAN PROVIDE A STRONG RECOMMENDATION (HIGH LEVEL OF PREDICTABILITY) COMPARED TO AN INQUIRY THAT WOULD PROVIDE A WIDE RANGE OF RECOMMENDATION (LOW PREDICTABILITY):

HIGH LEVEL OF PREDICTABILITY
Age 62
Height: 6'0 Weight: 180 lbs.
Type 2 Diabetes
No Tobacco
Onset Age 59
Medications – 500 mg Metformin twice daily
HgA1c reading – 6.4
Blood Pressure Reading – 135/85
Cholesterol – 200
No complications
RECOMMENDATION: STANDARD



LOW LEVEL OF PREDICTABILITY
Age 68
Diabetes
Metformin and other pills
RECOMMENDATION: STANDARD TO DECLINE





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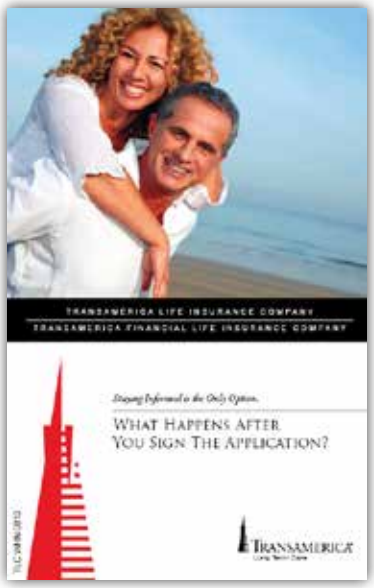
advantage

Preparing Applicants *for* the Underwriting Process

We understand the importance of having a client that is prepared for what happens after the application has been signed and before a policy is issued. In order to help bridge that process we have created a **brochure** that explains *What Happens Next* within the underwriting process.

This brief brochure will help in managing your client's expectations of the underwriting process. The brochure provides basic information as to the basic elements that will be requested and an average length of time it takes to complete various pieces of underwriting evidence. To view it in its entity go to **www.taltc.com** and select order supplies, brochures.

Well prepared applicants usually make it through the underwriting process faster. Those that are not prepared typically will have processing delays.



Document varies depending on Product.

PRIVACY AND HIPAA

Transamerica Long Term Care is committed to help protect the privacy of its customers and abide by the rules and regulations set forth by the Health Insurance Portability and Accountability Act (HIPAA). In addition, as Transamerica's business associate, you are obligated under the law to maintain the privacy of the applicant's medical information.

THE HIPAA AUTHORIZATION

The HIPAA Authorization form must be signed and dated by the applicant and submitted with the application. A properly completed authorization is necessary in order for medical evidence to be ordered and allows the application to be forwarded to the Underwriting Department. If the HIPAA Authorization is not properly signed and dated, or if the language content of the HIPAA form is altered in any way, this will delay processing of the application.

NOTICE OF SUMMARY OF RIGHTS

The Summary of Rights is enclosed with each adverse underwriting decision letter. This notice informs the applicant of their rights and how they can 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.

UNDERWRITING IMPAIRMENTS IN GENERAL

While the impairments included here are primarily medical, additional factors related to Activities of Daily Living (ADLs)/Instrumental Activities of Daily Living (IADLs) and cognitive functioning have also been incorporated. Although the list of impairments is extensive, it does not include all possible conditions you may encounter. In addition, the underwriting determinations that are provided in these guides are based on **individual impairments,** while in the field you may encounter **multiple impairments.**

Least Favorable outcomes are found in those cases that include:

- Incomplete health histories
- Inactive/sedentary lifestyles
- Severe medical concerns likely to cause long term periods of disability
- Medical conditions with partial recovery or poor control/response to treatment
- Poor functional or cognitive capacity
- Recent health condition detection or surgery (will consider minor out-patient surgery once completed and with a full recovery)
- Co-morbidity (i.e. health conditions that tend to complicate each other)

*******We will not accept applications or underwrite any individual or couple currently residing in or considering a Continuing Care Retirement Community (CCRC)*******

*******Applications submitted on individuals who were previously declined by other carriers for LTC coverage will not be reviewed. These applications will be processed as a field decline and will be counted against your placement.*******

UNDERWRITING REQUIREMENTS

MEDICAL RECORDS (APS)

Medical records will be ordered through our approved vendor(s) for all Abbreviated Application and fully underwritten applicants excluding MGI & SI , regardless of the amount of the policy or the age of the applicant. If an applicant has not seen their physician in over 2 years, we will commonly request a Face-To-Face assessment to evaluate the significance of their health history.

FACE-TO-FACE ASSESSMENT (F2F)

For applicants age 70 and older, we will conduct a Face-to-Face Assessment through our approved vendor(s). A Face-to-Face Assessment is an evaluation where a trained assessor visits with the applicant in his/her residence. The Assessment includes questions related to health history, general activity level, and functional ability regarding both instrumental and activities of daily living. Physical observations, mobility and cognitive testing are included as well. On occasion we may require such an assessment below age 70, at our discretion. We will inform you of such requests. Some situations where you may see this occur would be with those individuals with a history of stroke / TIA / amnesia / memory problems / brain surgery / hearing or mobility limitations, or other issues triggering underwriting concerns.

! *The F2F assessment must be completed in the applicant's home.*
! *If the applicant is non-English speaking, please indicate such in the comments section of the application and include the primary language so advanced notice can be provided to our vendors.*

PHONE INTERVIEW (PI)

An interview is required for all applicants through age 69. This interview will ask more in-depth questions than those on the application. The phone interview consists of standardized medical questions and usually takes approximately 20 – 30 minutes depending on the extent of their medical history. The questions will cover their medical history, medications, symptoms, general activity level, and functional ability regarding both instrumental and activities of daily living. For applicants between the ages of 60 – 69 or those with certain medical conditions, a brief memory exercise will also be included and so it is imperative that the applicant is free from interruptions when taking this important test.

We ask that you advise your applicant to have their prescriptions available as well as address information for the prescribing physician. Your client should be advised to expect a call from one of our approved vendors. Please indicate on the application the best time and telephone number for our vendor to contact them to complete the interview.

! *If the applicant is non-English speaking, please indicate such in the comments section of the application and include the primary language so advanced notice can be provided to our vendors.*

MEDICAL INFORMATION BUREAU (MIB), PRESCRIPTION DRUG (RX) AND PUBLICALLY AVAILABLE INFORMATION

On all applicants, we may check the Medical Information Bureau (MIB) and a Prescription Drug Database. Publically available information will also be used at the underwriter's discretion. These tools assist the underwriter to make the most informed decision regarding the applicant's insurability. Because the authorizations in our application packet authorizes our access to this information, the applicant will not be required to assist with this process.

UNDERWRITING EVIDENCE

AGE	MIB	Rx	PI	PI with Memory Exercise	F2F	APS
18-60	•	•	•	For cause	For cause	•
60-65	•	•	•	•	For cause	•
66-69	•	•	•	•	For cause	•
70-79	•	•	n/a	n/a	•	•

Underwriting reserves the right to request additional evidence (i.e. Paramedical exams, Motor Vehicle Reports, Blood Work, etc.) in unique circumstances where our normal evidence does not provide enough detail to complete accurate risk selection.

UNDERWRITING RISK CLASSIFICATIONS

- Preferred
- Standard
- Class 1 (25% increase)
- Class 2 (50% increase)

Unless the Field Underwriting Guide indicates to submit as a Class 1 or 2 or if instructed by an underwriter as part of a prequalification, we request all applications to be submitted at standard rates. We will always issue at the best rate classification based upon the review of the health history.

! *In New York, the combination of Underwriting Risk Classification discount and Couples discount can't exceed 35%.*

RATINGS AND OTHER MODIFICATIONS

Every effort will be made to place the applicant in the best rating classification, regardless of the rate requested on the application. When the underwriting evidence indicates that a policy cannot be issued as applied for, rather than simply decline, we will give consideration to providing an alternate offer. In addition to Standard premium rates, we may be able to offer coverage on a Class 1 or Class 2 basis with increases in premium.

When additional premium may not be the best option for underwriting, other alternatives may be offered, e.g. a longer Elimination Period, a shorter Maximum Benefit Period and/or a Reduced Daily Benefit amount. We will decline only where an alternate offer is not reasonably available.

MAXIMUM BENEFITS WITH RATINGS*

RATED CLASS	ADDITIONAL PREMIUM	MAX DB	MAX BENEFIT POOL	MIN EP
1	25%	$150	$275,000	90
2	50%	$150	$275,000	90

*Some states may have additional restrictions or limitations.

SHARED CARE RULES

- Spouses must apply for and be approved and issued with identical benefits to be eligible for this rider
- Couples must retain identical benefits throughout the life of the policy
- Shared Care must be applied for at the time of application submission

LIMITATIONS ON CLASS RATINGS

The following benefits/riders are not available on Class rated policies

- Waiver of Premium Rider – Home Care and Adult Day Care
- Waiver of Premium Rider – Cash Benefit
- Return of Premium to Age 67 Endorsement
- Accident Benefit to Age 67 Endorsement
- Joint Waiver of Premium
- Elimination Period Credit Rider
- Return of Premium Upon Death Rider

COUPLES DISCOUNT

Discounts are provided for couples who maintain a shared residence for at least 2 years.

Couples Discount amounts vary by policy type and have policy-specific requirements. For TransCare® II, spouse/partner policies must have like-benefits. For TransCare® III, spouse/couple policies can differ.

When spouse/partners apply for either the Shared Care or Joint Waiver of Premium Rider, the benefits of the policy will need to match in order to receive the couples discount. For TransCare® III, there is one exception. If one is 70 or over and one is under 70, the younger may have Tailored BIO and the other person must have SRBIO or CBIO to maintain the couples discount. In that situation, they would still be considered matching benefits.

A reduced discount is available for a spouse/partner when only one spouse applies for coverage or whenever both spouses apply and one is declined for coverage.

! *In New York, the combination of Underwriting Risk Classification discount and Couples discount can't exceed 35%.*

! *In Montana, a companion is a legal spouse or an adult not related by blood to the applicant who: (1) resides with the applicant on a continuous basis and shares the same address, living expenses, rent and/or mortgage; and (2) has exchanged powers of attorney, or has designated his or her companion as the primary beneficiary under his or her will and/or testamentary trust.*

UNDERWRITING CONSIDERATIONS

The underwriting of Long Term Care insurance involves consideration of **medical evidence, functional performance, and cognition.**

Each of these factors are critical in the risk selection process. The sources for this information may include the application, Medical Records, a Phone Interview, a Face-to-Face Assessment and/or any other evidence required by the Underwriter, depending on age and health history. (See Underwriting Requirements.)

Medical evidence is simply any findings, current or by history, that relate to the physical or mental health of the proposed insured.

Functional performance includes such things as independence in Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs), and other indicators that the applicant is active and functionally unimpaired. (See Definitions & Abbreviations.)

Cognition relates to one's awareness and perception, as well as the ability to understand and reason. While early stages of cognitive impairment may be difficult to detect, it is a critical element in the underwriting for Long Term Care insurance. Such impairments tend to be progressive and may be indicative of Alzheimer's or other types of dementia.

ADLs (Activities of Daily Living) refer to those basic daily tasks necessary to maintain a person's well-being. These include:



Limitations in the ability to perform ADLs are a strong predictor of subsequent long term care need.

IADLs (Instrumental Activities of Daily Living) refer to those activities that require higher levels of functional ability than ADLs. These include:

Ability to handle one's finances	Ability to use the telephone	Taking one's medications
Housekeeping	Food Preparation	Laundry
Shopping		

Limitations in the ability to perform IADLs are a strong predictor of future long term care need.

ADDITIONAL CASE CONSIDERATION:

It is not always possible to include all the variations of a given impairment that the underwriter must consider in order to determine the most appropriate risk classification. In Long Term Care insurance underwriting, certain combinations of impairments are more significant than others. Thus, we look at the relationship between the different conditions in determining the ultimate risk classification. For example, several otherwise "Standard" class impairments may warrant a substandard rate offer. Where two impairments could exacerbate each other, such as Diabetes and Coronary Artery Disease, the risk may be uninsurable.

Consider asking your applicant a few additional questions:

- Have you been asked or has it been suggested that you restrict or discontinue any activities or hobbies within the last 12 months?
- Has there been any recent change in your health history in the last 12 months (both positive or negative) including new or additional medications not required last year or reduction or discontinuing of medications?
- Have you recently or regularly not taken medications as prescribed by your physician?
- Have you had or been asked to have any specialized testing (other than age appropriate screenings) that you have not completed? What was the test(s) and why was it requested?
- Are you currently participating in any type of physical or occupational therapy? If so, what and why?
- Any planned or recommended surgery? If so, what is planned or recommended?
- What was your height and weight when you last saw your physician? Has your weight gone up or down since that appointment?

PREFERRED CRITERIA ***Note – All Applicants should be quoted using standard rates.**

- Build must be within the preferred range on the build chart
- Demonstrated control of medical conditions
- No tobacco/nicotine use within the past 24 months, including occasional cigar or pipe use, and tobacco chewing.
- No mobility risk factors (i.e. falls, osteoporosis, significant arthritis, back disorders etc.)
- No Cardiovascular/Cerebrovascular Events (A. Fib, CVA, TIA, MI, HTN*...) or conditions
- No use of assistive Devices
- Regular medical follow up (minimum once every two years)
- No history of Diabetes

We will consider Mild Hypertension at preferred rates as long as the average 12 month blood pressure readings are < 140/85 with no other underlying heart disease, no history of heart surgery, no structural heart defects, no rhythm disorders, no stroke/TIA history, etc.

Throughout the medical impairments section of the underwriting guide a "**" next to standard will be indicative of medical impairments or situations that may be preferred if there is no other health history or impairment and the applicant's build fits within the preferred range below.

BUILD CHART

The weights indicated under each heading below denote the minimum and maximum weight that will be considered.

1. Medical Records will be required on those weights that are over the Standard where the medical impairment is marked with a "*".
2. Applicants with complications or co-morbidities in addition to a weight above Standard will be at least class rated but could be declined for coverage.
3. Applicants above the maximum Class Rated or below the Preferred weight will be declined for coverage.

Height	Preferred	Standard	Class Rated
4’8”	85-156	157-189	190-200
4’9”	88-162	163-193	194-204
4’10”	91-167	168-197	198-208
4’11”	94-173	174-201	202-212
5’0”	97-179	180-205	206-216
5’1”	100-185	186-210	211-221
5’2”	104-191	192-214	215-225
5’3”	107-197	198-219	220-232
5’4”	110-204	205-225	226-237
5’5”	114-210	211-231	232-243
5’6”	118-216	217-237	237-250
5’7”	121-223	224-243	244-257
5’8”	125-230	231-250	251-262
5’9”	128-236	237-257	258-269
5’10”	132-243	244-264	265-278
5’11”	136-250	251-271	272-287
6’0”	140-258	259-279	280-292
6’1”	144-265	266-287	288-299
6’2”	148-272	273-295	296-308
6’3”	152-279	280-303	304-317
6’4”	156-287	288-311	312-325
6’5”	160-295	296-319	320-334
6’6”	164-303	304-326	327-345



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Timely decisions | Real time Status | Accessibility | Notification on adverse decisions | Superior Service

advantage

GLOSSARY *of* MEDICAL CONDITIONS

We understand your time is valuable and that every application is precious. With that in mind, the following glossary of medical conditions is provided to assist you in the application process. Familiarizing yourself with these conditions and the degree to which they may affect underwriting may help you focus your time on those situations that are most likely to result in placed business. Predictability is key. Knowing your client's conditions and asking the appropriate questions could help you in determining the viability of their application. We hope this allows you to set proper expectations with your clients and to increase the percentage of approved applications submitted.

The need for medical records is necessary when evaluating many of the medical conditions that follow. In order to help you know when we will order medical records, we denote this by an "*" next to the specific condition or degree of the condition. This will also help you to set expectations with your client as to the overall time it might take to get their application through the underwriting process.

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Acoustic Neuroma: A benign tumor of the auditory nerve – *A face to face assessment may be required*	
? Has the neuroma been removed? Date(s)?	
? Is the applicant taking any medication or receiving physical therapy? Name(s)?	
? Has the applicant had problems with balance or falls? Details?	
? Has there been any seizure activity? Date of last seizure?	
Surgically removed, completed recovery with no seizures or residuals other than hearing loss, greater than 12 months	Standard
Otherwise	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
Actinic Keratosis: A pre-malignant lesion of the skin	Standard**
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 <40 mg hydrocortisone, greater than 12 months	Standard
Activities of Daily Living (ADLs): Those basic daily tasks necessary to maintain a person's well being. Bathing, Continence, Eating, Dressing, Toileting or Transferring	Decline
Adult Day Care Services: All cases	Decline
AIDS: A disease of the immune system that fails to fight infection	Decline
Alcoholism: A chronic illness marked by consumption of alcohol at a level that interferes with physical or mental health, social, family, or occupational responsibilities	
? How long has the applicant been abstinent?	
? Has the applicant ever had a relapse? Date(s)?	
? Has the applicant ever received any outpatient therapy or belong to a support group?	
? Has the applicant ever had any liver problems (cirrhosis, fatty liver, abnormal liver functions)? Details?	
Abstinence over 3 years with no residuals	Standard
If one prior relapse, abstinence for 5 years since relapse with no residuals	Standard
If abstinent for less than 3 years, with history of residuals or 2 or more prior relapses	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Allergies: An acquired, abnormal immune response to a substance that does not normally cause a reaction in most people	Standard**
Alzheimer's Disease: A slowly progressive form of dementia	Decline
Amaurosis Fugax: A temporary loss of vision in one eye due to insufficient blood flow to the retina.	
? Date of episode?	
? Has there been more than 1 episode? Details?	
? Has any diagnostic testing been performed (carotid studies, MRI/CT of brain)? Details/Results?	
? Have there been any residual vision problems?	
? Does the applicant have any history of diabetes, heart, or circulatory problems? Details?	
Single episode only, at least 24 months ago, no residuals, no history of diabetes, cardiovascular or circulatory disease	Standard
Otherwise or with complications	Decline
Amputation: Removal of a limb, part, or organ	
? Location of Amputation?	
? Date of Amputation?	
? What caused the amputation?	
? Is the applicant disabled or do they experience any limitations? Details?	
? Does the applicant use any type of assistive device? If yes, type and frequency	
Single limb only, due to trauma or congenital, no complications, fully functional with no assistance other than single limb prosthesis, fully adapted and independent	Standard
Otherwise, due to diabetes or other disease	Decline
Amyotrophic Lateral Sclerosis (ALS)/Lou Gehrig's Disease: A disorder causing progressive loss of control of voluntary muscles due to the destruction of nerves in the brain and spinal cord	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Anemia: A blood disorder characterized by the decreased ability of the red blood cells to provide adequate oxygen supplies to body tissues	
? Date of Diagnosis?	
? What type of anemia does applicant have?	
? Is the applicant taking any medications? Name(s)?	
? Has the applicant received any transfusions? Date(s)?	
? Has the applicant been hospitalized? Date(s)/Details?	
Mild iron, B12 or Folate deficiency anemia, no underlying chronic disease, well controlled, hemoglobin values at or exceeding 10.5	Standard
Chronically abnormal blood studies, weakness, or fatigue	Decline
Current treatment with steroids, blood transfusions, immunosuppressant, or treated with bone marrow or stem cell transplant	Decline
Currently under evaluation for anemia with abnormal lab values without known cause	Postpone 3 months
Due to Disease	Refer to Disease
Aneurysm: A bulge in the wall of the artery	
? Where is the aneurysm located (abdominal-aorta, cerebral, thoracic, other)?	
? Was the aneurysm surgically repaired? Date?	
? If present, what is the size in cm?	
? Has the aneurysm grown? Details	
? Any history of diabetes, heart or circulatory problems? Details?	
Abdominal (AAA) operated, stable, no residual > 6 months	Standard
Abdominal (AAA) un-operated, stable, 3.0 cm or smaller	Standard
Abdominal (AAA) un-operated, stable, 3.1 – 4.0 cm	Class 2
Abdominal (AAA) 4.1 cm or greater with complications or w/residuals following surgical repair	Decline
Thoracic operated, stable, no residual < 6 months	Standard
Thoracic un-operated, or otherwise	Decline
Cerebral, surgically repaired more than 2 years ago with complete recovery, no residuals (cognitive test will be required regardless of age)	Standard
Cerebral, un-operated or otherwise	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Angina: Pain, discomfort or pressure localized in the chest that is caused by an insufficient supply of blood to the heart muscle	See CAD
Angioplasty: Procedure used to widen vessels narrowed by stenosis or occlusions.	See CAD
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 cause the affected vertebrae to fuse and grow together.	
? Date of diagnosis?	
? Dose the applicant experience any pain? Describe.	
? Is the applicant taking any medication? Name(s)?	
? Has the applicant undergone any back surgery? Date(s)/Details?	
? Has the applicant undergone any physical therapy or injections? Details?	
Asymptomatic, inactive, no limitations, non disabling, treated with occasional anti-inflammatory	Standard
Symptomatic, with kyphosis, respiratory compromise, spinal fractures, mobility problems, multiple falls, or otherwise	Decline
Anorexia Nervosa: An eating disorder associated with a distorted body image and marked fasting.	
Treatment and release from care > 24 months ago	See Depression
Current or with any resulting complications	Decline
Anxiety: A feeling of apprehension or fear that lingers	See Depression
Aortic Insufficiency/Aortic Stenosis: Defective functioning of the aortic valve, with incomplete closure resulting in aortic regurgitation	
Operated, full recovery, asymptomatic, stable, no complications > 3 months ago	Standard
Un-operated > 12 months ago, mild with no dizziness or syncope and asymptomatic	Standard
Otherwise	Decline
Aphasia: Partial or total loss of the ability to articulate ideas or comprehend spoken or written language, resulting from damage to the brain caused by injury or disease	Decline
Apraxia : Disorder of the central nervous system caused by brain damage and characterized by impaired ability to carry out purposeful muscular movements	Decline
Appendectomy: A surgical removal of the appendix	Standard**

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Arterious Venous Malformation (AVM): A large tangle of dilated blood vessels with rapid flow and early draining veins that may occur in many parts of the body.	
Successfully eliminated (surgically, embolization or radiation), no residual complications, complete recovery, > 12 months, any location besides the brain	Standard
Present Arterious Venous Malformation (AVM) any location, or any history of AVM of the brain	Decline
Arteritis (cranial, temporal, giant cell): inflammation of an artery	
Asymptomatic, stable, treatment free < 12 months	Postpone
Asymptomatic, stable, treatment free, no limitations or restrictions >12 months	Standard
Symptomatic or requiring treatment	Decline
Arthritis: Inflammation of a Joint	See Specific Type
Aseptic Necrosis: A condition resulting from the temporary or permanent loss of blood supply to the bones	
Surgically repaired, no limitations, non-disabling and no evidence of disease > 6 months	Standard
Un-operated	Decline
Assisted Living Facility: A residential facility for people who need assistance with Activities of Daily Living (ADLs) but wish to live as independently as possible for as long as possible. Current or within the last 12 months	Decline
Asthma: A respiratory disease marked by attacks of breathing difficulty, wheezing, and coughing	
? Date of Diagnosis?	
? Is asthma seasonal or requires treatment year around?	
? Is applicant taking any medication/inhalers? Name(s)?	
? Have pulmonary function tests been performed? Date/Results (FEV1 & FVC %)?	
? Has the applicant ever used oxygen or steroids? Frequency?	
? Does the applicant have any other respiratory disorder? Date(s)/Details?	
Seasonal, no limitations, well controlled, on short-term treatment, no other respiratory disorders, non-tobacco user	Standard**
Mild, less than 6 attacks per year, occasional medication required, no steroids, no COPD, non-tobacco user	Standard
Mild, less than 6 attacks per year, occasional medication required, no steroids, no COPD, tobacco user	Class 1

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Moderate, 6 – 10 attacks per year, use of bronchodilators, steroid use for acute episodes only, no COPD or hospitalization	Class 1
Moderate, 6 – 10 attacks per year, use of bronchodilators, steroid use for acute episodes only, no COPD or hospitalization, tobacco user	Decline
Severe (other than above) regular steroids, functionality limited	Decline
Severe (other than above) regular steroids, functionality limited, tobacco use within 36 months	Decline
Ataxia: Defective muscular coordination that manifests when voluntary muscular movements are attempted	Decline
Atrial Fibrillation: A rapid, irregular, heart rhythm (includes PAT, PAC, SVT)	
? Is the applicant taking any medication? Name(s)?	
? Has the applicant ever been hospitalized for a heart or circulatory problem? Date(s)/Details?	
? Has the applicant ever required cardioversion? Dates(s)/Results?	
? Does the applicant experience any symptoms of palpitations, chest pain or dizziness? Details?	
? Does the applicant have any history of diabetes, heart, or circulatory problems? Details?	
New onset, < 6 months	Postpone 6 months
Single episode only > 6months ago, no known Coronary Artery Disease, Congestive Heart Failure, Diabetes, Heart Attack, Myocardial Infarction, Cerebral Vascular Accident, Stroke or TIA	Standard
Recurrent/Chronic episodes, infrequent, short duration, no complications and currently under treatment with use of blood thinner (such as Coumadin, Pradaxa) > 12 months	Standard
Multiple cardioversions, uncontrolled or symptomatic, no current treatment, or in combination with any of the following: BP readings averaging greater than 146/86, valve problems, heart disease, diabetes, stroke/TIA/CVA, congestive heart failure or current tobacco use	Decline
Atrial Flutter: An irregularity of the heartbeat in which the contractions of the atrium exceed in number those of the ventricle	See Atrial Fibrillation
Atrophy (Brain): A decrease in size or wasting of the brain.	
Evidence of white matter changes, small vessel disease, ischemic changes, microvascular changes, infarcts, mild cerebral or cerebellar atrophy, or with evidence of neurological symptoms	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Attention Deficit Disorder (ADD): A condition characterized by a developmentally inappropriate level of attention, concentration, activity, and distractibility	
? Date of diagnosis?	
? Is the applicant currently taking any medication? Name(s)?	
? Does the applicant have any history of depression, anxiety or other mental illness disorders? Details?	
? Is the applicant disabled or do they experience any limitations in activities or in the workplace? Details?	
Well controlled, compliant with medication, active lifestyle with no limitations, non-disabling, > 3months	Standard**
Bariatric Surgery: Surgical alterations of the stomach including (Gastric Bypass, Stapling, Banding, Sleeve) – Records will be required if surgery was within the last 24 months	
Asymptomatic, fully recovered, weight stabilized, no complications, > 6 months ago	Standard
With complications, wasting syndrome or otherwise	Decline
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 or low grade dysplasia with documented follow up indicating no progression	Standard
With high-grade dysplasia or in combination with excessive Alcohol use	Decline
Basal Cell Skin Cancer: A slow growing malignant neoplasm that arises from the basal layer of the skin.	Standard**
Bell's Palsy: A disorder involving sudden facial drooping and decreased ability to move the face.	
If resolved and fully recovered	Standard**
Bipolar/Manic Disorder: A mood disorder characterized by mood swings from mania (exaggerated feelings of well-being) to depression.	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? Has the applicant ever been hospitalized or treated in a facility for any type of mental illness? Date(s)/Details?	
? Has the applicant ever received any electroconvulsive shock therapy?	
? Does the applicant have any history of depression, anxiety or other mental illness disorders? Details?	
? Is the applicant disabled or do they experience any limitations in activities or in the workplace? Details?	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Stable, controlled, fully functional with no restrictions or limitations on activities or work and > 3 years	Class 1
Otherwise on 3 or more medications or on anti-psychotics	Decline
Blindness: The condition of lacking visual perception due to physiological or neurological factors – *A face to face assessment may be required, Medical Records will be required if within 24 months*	
Congenital, traumatic, macular degeneration, fully functional with no limitations > 12 months	Standard
Functionally impaired or < 12 months	Decline
Braces : An orthopedic appliance used to support, align, or hold a bodily part in the correct position	
No disability, fully functional in ADLs and IADLs, not secondary to any other significant medical condition	Standard
Functional impairment, disability or otherwise	Decline
Bronchiectasis: A respiratory disorder with abnormal destruction and widening of the large airways.	
? Date of diagnosis?	
? Is the applicant taking any medication/inhalers? Name(s)	
? Date of last flare?	
? Have pulmonary function tests been performed? Date/Results (FEV1 & FVC %)?	
? Has the applicant ever used oxygen or steroids? Frequency?	
? Has the applicant been hospitalized for a respiratory disorder? Date(s)/Details?	
? Has the applicant smoked within the last 12 months?	
Mild, asymptomatic, treatment free	Standard
No Tobacco, No COPD, no associated disability, > 1 year ago	Class 1
Otherwise	Decline
Bronchitis (Chronic): An inflammation of the bronchi, the main air passages in the lungs, which persists for a long period and/or repeatedly recurs	Refer to COPD
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. Current	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Bunion: Defined when a big toe angles toward the second toe, resulting in inflammation and pain	Standard**
Bursitis: An acute or chronic inflammation of the fluid-filled sac (bursa) that lies between tendon and skin or between tendon and bone	Standard**
Bypass, CABG: A surgical procedure to create an alternative passage to divert the flow of blood, or circumvent an obstructed or disease heart	See CAD
Cancer: Uncontrolled growth of abnormal cells which have mutated from normal tissue. - *medical records required if within 3 years*	
Internal Cancer, Melanoma, Leukemia or Lymphoma, date of last treatment greater than 6 months ago, no residuals, no metastasis or recurrence and released from physician's care	Standard**
Brain tumor (benign or malignant) > 2 years since treatment and release from care with no metastasis (will require a F2F assessment)	Class 1
History of recurrence, metastasis, residual complications or otherwise	Decline
Cane: A device used to assist with stability, gait and balance	
Occasional cane use with no functional limitations, or stability problems, not secondary to any other significant medical condition	Standard
Three pronged or Quad Cane use	Decline
Cardiomyopathy: A disorder affecting the heart muscle, which usually results in inadequate heart pumping	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)	
? Has the applicant ever had congestive heart failure or other heart disorder? Date(s)/Details?	
? Has an echocardiogram been done? Date/Ejection Fraction	
? Does the applicant have shortness of breath, fatigue or weakness? Details?	
? Is the applicant disabled or do they experience any limitations in activities or in the workplace? Details?	
>1 year ago, no evidence of congestive heart failure, stable with good follow up (if secondary, underlying cause must be removed with reversal of cardiomyopathy), EF > 45%, and Functional Class 1 or 2 (see Coronary Artery Disease)	Standard
< 1 year or otherwise, Hypertrophic, Dilated or Restrictive	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Carotid Artery Disease: A circulatory condition characterized by narrowing or stenosis of the carotid artery in the neck.	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? Has the applicant experienced any dizziness, visual disturbances or weakness?	
? Has there been any history of TIA (transient ischemic attack) or Stroke?	
? What were the results (% of stenosis) of the last carotid study? Date?	
? Does the applicant have diabetes?	
? Has the applicant used tobacco within the past 36 months?	
? Does the applicant have any heart or other circulatory problems? Details?	
Asymptomatic, no prior stroke or TIA, no Diabetes or Heart Disease, operated (endarterectomy) >3 months ago, no tobacco use	Standard
Symptomatic, Un-operated, tobacco user, or stenosis greater than 60%, or otherwise	Decline
Carotid Bruit: A murmur heard in the carotid artery in the neck	See Carotid Artery Disease
Catheter (urinary): a soft plastic or rubber tube that is inserted into the bladder to drain urine	
Short term intermittent catheter, no limitations, non-disabling, independently managed, no underlying neurological disease, > 3 months	Standard
Indwelling, with restrictions or limitations or otherwise	Decline
Cataract: A cloudy opaque area in the lens of the eye	
No visual impairment	Standard**
Surgery anticipated/recommended, no visual impairment	Standard**
Cerebral Palsy: A group of disorders characterized by loss of movement or loss of other nerve functions	Decline
Cerebral Vascular Accident (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	See Stroke

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
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
With history of Amaurosis fugax, retinal artery occlusion, transient ischemic attack or significant carotid stenosis	Decline
Chair Lift: current use	Decline
Charcot-Marie Tooth: A slowly progressive disorder that results in wasting of muscle	Decline
Cholecystectomy: Surgical removal of the gallbladder	Standard**
Cholecystitis: Inflammation of the gallbladder	Standard**
Cholelithiasis: The presence of gallstones in the gallbladder	Standard**
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. - *A face to face assessment may be required*	
Asymptomatic, no limitations, functional in ADLs and IADLs > 12 months	Standard
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	
? Date of Diagnosis?	
? Is applicant taking any medication/inhalers? Name(s)?	
? Date of last flare?	
? Have pulmonary function tests been performed? Date/Results (FEV1 & FVC %)?	
? Has the applicant ever used oxygen or steroids? Frequency?	
? Does the applicant have any other respiratory disorder? Date(s)/Details?	
? Has the applicant used tobacco within the last 36 months?	
Mild, non-progressive, occasional steroid use, no limitations, no tobacco within the last 36 months, no oxygen	Standard
Tobacco within the last 36 months, Mild, non-progressive, no steroids, no limitations, stable for 2 years or more	Class 2
Severe regular steroids, functionality limited, tobacco use within last 36 months	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
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	
Stable, liver function tests within normal limits, non progressive, no fibrosis, > 3 years	Class 2
Colitis: Inflammation of the large intestine (includes irritable, spastic and functional)	
Well controlled, stable, with onset > 6 months ago	Standard**
Colostomy/Ileostomy: Surgical construction of an artificial excretory opening	
Temporary, reversed and fully healed, > 6 months ago with no restrictions or limitations	Standard
Permanent, fully adapted to use without need for assistance, > 6 months ago	Class 1
Otherwise	Decline
Compression Fracture: A fracture caused by the compression of one bone, typically in the spine.	
Single compression fracture without osteoporosis with no functional limitations or restrictions	Standard
Multiple compression fractures with osteopenia or osteoporosis, or with functional limitations or restrictions	Decline
Confusion: Not being aware of or oriented to time, place or person - *A face to face assessment may be required*	
Asymptomatic, now resolved with normal neuropsychological workup, > 24 months	Standard
Current or etiology/cause unknown	Decline
Normal neuropsychological workup with abnormal MRI/CT	Decline
Congestive Heart Failure: A condition where the heart loses its ability to pump blood efficiently	
? Date of diagnosis?	
? Is the applicant taking any medications? Name(s)?	
? Has the applicant ever been diagnosed with Cardiomyopathy or any other heart disorder? Details?	
? Does the applicant have any respiratory disorders? Details?	
? Does the applicant experience shortness of breath or swelling of the lower extremities? Details?	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
? Has the applicant been hospitalized for any heart or respiratory disorders? Date(s)/Details?	
Single event, > 6 months, asymptomatic, treatment free	Standard
< 6 months, unstable, Functional Class III or IV or in combination with COPD, emphysema, cardiomyopathy, diabetes, stroke or atrial fibrillation	Decline
Continuing Care Retirement Communities (CCRC): A residential community which provides several levels of housing and services for older people, ranging from independent living units to nursing homes.	Decline
Cor Pulmonale: Enlargement or failure of the right ventricle due to pulmonary hypertension	Decline
Coronary Artery Disease (CAD)/Heart Disease: Narrowing of the coronary arteries that supply blood to the heart	
Functional Class I: Patients with cardiac disease but without limitations in physical activity. They do not experience undue fatigue, palpitations, dyspnea, or angina	
Functional Class II: Patients with cardiac disease resulting in slight limitations of physical activity. Comfortable at rest, though ordinary physical activity may result in fatigue, palpitations, dyspnea, or anginal pain.	
Functional Class III: Patients with cardiac disease which results in marked limitations of physical activity. Comfortable at rest, but less than ordinary physical activity causes fatigue, palpitation, dyspnea, or angina.	
Functional Class IV: Patients with cardiac disease that results in inability to carry on any physical activity without discomfort. Symptoms of cardiac insufficiency, or of angina, may be present even at rest. Discomfort is increased with any physical activity.	
Coronary bypass or angioplasty within 3 months	Postpone
Coronary bypass or angioplasty >3 months ago, stable with no complications, no further cardiac symptoms, fitting the Functional Class 1 or 2 criteria above	Standard
Functional Class 3 & 4 heart disease (see descriptions above) or with complications*	Decline
*complications may include but are not limited to Diabetes, Stroke (CVA/TIA), Emphysema (COPD), High Blood Pressure, Kidney Disease, Peripheral Vascular Disease (PVD), Neuropathy, Nephropathy or Retinopathy	
CREST Syndrome: A diffuse connective tissue disease characterized by changes in the skin, blood vessels, skeletal muscles, and internal organs	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Crohn's Disease: A chronic inflammatory disease that can affect any part of the gastrointestinal tract.	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)/Dosage?	
? Date of last flare?	
? Has the applicant ever been hospitalized or had surgery performed (colostomy, colectomy)? Date(s)/Details?	
? Is the applicant disabled or experience any limitations? Details?	
? Does the applicant experience problems with continence?	
Newly diagnosed < 6 months	Postpone
Asymptomatic and treatment free, well controlled or operated with no complications or limitations	Standard
Multiple or frequent flares, multiple surgeries with significant weight loss, regular steroid use or fecal incontinence	Decline
Crutches: current use	Decline
Cystic Fibrosis: An inherited disease that affects the respiratory and digestive system	Decline
Cystitis: An infection or inflammation of the urinary bladder or urethra	Standard**
Defibrillator: 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 showing complete recovery and stability. No complicated or significant underlying cardiac condition	Standard
Deep Vein Thrombosis (DVT): A condition where there is a blood clot in a deep vein	
? Date of the event	
? Is the applicant on any medication? Name(s)?	
? Has the applicant been hospitalized? Date(s)?	
? How many total clots/embolisms has the applicant had? Date(s)?	
? Has the applicant had a Greenfield Filter implanted? Date?	
? Does the applicant have any circulatory or respiratory disorders?	
? Is the applicant disabled or experience any limitations in activities or work?	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Less than < 6 months since event	Postpone
Single episode, complete recovery, no underlying blood disorder or limitations > 6 months. No co-morbidities such as Diabetes or Circulatory disorders	Standard
Multiple events, complications or limitations, with a Greenfield Filter, or with underlying other blood disorder such as polycythemia vera, etc.	Decline
Degenerative Disc Disease: The gradual deterioration of the disc between the vertebrae.	See Osteoarthritis
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	See Osteoarthritis
Dementia: Cognitive deficit, including memory impairment	Decline
Depression: A mental disorder marked by altered mood - *A face to face assessment may be required*	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? Has this been diagnosed as situational?	
? Has the applicant been hospitalized for depression, anxiety, or other mental illness? Date(s)/Details?	
? Has the applicant ever received electroconvulsive shock therapy?	
? Does the applicant have any history of anxiety or other mental illness disorders? Details?	
Situational in nature, no use of antipsychotic medications, stable with no restrictions or functional limitations	Standard**
Mild includes generalized anxiety disorder, requiring minimal medications or psychotherapy, no related periods of confinement or disability, > 6 months ago	Standard
Moderate, single episode only, may include short period of confinement, well adjusted with no ECT, no further treatment required other than maintenance medication , > 1 year ago	Class 1
Multiple hospitalizations, restrictions or limitations, electroconvulsive therapy or unstable	Decline
Diabetes: A lifelong disease of high blood sugar caused by too little insulin, resistance to insulin, or both	
? Date of diagnosis?	
? What type of diabetes does the applicant have (Type I, Type II)?	
? Is the applicant taking any medications? Name(s)	
? Is the applicant taking any insulin? Type, units/Day	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
? Does the applicant have any history of circulatory or heart disorder? Details	
? Does the applicant use tobacco?	
? What was the applicant's most recent glycohemoglobin A1c reading? Date?	
? Does the applicant have any history of neuropathy (numbness, pain, or tingling of the extremities), nephropathy (kidney complications), or retinopathy (visual complications)? Details?	
? Has the applicant had any amputations? Details?	
Non-insulin dependent, onset 12 months ago, well controlled by diet or oral medication, no tobacco or complications*, onset age 31 or above, HgA1c at or less than 8.0	Standard
Non-insulin dependent, onset 12 months ago, well controlled by diet or oral medication, no complications*, onset age 31 or above, HgA1c at or less than 8.0, with tobacco within the last 36 months	Class 2
With any insulin use, with complications or otherwise	Decline
*Complications include, but are not limited to: Atrial Fibrillation, Coronary Artery Disease (CAD, Heart Attack, Angina), Cerebrovascular Disease (Stroke/CVA/TIA), Peripheral Vascular Disease (PVD), Kidney Disease, Nephropathy, Neuropathy, and Retinopathy.	
Dialysis: all cases	Decline
Disorientation: all cases	Decline
Diverticulitis: An inflammation of an abnormal pouch in the intestinal wall, usually found in the colon	
Well controlled, asymptomatic, diet or medication managed	Standard**
Surgically corrected, complete recovery and release from care, no subsequent flares and no colostomy required	Standard**
Flare(s) requiring > 1 hospitalization, complete recovery, >3 months	Standard
Diverticulosis: An asymptomatic, abnormal pouch in the intestinal wall	Standard**
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 for purposes other than those for which it is normally intended, or in a manner or quantities other than directed	
Over 3 years, no residual, no relapse	Standard
Within 3 years or with ongoing use or relapse	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Dupuytren's Contracture: A painless thickening and contracture of tissue beneath the skin on the palm of the hand	Standard**
Dwarfism: Abnormally short stature with abnormal body proportions, caused by a deficiency of growth hormone	Decline
Dyspepsia: Imperfect or painful digestion	Standard**
Dystonia: Involuntary movements and prolonged muscle contractions that result in twisting body motions, tremors, and abnormal posture	Decline
Ectopic beats (includes PVC, VT)	
PVC, mild to moderate, stable with or without medication, no complications	Standard
Otherwise or Ventricular Tachycardia (VT)	Decline
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 lung	See COPD
Endarterectomy: Surgical excision of the inner lining of an artery that is clogged with atherosclerotic build up	See Carotid Artery Disease
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	Standard
Esophagitis: Inflammation of the esophagus	Standard**
Esophageal Varices: A dilation of an esophageal vein	Decline
Epilepsy: A disorder of the central nervous system characterized by periodic loss of consciousness with or without convulsions.	
Absence, Jacksonian, Petit mal or Simple partial with last attack > 12 months ago	Standard
Grand mal, well controlled with last attack > 3 years	Standard
Grand mal, last attack > 12 months, but < 3 years	Class 1
Otherwise	Decline
Factor V leiden: An inherited mutation in factor V that causes a hypercoagulability disorder.	
With no history of clots and currently on anticoagulation therapy	Class 1
With history of clot(s), not on anticoagulation therapy or otherwise	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Falls: To come down freely under the influence of gravity – (medical records may be required if within 2 years)	
One fall, > 6 months ago, no other under underlying risk factors	Standard
Multiple Falls (three or more within the last 24 months), or single fall < 6 months	Decline
Fatty Liver: An accumulation of fat within the liver cells	
Asymptomatic, treatment-free, normal liver function tests	Standard
Abnormal liver function tests or regular alcohol use	Decline
Feeding Tube: A medical device used to provide nutrition in individuals who cannot do so via the normal oral route	Decline
Fibromyalgia: Chronic pain in muscles and soft tissue surrounding joints	See Osteoarthritis
Forgetfulness: Inability to remember something previously known or learned – *A face to face assessment may be required*	
Asymptomatic, now resolved with normal neuropsychological workup, > 24 months	Standard
Current, etiology unknown or otherwise	Decline
Fractures: Sudden breaking of bone	
? What was the date of the fracture(s)?	
? What bone(s) were affected?	
? What was the cause of the fracture(s)?	
? Does the applicant have any history of osteoporosis? T-score/Date?	
? Has the applicant fully recovered from the fracture and been released from care?	
? Does the applicant use any type of assistive device (cane, walker, etc.)? Details?	
? Is the applicant disabled or do they experience any limitations in activities or in the workplace? Details?	
Single fracture, > 3 months, full recovery no residuals	Standard
Multiple traumatic fractures, > 6 months, no complicated factors such as osteoporosis, fully recovered and released from care	Standard
With complications or with a history of osteoporosis	Decline
Gallstones: Calcium deposits formed in the gallbladder or bile duct	Standard**

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Glaucoma: A condition of increased pressure inside the eye	
No visual impairment	Standard
Otherwise	See Blindness
Glomerulonephritis: A group of kidney diseases caused by inflammation of the internal kidney structures	
? Date of diagnosis?	
? Was condition diagnosed as acute or chronic? Details?	
? What type of treatment did the applicant receive? Details?	
? Has the applicant ever undergone dialysis? Date?	
? Has the applicant ever been hospitalized for kidney problems? Date(s)/Details?	
? What were the results of the last blood workup (Creatinine, BUN)? Date(s)/Details?	
Acute in nature, > 6 months, complete recovery, normal kidney function tests, no kidney damage	Standard
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	See Diabetes
Goiter: Enlargement of the thyroid gland that is not associated with inflammation or cancer	Standard**
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 with minimal symptoms	Standard
Severe or with multiple flares, disabling causing limitations or inability to do activities	Decline
Greenfield Filter: A multi-strutted vena caval filter for preventing pulmonary embolism and deep vein thrombosis	Decline
Guillian-Barre Syndrome: A disorder involving progressive muscle weakness or paralysis	
Full recovery, no residuals or recurrence, > 6 months	Standard
Chronic in nature, relapsing, residual weakness, muscle atrophy, or otherwise	Decline
Heart Attack: Sudden interruption or insufficiency of the supply of blood to the heart, typically resulting from occlusion or obstruction of a coronary artery.	See Coronary Artery Disease

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Heart Murmur: An abnormal sound in the heart beat	
Asymptomatic, considered functional or benign, non-progressive	Standard
Heart Valve Disease: The heart valves can malfunction either by leaking or by failing to open adequately; either problem can interfere with the heart's ability to pump blood	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? Has the applicant ever been hospitalized for a heart or circulatory disorder? Date(s)/Details?	
? Has valvular surgery been performed? Date(s)/Details?	
? When was the last echocardiogram performed? Details?	
? Does the applicant experience shortness of breath or limitations in activities or exercise? Details?	
Mild, asymptomatic, treatment free	Standard
Single valve replaced, > 6 months ago, fully functional, no co-morbidities or complications (such as diabetes, stroke/tia/cva)	Class 1
Double valve replacement, > 6 months ago, in combination with mild hypertension and tobacco use, no additional complications or co-morbidities	Class 2
Otherwise	Decline
Hemochromatosis: A genetic disease that results in excess iron deposits throughout the body	Decline
Hepatitis: An inflammation of the liver	
? What type of Hepatitis?	
? What type of treatment has the applicant received? Date(s)/Details?	
? Has the applicant ever been hospitalized? Date(s)/Details?	
? What were the results of the last blood workup? Date?	
? Does the applicant use alcohol? Frequency/Amount?	
Type A, acute episode, fully resolved, > 3 months	Standard
Type B, > 12 months ago, or resolved with normal liver function tests	Standard
Type B, Chronic Active, under current treatment	Decline
All other types C, D, E, active or chronic, or under current treatment	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Herniated Disc: A disc that, due to injury or disease, bulges outside its normal area, causing pain and limiting function	See Osteoarthritis
Hodgkin's Disease: A malignancy found in the lymph nodes, spleen, liver, and bone marrow	See Cancer
Home Health Care Services: Current or within 12 months	Decline
Human Immunodeficiency Virus (HIV): The virus that affects the immune system and causes the disease know as AIDS	Decline
Huntington's Chorea: An inherited condition characterized by abnormal body movements, dementia and psychiatric problems	Decline
Hydrocephalus: A disorder associated with excessive fluid in the brain	Decline
Hypertension: Higher than normal blood pressure	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? What are the applicant's average blood pressure readings?	
? Has the applicant ever been hospitalized for hypertension or hypertensive complications? Date(s)/Details?	
? Does the applicant have any other heart or circulatory problems? Details?	
? Does the applicant have any kidney problems? Details?	
Average 6 month Blood Pressure readings < 140/85	Standard**
Mild, stage 1 average 140-159/90-99	Standard
Moderate, stage 2 average 160-179/100-109	Class 2
Severe, >180/>110, or with renal involvement or other complications	Decline
Hyperthyroidism: An imbalance in metabolism that occurs from overproduction of thyroid hormones	
Hyperactive, with or without goiter, nodular or multi-nodular, well controlled and stable, > 6 months	Standard**
Control not established	Postpone

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Hypothyroidism: A condition in which the thyroid gland fails to produce enough thyroid hormone	
Hypoactive, no history of myxedema, with or without goiter or nodules, well controlled, > 3 months ago	Standard**
With history of myxedema, fully resolved, no history of coma or psychosis, on replacement therapy, > 6 months ago	Standard**
Idiopathic Thrombocytopenia Pupura (ITP): A bleeding disorder characterized by low platelet counts resulting from platelet destruction by the immune system	
? Date of diagnosis?	
? What type of treatment has the applicant received? Date(s)/Details?	
? Is the applicant taking any steroids? Dosage?	
? Has the applicant ever had a splenectomy? Date?	
? Has the applicant ever been hospitalized for a blood related disorder? Date(s)/Details?	
? What was the applicant's last platelet count?	
With splenectomy, > 12 months, full recovery, no residuals and no ongoing corticosteroid use	Standard
With splenectomy, > 12 months, full recovery, no residuals with continued steroid use $\leq$ 10 mg	Class 2
Without surgery, single episode, > 12 months ago, full recovery	Standard
Without surgery, two or more episodes	Class 2
Without surgery, two or more episodes with corticosteroid use, or otherwise	Decline
Incontinence: The inability to retain urine or feces	
? Type of incontinence (stress, urge urinary, bowel)	
? Is the applicant taking any medication? Name(s)?	
? Has the applicant undergone surgery? Date(s)?	
? Has the applicant been advised to have surgery? Details?	
? Does the applicant require the use of protective undergarments? Details?	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Stress or urgency only (urinary), well-controlled, self managed, minimal leakage on exertion, > 12 months	Standard
If related to disease	See Specific Disease
Bowel	Decline
Intermittent Claudication: Pain and cramping in the calf muscles aggravated by walking and caused by an insufficient supply of blood.	Refer to Peripheral Arterial Disease
Interstitial Cystitis: A condition causing recurring discomfort or pain in the bladder and surrounding pelvic region	
Successfully treated with oral medication, no limitations	Standard
Otherwise	Decline
Irritable Bowel Disease: A condition of abnormally increased, spontaneous movement of the small and large intestine	See Colitis
Joint Replacement: The replacement of a joint – *A face to face assessment may be required*	
Treatment free, no assistive devices, > 3 months for knee, > 6 months for other weight bearing joint (such as hip)	Standard
Currently receiving physical therapy, not released from care, limited activity or use of assistive devices	Decline
Kidney Disease, Chronic: A condition which occurs when one suffers from gradual loss of kidney function	
Stage 1 and 2, no diabetes, blood pressure average less than 145/85, stable with near normal kidney function tests, stable > 12 months	Standard
Stage 3, 4, 5, or any stage in combination with diabetes or blood pressure readings >145/85	Decline
Kidney Failure: Failure of the kidney to perform its essential functions	Decline
Kyphosis: Abnormal curvature of the spine	See Osteoporosis
Labyrinthitis: An ear disorder involving inflammation of the canals of the inner ear resulting in dizziness	See Meniere's Disease
Leukemia: A malignancy of the blood forming cells in the bone marrow	See Cancer
Lupus (Discoid): A chronic disease of the skin characterized by remissions and exacerbations of a scaling, red, macular rash	
? Date of diagnosis?	
? Has a skin biopsy been performed? Details?	
? Is the applicant taking any medication? Name(s)?	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
No treatment with oral medications, > 12 months	Standard
New onset < 12 months	Postpone
Lupus (Systemic Lupus Erythematosus): A chronic inflammatory auto-immune disorder that may affect organ systems including the skin, joints, and internal organs	Decline
Lyme Disease: A multi-system disorder caused by bacteria transmitted by a tick	
Asymptomatic, no limitations, treatment free, no neurological or cardiac involvement, > 24 months	Standard
Symptomatic, neurological, or cardiac impairment	Decline
Lymphoma: A usually malignant lymphoid tumor or growth	See Cancer
Macular Degeneration: A disorder that affects the macula causing decreased visual acuity and possible loss of central vision	See Blindness
Major Depression: A recurrent emotional state characterized by feelings of persistent sadness, worthlessness, loss of hope, and loss of interest in usual activities	See Depression
Marfan Syndrome: A hereditary disorder of the connective tissue that affects the skeletal system, cardiovascular system, eyes, and skin	Decline
Memory Loss: The inability to remember or recall bits of information or behavioral skills	
>2 years ago with cognitive impairment ruled out and with no history of head trauma, no CVA/Stroke/TIA, normal MRI and CT of the brain, and with normal neuropsychological workup – F2F required	Standard
Current, etiology unknown, or otherwise	Decline
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 or ringing	
Fully functional, mild, no limitations, > 6 months	Standard
Recent diagnosis, hospitalization, or neurological systems	Postpone
Meningioma: A tumor of the protective lining of the brain and spinal cord which is usually benign, some may be malignant (if malignant see Cancer)	See Tumor
Mental Retardation: Below average general intellectual function with associated deficits in behavior that occurs before age 18	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Migraine(s): A disorder involving repeated or recurrent headaches, associated with temporary changes in the diameter of the blood vessels in the head.	
Infrequent, non-debilitating, no restrictions or limitations	Standard**
Medically managed with multiple medications with no restrictions or limitations	Standard
Migraine with temporary blindness, aphasia or paresthesia with > 2 episodes within the last 24 months, with evidence of chronic ischemic changes to the brain indicated on an MRI, with small vessel disease or otherwise	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 or currently being treated	Standard
Mixed Connective Tissue Disease: An overlap of three connective tissue disease (SLE, Scleroderma and Polymyositis)	Decline
Multiple Myeloma: A cancer of the bone	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 chronic muscle weakness of voluntary muscles	Decline
Myasthenia Gravis: A disorder characterized by chronic muscle weakness of voluntary muscles	
Ocular only, stable, > 12 months, steroids not to exceed 10 mg	Class 1
Otherwise	Decline
Narcolepsy: A sleep disorder associated with uncontrollable sleepiness and frequent daytime sleeping	
>12 months since diagnosis, well controlled, non-progressive	Standard
Recently diagnosed or otherwise	Postpone
Nephritis: Inflammation of the kidneys	
Onset or diagnosis within 12 months	Postpone
Onset or diagnosis > 12 months, resolved with normal kidney functions	Standard
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	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Neuropathy: A disease of the nerves	
? Date of diagnosis?	
? What is the cause of neuropathy?	
? Is the applicant taking any medication? Name(s)?	
? Does the applicant have diabetes, circulatory or back problems or history of significant alcohol use?	
? Does the applicant use any assistive devices?	
Mild, non limiting, no history of diabetes, no significant alcohol use	Standard
Related to diabetes, alcohol use, significant circulatory disorder, or otherwise	Decline
Nursing Home Confinement: Current or within 12 months	Decline
Optic Neuritis/Retrobulbar Neuritis: inflammation of the optic nerve	
Case known	Refer to Cause
Cause unknown, one attack, full recovery > 6 months ago	Standard
Cause unknown, two or more attacks, full recovery, no other evidence of demyelinating disease within 1 – 3 years	Class 1
Cause unknown, two or more attacks, full recovery, no other evidence of demyelinating disease > 3 years	Standard
Otherwise, or in combination with demyelinating disease	Decline
Organic Brain Syndrome: Any of a large group of acute and chronic mental disorders associated with brain damage or impaired cerebral function	Decline
Osteoarthritis: A chronic musculoskeletal disease causing deterioration of the joint cartilage and the formation of new bone at the margins of the joint	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? What joints are affected?	
? What is the severity (mild, moderate, severe)?	
? Has the applicant received any steroid injections? Details?	
? Any use of assistive devices? Details?	
? Does the applicant experience shortness of breath or limitations in activities or exercise? Details?	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Mild, no limiting disability, treated with aspirin or nonsteroidal anti-inflammatory drugs, occasional pain	Standard
Moderate, occasional mild limitations, chronic pain, AM stiffness, occasional corticosteroids not to exceed 10 mg	Class 1
Severe, treatment with > 10 mg corticosteroids or DMARDs, functional limitations or use of assistive devices	Decline
Osteomyelitis: An acute or chronic bone infection	
Acute, due to vascular insufficiency, fully recovered	Standard
Present, chronic or otherwise	Decline
Osteopenia: Lower than normal bone density with T scores between -1.0 and -2.5	
Stable or improving T scores > -2.5, preventative treatment	Standard
With multiple fractures, multiple falls, chronic pain or functional limitations	Decline
Osteoporosis: The progressive loss of bone density with T scores at -2.5 or lower	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? What were the T-scores of the last bone density study? Date/Details?	
? Has the applicant had any spinal or other fractures? Date(s)/Details?	
? Does the applicant do any form of weight bearing exercise? What and how often?	
Stable or improving T scores of -2.5 to -3.5, no regular steroid use, no Compression fractures, no hip fracture, no kyphosis, and not significantly Underweight.	Class 1
T scores less than -3.5, steroid use, compression fracture, hip fracture, kyphosis, use of cane, falls, Limitations, or significantly underweight.	Decline
Oxygen: current use	Decline
Pacemaker: Implanted battery powered device that electronically stimulates the heart to contract	
Asymptomatic, no restrictions or limitations, normal cardiac output, no complications, > 3 months	Standard
< 3 months	Postpone

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Paget's Disease: A metabolic bone disease that involves bone destruction and re-growth that results in deformity	
? Date of diagnosis?	
? Is the applicant receiving any treatment? Details?	
? Area affected?	
? Have there been any fractures? Date(s)/Details?	
? What were the results of last blood workup? Date/Results?	
? Any associated bone pain? Details?	
Of the Breast	See Cancer
Of the Bone, asymptomatic, no limitations, normal lab values, > 24 months	Standard
Active, evidence of fractures with bone pain, or elevated lab values	Decline
Pancreatitis: An inflammation or infection of the pancreas	
? Date of diagnosis?	
? Chronic or Acute?	
? Is the applicant currently taking medication? Name(s)?	
? Has the pancreatitis completely resolved?	
? Date and details from last lab work up	
Acute, full recovery with no residuals, no secondary Diabetes or alcohol abuse, >6 months	Standard
Otherwise	Decline
Paralysis: Temporary suspension or permanent loss of function, especially loss of sensation or voluntary motion	Decline
Paraplegia: Paralysis of the lower portion of the body and of both legs	Decline
Parkinson's Disease or Parkinsonism: A chronic nervous disease characterized by a fine, slowly spreading tremor and difficulty with walking, movement and coordination	Decline
Pericarditis: Inflammation of the pericardium, the sac covering the heart	
Acute, full recovery, no residuals, > 6 months	Standard
Recurrent	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Peripheral Arterial or Peripheral Vascular Disease: A circulatory disease of the peripheral blood vessels that is characterized by narrowing and hardening of the arteries that supply blood to the legs and feet	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? Has the applicant used tobacco within the last 36 months?	
? Is the applicant able to walk 4 blocks or more without pain, cramping or swelling in the legs?	
? Has the applicant had or been recommended to have leg surgery? Date(s)/Details?	
? Does the applicant have diabetes, heart or other circulatory disorders? Details?	
? Has the applicant experienced any changes in the skin color, swelling or ulcers on the lower legs? Details?	
? Any restriction or changes that have been required to activities or work?	
Mild, no tobacco use, stable with no restrictions or limitations	Standard
Moderate or Severe, Tobacco user, history of diabetes, heart or other circulatory disorder	Decline
Pituitary Insufficiency: A condition in which the pituitary fails to produce enough of one or more hormones	
Well controlled on hormonal therapy, > 2 years ago	Class 1
Otherwise	Decline
Polyarteritis Nodosa: A form of necrotizing vasculitis involving small to medium-sized arteries with signs and symptoms resulting from infarction and scarring of the affected organ system	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: A blood disorder characterized by abnormal increase in red blood cells resulting from increased blood cell production by the bone marrow	
? Date of diagnosis?	
? Is the applicant currently taking medication? Name(s)?	
? When was the applicant's last phlebotomy? Date?	
? Has the applicant ever had a TIA, blood clot or gastrointestinal bleed? Details?	
? Has there been any indication or progression to Leukemia? Details?	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Well controlled, asymptomatic, diagnosed > 12 months ago with no history of circulatory disorder	Standard
Primary	Class 2
Secondary	Refer to underlying Disease
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	
? Date of diagnosis?	
? Date of last flare? Date?	
? Is the applicant taking any medication? Name(s)?	
? Is the applicant disabled or experience any restrictions or limitations on hobbies or work? Details?	
Present > 12 months, well controlled and stable, no functional limitations	Standard
Symptomatic, regular narcotic pain med use or otherwise	Decline
Polymyositis: Inflammatory muscle disorder in which muscle tissue becomes inflamed and deteriorates, causing weakness and pain.	Decline
Polyps (benign): A growth that projects, usually on a stalk; commonly found in vascular organs such as the nose, uterus, colon and rectum	Standard**
Pregnancy:	
Currently pregnant	Postpone
Successful delivery, no residual complications, released from care >3 months	Standard**
Premature Atrial Contractions (PACs): An early or premature heartbeat originating from the atria	See Atrial Fibrillation
Premature Ventricular Contractions (PVCs): An early or premature heartbeat originating from the ventricle	See Atrial Fibrillation
Prostatic Hypertrophy (Benign): A non-malignant enlargement of the prostate due to excessive growth of prostate tissue	Standard**
Prostatism: Any condition of the prostate that interferes with the flow of urine	Standard**
Pseudodementia: A syndrome that mimics dementia, but not due to organic brain disease.	Decline
Psoriatic Arthritis: Arthritis associated with psoriasis	See Rheumatoid Arthritis

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Psychosis/Psychotic Disorder: A general term referring to a loss of contact with reality	Decline
Pulmonary Embolism: A blockage of any artery in the lungs by a blood clot or an unknown substance	
? Date of the event?	
? Is the applicant on medication? Name(s)?	
? Has the applicant been hospitalized? Date(s)?	
? How many total clots/embolisms has the applicant had? Date(s)?	
? Has the applicant had a Greenfield Filter implanted? Date?	
? Does the applicant have any circulatory or respiratory disorders or complications?	
? Is the applicant disabled or experience any restrictions or limitations on hobbies or work? Details	
Complete recovery, cause known (underwrite based on cause), no underlying blood disorder, > 6 months	Standard
In combination with a Greenfield filter, underlying blood disorder or with complications	Decline
Pulmonary Fibrosis: A respiratory condition of unknown cause, characterized by scarring and inflammation of the deep lung tissue	
Localized incidental finding on chest x-ray, normal pulmonary function tests, no underlying COPD or emphysema, > 6 months	Standard
In combination with underlying COPD or emphysema, symptomatic, chronic steroid use, oxygen use, congestive heart failure, or otherwise	Decline
Pulmonary Hypertension: A chronic deadly disease characterized by increased pulmonary pressure and right-sided heart failure	
Incidental finding, mild, asymptomatic, treatment free and stable for > 12 months	Standard
Symptomatic, under treatment or otherwise	Decline
Pyelitis: Inflammation of the pelvis or the kidney caused by bacterial infection.	See Nephritis
Quadriplegia: Paralysis of all four extremities and usually the trunk, caused by injury to the spinal cord	Decline
Raynauld's Disease: Condition that causes restricted blood flow in the hands and feet.	
Onset > 2 years ago, stable, full use of extremities, non-progressive, no tobacco use and no Diabetes	Standard
In combination with tobacco use, diabetes or otherwise	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Raynauld'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 excessive strong cold or strong emotion	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? Does the applicant have any history of Lupus, Scleroderma or Connective Tissue Disease? Details?	
? Has the applicant had any amputations? Details?	
Asymptomatic, treatment free	Standard**
Stable, no systemic involvement or functional limitations	Standard
Systemic involvement, functional limitations or otherwise	Decline
Reflex Sympathetic Dystrophy (RSD): a painful disorder that involves burning pain, swelling, and motor and sensory disturbances especially of an extremity, and is often considered a type of complex regional pain syndrome in which a peripheral nerve injury has not been identified.	Decline
Respirator: All cases	Decline
Restless Leg Syndrome: Defined as a distressing need or urge to move the legs, usually accompanied by an uncomfortable sensation in the legs that is brought on by rest.	
New onset, well controlled, significant neurological disorders have been ruled out	Standard
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.	
Single episode, asymptomatic, no functional or cognitive impairments, > 12 months	See Blindness
In combination with diabetes, CVA/TIA/Stroke, white matter changes on MRI, etc.	Decline
Retinal Detachment: A movement of the retina from the outer wall of the eyeball.	
Fully recovered, not due to disease	Standard
Otherwise	Decline
Retinitis Pigmentosa: A progressive degeneration of the retina in the eye that affects night vision and peripheral vision – *A face to face assessment may be required*	
After blind 12 months, fully functional	See Blindness
Not yet blind or blind less than 12 months	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Rheumatoid Arthritis: A chronic, inflammatory, systemic disease that primarily affects the joints and surrounding tissues but also affects other organ systems within the body	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? What joints are affected?	
? What is the severity (mild, moderate, severe)?	
? Has the applicant received any steroid injections? Details?	
? Any use of assistive devices? Details?	
? Does the applicant experience shortness of breath or limitations in activities or exercise? Details?	
Mild, no limiting disability, treated with aspirin or nonsteroidal anti-inflammatory drugs, occasional pain	Standard
Moderate, occasional mild limitations, chronic pain, AM stiffness, occasional corticosteroids not to exceed 10 mg	Class 1
Severe, treatment with > 10 mg corticosteroids or DMARDs, functional limitations or use of assistive devices	Decline
Sarcoidosis: A disease of unknown cause in which inflammation consisting of granulomas occurs in lymph nodes, lungs, liver, eyes, skin, and other tissue	
? Date of diagnosis?	
? What areas of the body are affected?	
? Is the applicant taking any medication? Name(s)?	
? If lung involvement, have pulmonary function tests been performed? Date/Results (FEV1 & FVC%)?	
Inactive, fully functional, > 6 months, treatment free, no residuals	Standard
Multiple sites, currently under treatment, symptomatic, functional limitations, or otherwise	Decline
Schizophrenia: A group of psychotic disorders characterized by disturbances in thought, perception, affect, behavior, and communication lasting longer than 6 months	Decline
Sciatica: A condition involving impaired movement and/or sensation in the leg, caused by damage to the sciatic nerve	
Fully functional, asymptomatic, normal range of motion, > 3 months	Standard

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Scleroderma: A diffuse connective tissue disease characterized by changes in the skin, blood vessels, skeletal muscles, and internal organs	Decline
Sclerosing Cholangitis: Chronic disease in which it is believed that the immune system fails to recognize the cells that compose the bile ducts as part of the same body, and attempts to destroy them.	Decline
Scoliosis: A lateral or sideways curvature of the spine	
? Is the applicant on any medication? Name(s)?	
? Does the applicant have osteoporosis? If so, what is the T-Score?	
? Has the applicant undergone any physical therapy or back surgery? Date(s)/Details?	
? Does the applicant have any respiratory problems? Details?	
Mild to Moderate, no functional impairment, no further progression, no limitations in ADLs or IADLs and no secondary impairments (i.e. Osteoporosis or Emphysema)	Standard
Severe, with limitations or any respiratory compromise, disabling, functional limitations	Decline
Scooter: A motorized personal vehicle which assists with mobility	Decline
Shunt: A surgically created passage between two natural channels	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 regular follow up	Standard
Un-operated, asymptomatic with no underlying cardiovascular disease	Standard
Un-operated with dysrhythmia, or symptomatic	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
Sickle Cell Trait: A hereditary condition, usually harmless and without symptoms, in which an individual carries only one gene for sickle cell anemia	Standard
Sjogren's syndrome: A systemic, inflammatory disorder characterized by dry mouth, decreased tearing, and other mucous membranes often associated with auto-immune rheumatic disorders	See Rheumatoid Arthritis

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Sleep Apnea: Repeated, prolonged episodes of cessation of breathing during sleep	
? Date of diagnosis?	
? Does the applicant use a CPAP or BIPAP?	
? Does the applicant require the use of supplemental oxygen with their breathing device?	
? Have pulmonary function tests been performed? Date/Results (FEV1 & FVC%)?	
? Does the applicant use tobacco or have any other respiratory disorders? Details?	
Mild to Moderate, no medical intervention or surgery recommended, stable	Standard
With respiratory compromise or failure or non-compliance with treatment, oxygen use or otherwise	Decline
Social Security Disability	Decline
Spinal Stenosis: Any narrowing of the spinal canal that caused compression of the spinal nerve cord. ***Handle as moderate arthritis***	See Osteoarthritis
Spondylolistesis: Forward slippage of a lumbar vertebra below it	See Osteoarthritis
Stair Lift: Assistive device to help transport people up and down stairs	Decline
Stroke (CVA): Occurs when the blood supply to any part of the brain is interrupted, resulting in death and loss of brain function and tissue	
? Date of event?	
? Single or Multiple Occurrence?	
? Is the applicant on any medication? Name(s)?	
? Any history of diabetes, heart arrhythmias, congestive heart failure? Details?	
? Any residual impairment (i.e. slurred speech, mobility problems, weakness, etc.)? Details?	
? Any tobacco use within the last 36 months?	
Single episode, > 24 months ago, full recovery, no residuals, no atrial fibrillation or diabetes, no tobacco use, good BP control (average less than 145/85)	Standard
Single event < 24 months	Decline
Otherwise or in combination with Diabetes or other circulatory disorders such as heart disease or peripheral arterial or vascular disease	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Subdural Hematoma: A collection of blood on the surface of the brain – *A face to face assessment may be required*	
Complete recovery, no restrictions, functional or cognitive limitations, > 12 months	Standard
New onset, < 12 months	Postpone
Diagnosed as chronic, with restrictions, functional or cognitive limitations	Decline
Syncope: A transient loss of consciousness due to inadequate blood flow to the brain	
? Date of diagnosis?	
? What is the cause of the syncope?	
? What type of workup has the applicant undergone?	
? Is the applicant receiving any kind of treatment? Details?	
? Any combination of heart or neurological disorders present? Details?	
? How many episodes has the applicant had?	
Single episode > 6 months ago with no residuals or recurrence	Standard
Unknown etiology/cause, with our without chronic or recurring episodes	Decline
TENS (Transcutaneous electrical nerve stimulation) Unit: A device that uses electrical current produced by a device to stimulate the nerves for therapeutic purposes	Decline
Thalassemia Major: An inherited form of hemolytic anemia, characterized by red blood cell production abnormalities	Decline
Thalassemia Minor: This is the carrier form of the disease and they usually don't have symptoms	Standard
Thrombocythemia: A blood disorder characterized by an increase in the number of blood platelets	
? Date of diagnosis?	
? Is the applicant taking any medication? Name(s)?	
? What are the applicant's platelet levels?	
? Does the applicant require phlebotomies? How frequent?	
? Any history of stroke/cva/tia, heart or circulatory disorders? Details?	
? Any use of tobacco?	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Normal platelet counts, asymptomatic, treatment free, no tobacco use, > 6 months	Standard
In combination with tobacco use, stroke/cva/tia, diabetes, otherwise	Decline
Transient Global Amnesia: Characterized by an episode of amnesia and bewilderment that lasts for several hours; person is otherwise alert and intellectually active.	
? Date of episode?	
? Any tests performed such as MRI/CT of brain, carotid studies, heart studies? Details/Results?	
? Does the applicant have any residual symptoms such as memory loss, confusion or dizziness? Details?	
Single episode, well investigated, no underlying pathology evident, full recovery with no residuals > 24 months	Standard
Multiple episodes, residuals, physical limitations or otherwise	Decline
Transient Ischemic Attack: A brain disorder caused by a temporary disturbance of blood supply to an area of the brain, resulting in sudden, brief decrease in brain functions	See Stroke
Transplant: An operation in which tissue or an organ is transplanted	
Corneal: > 3 months since surgery and release from care with no functional limitations	Standard**
Heart, Lung or Kidney: > 2 years ago with no rejection and with normal function can be considered, but call underwriting for prequalification	
Liver or otherwise	Decline
Transverse Myelitis: A neurological disorder caused by inflammation across both sides of one level or segment, of the spinal cord	
Full recovery with no functional limitations or residuals, > 12 months	Standard
Otherwise	Decline
Tremor: An involuntary type of shaking movement	
? Date of diagnosis	
? Is the applicant taking any medication or had any surgical procedures? Details?	
? Has the applicant had a neurological evaluation? Date?	
? Has there been any progression of the tremor? Details?	
? Are there any restrictions or limitations the tremor has put on day to day activities, work or hobbies? Details?	

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Essential, Familial or Senile only; other central nervous disorder and Parkinson's ruled out	Standard
Otherwise	Decline
Trigeminal Neuralgia: A chronic pain condition that affects the trigeminal nerve, which carries sensations from your face to your brain	
Single occurrence 6 months ago, no symptoms, no ongoing treatments	Standard
Multiple flares, ongoing treatment/Anticonvulsants/Steroid use, residuals or limitations	Decline
Tuberculosis: A contagious bacterial infection; the lungs are primarily involved, but the infection can spread to other organs	
Inactive, no residual impairment, restrictions or limitations, > 6 months	Standard
Inactive with residual impairment	See COPD
Active	Decline
Tumor (Benign): An abnormal growth of tissue resulting from uncontrolled, progressive multiplication of cells and serving no physiological function	
Asymptomatic, proven benign, no surgery anticipated	Standard
Symptomatic, not proven benign, or surgery anticipated	Postpone
Brain, no residuals, cognitive assessment required after surgery > 2 years ago	Class 1
Otherwise	Decline
Ulcerative Colitis: A chronic, episodic, inflammatory disease of the large intestine and rectum characterized by bloody diarrhea	See Colitis
Ventilator: A machine that controls or assists breathing; a respirator	Decline
Ventricular Tachycardia: A rapid heartbeat originating from the lower chambers of the heart	See Ectopic Beats
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	See Meniere's Disease
Von Willebrand's Disease: A congenital bleeding disorder	Decline
Von Recklinghausen's Disease: An autosomal dominant disease characterized by numerous neurofibromas and by spots on the skin and often by developmental abnormalities	Decline
Waldenstronm's Macroglobulinemia: A cancer of white blood cells known by B lymphocytes	Decline

Condition/Diagnosis/Treatment/Benefits/Services/Devices/Appliances	Decision ** possible preferred
Walker: A frame device used to support someone	Decline
Wegener's Disease Granulomatosis: A rare disorder which causes inflammation of blood vessels in the upper respiratory tract, lungs and kidneys	Decline
Wheelchair: Current	Decline
Whipple's Disease: A rare disorder with widespread symptoms that causes malabsorption	Decline
Wilson's Disease: A rare 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
Wolff-Parkinson's-White Syndrome: Episode of rapid heart rate caused by abnormal electrical pathways in the heart	
Asymptomatic, no underlying cardiac conditions, treatment free, > 12 months	Class 1
Uncontrolled, episodes of chest pain, shortness of breath, syncope, or near-syncope or dizziness	Decline

COMMON NARCOTIC PAIN MEDICATIONS

Generic	Brand Name
Acetaminophen and Codeine	Capital with Codeine, Margesic #3, Phenaphen with Codeine, Tylenol with Codeine
Butalbital, Acetaminophen, and Caffeine	Femcet, Fioricet, Esgic, Esgic-Plus
Butalbital, Aspirin, and Caffeine	Fiorinal
Butalbital, acetaminophen, caffeine, and codeine	Fioricet with Codeine
Hydrocodone and Acetaminophen	Allay, Anexsia 5/500, Anexsia 7.5/650, Dolacet, Dolagesic, Duocet, Hycomed, Hydrocet, Hydrogesic, HY-PHEN, Lorcet 10/650, Lorcet-HD, Lortab, Panacet 5/500, Panlor, Stagesic, T-Gesic, Ugesic, Vicodin, Zydone
Hydrocodone and Ibuprofen	Hydrostal IR, Vicoprofen
Hydromorphone	Dilaudid, Dilaudid-5, Dilaudid-HP, Hydrostat IR
Meperidine	Demerol
Methadone	Dolophine, Methadose
Morphine	Astramorph PF, AVINZA, Duramorph, Kadian, M S Contin, MSIR, Oramorph SR, Rescudose, Roxanol
Oxycodone	OxyContin, Roxicodone
Oxymorphone	Numorphan
Oxycodone and Acetaminophen	Endocet, Percocet, Roxicet, Roxilox, Tylox
Propoxyphene and Acetaminophen	Darvocet-N 50, Darvocet-N 100, E-Lor, Propacet 100

- It is important to note that if narcotic pain medication is used for an acute situation or on occasion it may be acceptable depending on the underlying cause; however, if an applicant is regularly using narcotic pain medication to control pain or make it through daily activities, that would be uninsurable.

MEDICATIONS ASSOCIATED WITH UNINSURABLE HEALTH CONDITIONS

Drug Name	Condition
3TC	AIDS
Abilify	Psychosis
Adriamycin	Malignant Tumors
Alkeran	Cancer
Amantadine	Parkinson's Disease
Aranesp	Anemia
Aricept	Dementia
Artane	Dementia
Avinza	Chronic Pain
Avonex	Multiple Sclerosis
Axona	Alzheimer's Disease
AZT	AIDS
Baclofen	Multiple Sclerosis
Betaseron	Multiple Sclerosis
Carbidopa	Parkinson's Disease
Cerefolin	Memory Impairment
Cogentin	Parkinson's Disease
Cognex	Dementia
Combivir	AIDS
Copaxone	Multiple Sclerosis
Cycloserine	Alzheimer's Disease
Cytoxan	Cancer, Immunosuppresion
D4T	AIDS
DDC	AIDS
DDI	AIDS
Depo-Provera	Cancer
DES	Cancer
D-Pencillamine	Rheumatoid Arthritis
Duragesic Patch	Chronic Pain
Edzicom	AIDS

Drug Name	Condition
Eldepryl	Parkinson's Disease
Enbrel	Rheumatoid Arthritis
Epogen	Kidney Failure, AIDS
Ergoloid	Dementia
Estinyl	Cancer
Exelon	Dementia
Fetanyl Patch	Chronic Pain
Geodon	Schizophrenia
Gleevic	Cancer
Haldol	Psychosis
Herceptin	Cancer
Hydergine	Dementia
Hydrea	Cancer
Imuran	Severe Arthritis, Immunosuppressor
Indinavir	AIDS
Insulin	Diabetes
Interferon	AIDS, Cancer, Hepatitis, MS
Invirase	AIDS
Kadian	Chronic Pain
Kemadrin	AIDS
Kineret	Parkinson's Disease
Larodopa	Parkinson's Disease
L-Dopa	Parkinson's Disease
Leukeran	Cancer, Immunosuppression
Levodopa	Parkinson's Disease
Lexiva	AIDS
Lioresal	Multiple Sclerosis
Lomustine	Cancer
Megace	Cancer

MEDICATIONS ASSOCIATED WITH UNINSURABLE HEALTH CONDITIONS

Drug Name	Condition
Mellaril	Psychosis
Melphalan	Cancer
Memantine	Alzheimer's Disease
Mestinon	Myasthenia Gravis
Methadone	Chronic Pain
Methotrexate >10 mg	Rheumatoid Arthritis
Metrifonate	Dementia
Mirapex	Parkinson's Disease
Morphine	Chronic Pain
MS Contin	Chronic Pain
Myleran	Cancer
Namenda	Alzheimer's Disease
Narcotics	Chronic Pain
Narvane	Psychosis
Nelfinavir	AIDS
Neoral	Severe Arthritis, Immuno-suppression
Neulasta	Anemia
Norvir	AIDS
Oxycontin	Chronic Pain
Paraplatin	Cancer
Parlodel	Parkinson's Disease
Parsidol	Parkinson's Disease
Permax	Parkinson's Disease
PhosLo	Kidney Failure
Plenaxis	Advance Prostate Cancer
Procrit	Kidney Failure, AIDS
Prolixin	Psychosis
Purinthenol	Progressive Ulcerative Colitis
Razadyne	Alzheimer's Disease
Rebif	Multiple Sclerosis

Drug Name	Condition
Remicade	Crohn's Disease
Reminyl	Dementia
Renagel	Kidney Failure
Requip	Parkinson's Disease
Retrovir	AIDS
Reyataz	AIDS
Ridura	Rheumatoid Arthritis
Riluzole	ALS
Risperdal	Psychosis
Ritonavir	AIDS
Sandimmue	Immunosuppressor, Severe Arthritis
Seroquel	Psychosis
Stelazine	Psychosis
Sustiva	AIDS
Symbyax	Psychosis
Symmetrel	Parkinson's Disease
Teslac	Cancer
Thiotepa	Cancer
Thorazine	Psychosis
Toujeo	Diabetes
Trilifon	Pychosis
Truvada	AIDS
Tumor Necrosis Factor	Rheumatoid Arthritis
Tysabri	Multiple Sclerosis
VePesid	Cancer
Vincristine	Cancer
Virmune	AIDS
Xyrem	Narcolepsy
Zanosar	Cancer
Zolodex	Cancer

APPEALS PROCESS

If there is a situation where you may need to appeal an underwriting decision, we ask that you follow the process indicated below:

- Review the adverse decision letter, which includes the specific medical reasons, with your applicant.
- Any additional information and supporting documentation must be provided by the physician indicated in our adverse decision letter and it must specifically address all medical impairments contained in our letter.
- Appeals must be submitted to us in writing. Please mail your appeal to the mailing address indicated on the adverse decision letter.

We will normally inform the applicant and the appropriate contact person (Agent, Agency, etc.) as to the outcome of our review within 15 days of receipt in the underwriting department.

UNDERWRITING HOTLINE

The Underwriting Hotline provides for a direct line to an underwriter to discuss a specific prequalification question.
This hotline is not for the purpose of answering questions about the status of a case. Status calls should be referred to our call center at 1-800-568-0692.

Number: **1-866-297-7412**

Availability: Monday through Friday 8am – 5pm CT

Prequalification Email Box

Questions will be answered within 1 business day of your inquiry. The purpose of this email box is only for prequalification questions and should not include any information identifiable to an individual. Information such as name, social security number or date of birth should not be included. We strongly recommend using the email method as it provides written documentation of our tentative assessment. This minimizes the "He said/ She said" situations.

Email address: LTC_Prequalify@Transamerica.com

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