

Critical Illness Insurance

UNDERWRITING GUIDE

FOR AGENT USE ONLY. Not for use with consumers.
Product availability, features and rates may vary by state.

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Important Notice

Underwriting Guide for Critical Illness Insurance

This policy is underwritten by Assurity Life Insurance Company, Lincoln, Nebraska, and may contain reductions of benefits, limitations and exclusions. For costs and complete details of the coverage, please contact Assurity Life Insurance Company or review the policy. **The specific policy is your ultimate authority for any questions about this product.**

This is a generic underwriting guide. **Product availability, features and rates may vary by state.** Your state may require a state-specific contract and/or application. State-specific applications are available on AssureLINK at <https://assurelink.assurity.com> in the Product Center for each product by selecting the Applications/Forms option on the left.

This is an underwriting guide for policy Form No. I H0820 and CI 007. Any prior guide does not apply to this product.

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Field Underwriting Guidelines

Good field underwriting can create a win/win situation. Asking your client a few questions before the application process can save time and frustration for everyone involved. If information provided indicates your client will not qualify for Critical Illness insurance, you can immediately shift gears to another product. If information provided indicates your client may qualify, Assurity will still underwrite as necessary. Keep in mind the underwriting process can be complex and in-depth weighing many health and risk factors.

Pre-Screening Checklist

Please review the following checklist with your client. If the client has any of the following conditions or illnesses, they will not be eligible for coverage. This is not a comprehensive list – other illnesses or conditions may also make your client ineligible.

- Cancer – applicants with certain cancers, including skin cancers other than melanoma or certain early stage cancers, may still be eligible for coverage
- Diabetes – if insulin dependent or uncontrolled
- Heart Disease – including heart attack, angina, vascular surgery or angioplasty
- Major Organ Transplant
- AIDS / HIV+
- Alcohol Abuse – if treated within past 2 years
- Drug Abuse
- Stroke or Transient Ischemic Attack (TIA)
- Kidney Failure or Disease – not including kidney stone
- Cystic Fibrosis
- Hepatitis – other than type A
- Multiple Sclerosis
- Muscular Dystrophy
- Huntington's Chorea
- Permanent Paralysis
- Systemic Lupus Erythematosus
- Alzheimer's Disease
- Amyotrophic Lateral Sclerosis

General Underwriting Guidelines

Non-U.S. Citizens

Applications may be taken for U.S. citizens who permanently reside in the U.S. or for permanent resident aliens who have lived in the U.S. for at least one year and do not plan to return to their native country on a permanent basis. The applicant's resident alien card number must be submitted with the application for a permanent resident alien. A photocopy of the resident alien card can be included in case it is required.

Personal History Interviews

Personal history interviews are ordered by the underwriting department for all applications. Please inform every applicant that he/she will receive a phone call regarding an interview.

Replacement Guidelines

If existing critical illness insurance is to be replaced, the following states require that a replacement form be completed and submitted with the application, and that a completed copy be left with the applicant:

Arkansas	Illinois	New Jersey	Utah
Colorado	Iowa	Oklahoma	Vermont
Connecticut	Kentucky	Pennsylvania	Virginia
Delaware	Maine	Rhode Island	Washington
Florida	Massachusetts	South Carolina	West Virginia
Idaho	New Hampshire	Texas	Wisconsin

Backdating Policy Issue Date

Assurity will backdate the policy issue date 30 days prior to application's signature date to "save age" (i.e. allow for a lesser age to qualify for a lesser rate). However, Assurity will not backdate the policy issue date to "save eligibility" (i.e. allow for a lesser age to meet eligibility requirements).

Financial Underwriting Guidelines

Financial Guidelines

Here are a few guidelines to consider related to the proposed insured's income:

- The proposed insured will generally be eligible for a benefit amount up to six times earned income
- A non-working proposed insured is eligible for up to the lesser of 50 percent of their working spouse's income or \$250,000.
- If applying for a benefit amount greater than stated guidelines, a cover letter outlining justification will be required with the application.
- For business situations with benefit amount over \$100,000, a cover letter outlining the purpose and justification will be required with the application.
- For benefit amounts over \$250,000, financial documentation may be required.

Bankruptcy

Consideration of financial stability is an important part of the underwriting process. No coverage will be considered if bankruptcy is ongoing or pending, and until bankruptcy is discharged.

Medical Underwriting Guidelines

Non-Medical Limits and Exam Requirements

Upon completion of the application for the proposed insured, arrangements should be scheduled to fulfill underwriting requirements indicated on the following chart. When using the chart, please note the following:

Age

- All age calculations should use the age last birthday.

Amount of Coverage

- To calculate the amount of coverage used in determining underwriting requirements, add up the total amount of coverage applied for on this application and pending plus other critical illness insurance in force over the past two years, excluding Simplified Critical Illness Insurance and critical illness riders.

Exam

- In the chart below, "Exam" means paramedical exams.
- If a TeleApp is completed, or if all questions on the application are completed, Assurity can waive the paramedical exam and use an abbreviated exam in which the paramed records height, weight, blood pressure and pulse.

Urinalysis (UA)

- If required, included in paramedical exam.

Blood Requirements (BLD)

- A fasting full blood draw is required; a dried blood spot (DBS) is not acceptable. Blood profile includes HIV screening and may include a prostate-specific antigen (PSA) screening as indicated below.

Electrocardiogram (EKG)

- If required, included in paramedical exam.

EXAM LIMITS CHART (effective 02/03/16)					
Age	Amount of Coverage	Exam	UA	BLD	EKG
18 - 35	\$50,000 - \$99,999	No	No	No	No
	\$100,000 - \$250,000	No	Yes	No	No
	\$250,001 - \$500,000	Yes	Yes	Yes	No
36 - 40	\$50,000 - \$99,999	No	No	No	No
	\$100,000 - \$250,000	Yes	Yes	No	No
	\$250,001 - \$500,000	Yes	Yes	Yes	No
41 - 45	\$50,000 - \$99,999	No	No	No	No
	\$100,000 - \$250,000	Yes	Yes	Yes	No
	\$250,001 - \$500,000	Yes	Yes	Yes	Yes
46 - 50	\$50,000 - \$99,999	Yes	Yes	No	No
	\$100,000 - \$250,000	Yes	Yes	Yes with PSA	No
	\$250,001 - \$500,000	Yes	Yes	Yes with PSA	Yes
51 - 65	\$50,000 - \$99,999	Yes	Yes	Yes with PSA	No
	\$100,000 - \$500,000	Yes	Yes	Yes with PSA	Yes

NOTE: These limits are subject to change at any time. Assurity reserves the right to require a medical exam and/or other medical requirements on any applicant.

Authorized Paramedical Firms

Our authorized paramedical firms have the examination forms, containers and blood draw kits in stock.

For significant medical health histories or if the applicant has previously been declined, contact the new business contact center at (800) 869-0355, Ext. 4264, prior to scheduling an examination.

Paramedical firms authorized by Assurity are as follows:

American Paraprofessional Systems, Inc. (APPS)	(800) 967-1499
Examination Management Services (EMSI)	(800) 872-3674
Quest Diagnostics – ExamOne	(800) 873-8845
Hooper Holmes Portamedic National Service Center	(800) 765-1010

Height/Weight Build Chart

This chart provides a guideline for policy issue and table rating. The actual underwriting decision incorporates other factors and may not exactly match this table.

HEIGHT / WEIGHT BUILD CHART							
Applicants age 18 and above with the height /weight requirements categorized below will be rated as follows (any height/weight combinations outside of this chart will be declined):							
Table Rating for Male	(B)	(A)	STD	(A)	(B)	(C)	(D)
Table Rating for Female	(A)	STD	STD	(A)	(B)	(C)	(D)
Height (inches)	At or below	At or below	Standard Range	At or above	At or above	At or above	At or above
	Weight (lbs.)						
4'8"	78	83	84 - 147	148	175	182	189
4'9"	81	86	87 - 151	152	180	188	195
4'10"	84	89	90 - 156	157	185	193	201
4'11"	87	92	93 - 161	162	190	199	207
5'0"	90	95	96 - 166	167	196	205	214
5'1"	93	98	99 - 172	173	202	212	221
5'2"	96	101	102 - 178	179	208	218	228
5'3"	99	104	105 - 184	185	214	225	235
5'4"	102	108	109 - 190	191	220	231	242
5'5"	105	111	112 - 196	197	226	238	249
5'6"	108	115	116 - 202	203	232	244	256
5'7"	111	118	119 - 208	209	238	251	263
5'8"	114	122	123 - 214	215	244	257	270
5'9"	118	126	127 - 220	221	250	264	277
5'10"	122	130	131 - 226	227	256	270	284
5'11"	126	134	135 - 232	233	262	277	291
6'0"	130	139	140 - 238	239	269	284	299
6'1"	134	143	144 - 245	246	276	292	307

HEIGHT / WEIGHT BUILD CHART							
6'2"	138	148	149 - 252	253	283	299	315
6'3"	143	153	154 - 259	260	290	307	323
6'4"	148	158	159 - 266	267	297	314	331
6'5"	153	163	164 - 273	274	304	322	339
6'6"	158	168	169 - 280	281	311	329	347

Family Health History and Risk

Family history is an important predictive factor for many illnesses and conditions, and can impact an applicant's eligibility for critical illness insurance.

Family history risk varies with:

- the number of affected first-degree relatives – mother, father, brothers and sisters;
- the relative's age at diagnosis, not at death;
- the current age of applicant; and
- the sex of the applicant, in some cases.

Cancer, heart disease, diabetes, motor neuron disease and advanced Alzheimer's disease all demonstrate a genetic disposition. If your prospect has a family history of any of these conditions, please call our new business contact center at (800) 869-0355, Ext. 4264 to determine any potential rating.

The following chart can be considered in determining an applicant's rating related to family history of the following illnesses and conditions:

FAMILY HISTORY GUIDELINES CHART		
Illness / Condition	Family History	Rating
Cancer*	One first-degree relative diagnosed under age 60	Generally Standard
	Two or more first-degree relatives diagnosed under age 60	Table B, Table C, Table D or Decline
Heart Disease, Blood Vessel Disease and Stroke	One first-degree relative diagnosed under age 55	Standard, Table A or Table B
	One first-degree relative diagnosed over age 55	Generally Standard
	Two first-degree relatives	Standard, Table A or Table B

* For family history of breast or colon cancer, please call our new business contact center at (800) 869-0355, Ext. 4264 with any questions.

Additional Underwriting Information to Expedite Processing

Underwriting action often depends on answers to a number of basic questions specific to the condition or situation. In addition to information provided in the application, the underwriting process can be expedited by providing such additional underwriting information as outlined below. On a separate sheet of paper attached to the application, provide the information as specified for conditions or situations listed under conditions 1 through 13 in the following section. For any condition or situations not listed, please provide information according to No. 14.

1. Arthritis

- Applicant's name
- Type of arthritis
- Joints and areas involved
- Currently prescribed medications and treatment
- Name, address and phone number of all physicians and medical facilities

2. Asthma, emphysema or bronchitis

- Applicant's name
- Number of attacks in the past 12 months
- Date of last attack
- Hospitalizations due to respiratory condition
- Date of last hospitalization (if any)
- Currently prescribed medications and treatment
- Name, address and phone number of all physicians and medical facilities

3. Back or neck pain or problems

- Applicant's name
- Diagnosis (sprain, strain, herniated disc, etc.)
- Area of the back or neck affected
- Date of last symptom
- Currently prescribed medications and treatment
- Date of last treatment
- Name, address and phone number of physician and medical facilities

4. Diabetes or glucose metabolism abnormalities

- Applicant's name
- Diagnosis
- Date of onset or diagnosis
- Currently prescribed medications and treatment
- Date(s) of any hospitalizations
- Related conditions – eye disorders, kidney disorders, heart disorders, recurrent infections, circulatory problems, amputations, skin ulcers
- Other conditions/symptoms due to diabetes
- Name, address and phone number of physician and medical facilities

5. Epilepsy or seizure

- Applicant's name
- Type of epilepsy or seizure
- Date of onset or diagnosis
- Date of last seizure
- Currently prescribed medications or treatment
- Name, address and phone number of all physicians and medical facilities

6. Heart attack, angina or coronary artery disease

- Date of onset or diagnosis
- Diagnosis
- Date of last symptoms
- Tests completed or prescribed
- Currently prescribed medications and treatment
- Name, address and phone numbers of all physicians and medical facilities

7. Heart murmur

- Applicant's name
- Date of onset or diagnosis
- Type of murmur
- Restrictions to activities
- Currently prescribed medications and treatments
- Name, address and phone number of physician and medical facilities

8. High blood pressure

- Applicant's name
- Date of onset or diagnosis
- Currently prescribed medications or treatment
- Name, address and phone number of physicians and medical facilities

9. Kidney or urinary tract disease or disorder

- Applicant's name
- Disease or disorder
- Currently prescribed medications and treatments
- Tests completed
- Name, address and phone number of physician and medical facilities

10. Stomach and/or digestive tract disorders

- Applicant's name
- Diagnosis
- Date of onset
- Date of last symptoms
- Currently prescribed medications and treatment
- Name, address and phone number of physicians and medical facilities

11. Tumor, polyp or cyst

- Applicant's name
- Diagnosis
- Location of growth
- Date of removal
- Currently prescribed medications and treatment
- Follow-ups planned
- Name, address and phone number of physician and medical facilities

12. Driving under the Influence (DUI)

- Applicant's name
- Date of offense
- Number of DUI offenses
- License currently suspended
- Current employment

13. Drug or alcohol abuse

- Applicant's name
- Types of drugs or alcohol used
- Dates of last drug or alcohol use
- Treatment dates
- Current affiliation in support group - Alcoholics Anonymous (AA), Narcotics Anonymous (NA)

14. All other medical conditions

- Applicant's name
- Diagnosis
- Date of onset or diagnosis
- Residual or ongoing symptoms
- Date of last symptoms
- Tests completed or prescribed
- Currently prescribed medications or treatment
- Names, addresses and phone numbers of all physicians and medical facilities

About Assurity

Assurity Life Insurance Company's origins are rooted in a 120-year legacy of providing long-term security to policyholders that has earned generations of customers' confidence and trust.

Assurity Life serves customers across the nation, offering disability income, critical illness, accident and life insurance, annuities and specialty insurance plans through our representatives and worksite distribution.

With assets exceeding \$2 billion, Assurity Life has built a reputation for "best in class" service and sound, conservative business practices with a disciplined approach to financial management. Headquartered in Lincoln, Neb., Assurity Life has earned a high rating from A.M. Best Company, one of the insurance industry's leading independent analysts. For more information about this rating, please visit www.ambest.com or www.assurity.com.

We're proud of our history of integrity, financial accountability...and helping people through difficult times.

Revisions to this Underwriting Guide

Date	Section	Update
02/03/16	Medical UW Guidelines	Chart reviewed with no revisions necessary
04/28/14	General Underwriting Guidelines	Changed "telephone inspection report" to "personal history interview"
09/25/13	All	Revised format of all content
09/25/13	All	Moved underwriting information to this separate underwriting guide