

EF SIMPLIFIED TERM & UNIVERSAL LIFE GUIDELINES 5/24

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DISEASE/ DISORDER	COLUMBIAN FINANCIAL GROUP: Safe Shield	FORESTERS: Smart U.L. & Strong Foundation	MUTUAL OF OMAHA: Term Life Express - G.U.L. Express	GPM: Equity Protector	AMERICO: HMS Series	American Amicable/ Occidental: Home Protector
AIDS	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	DECLINE	EVER: DECLINE
Alcoholism	Within past 5 years: DECLINE	QUESTIONNAIRE REQUIRED After 5 years, without relapse, no current use: ACCEPT Any within past 5 years: DECLINE	Within past 10 years: DECLINE	Treatment over 5 years ago and no longer using alcohol: CLASSIC 1 Current abuse, or within 5 years of treatment: DECLINE	Within past 10 years, required treatment, limit or discontinue its use: DECLINE	After 4 years since abstained use: STANDARD Within 4 years: DECLINE
Alzheimer's	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	DECLINE	EVER: DECLINE
Amputation	Injury: POSSIBLE ACCEPT Disease: DECLINE	Injury: ACCEPT Disease: DECLINE	Injury: ACCEPT Disease: DECLINE	Injury, no impact to ADLs: CLASSIC 1 Disease: DECLINE	Accidental, fully recovered and working full time: USUALLY ACCEPT All Others: DECLINE	Amputation from injury ONLY: STANDARD
Aneurysm	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	Surgically corrected over 3 years prior: POSSIBLE CLASSIC 1 *Call for risk assessment Otherwise: DECLINE	EVER: DECLINE	EVER: DECLINE
Angina (Chest Pain)	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	If over age 60, non-tobacco, investigated with cardiac catheterization and treated/ stable, described as either mild or moderate: CLASSIC 2 If unstable angina, described as severe, not fully investigated with cardiac catheterization, tobacco user, under age 60, combined with stroke/TIA, diabetic, has had multiple heart attacks, new stenosis, stenosis requiring bypass, angioplasty, or (re)stent(s): DECLINE	EVER: DECLINE	EVER: DECLINE

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Angioplasty/Stent Implant	<p>ONLY If within the past ten (10) years NO diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT</p> <p>*Call carrier. Med records required</p> <p>ALL OTHER: DECLINE</p>	EVER: DECLINE	EVER: DECLINE	<p>Over age 60, non-tobacco: CLASSIC 1</p> <p>Under age 60, non-tobacco: MIN CLASSIC 2</p> <p>Over age 60, tobacco: CLASSIC 2</p> <p>Under age 60 and tobacco user, ongoing angina after procedure, combined with stroke/TIA, diabetes, has had multiple heart attacks, new stenosis, stenosis requiring bypass, angioplasty, or (re)stent(s): DECLINE</p>	EVER: DECLINE	EVER: DECLINE
Anxiety	ACCEPT	<p>QUESTIONNAIRE REQUIRED</p> <p>Mild > age 25, onset more than 1 year or later, no hospitalization or time off work: ACCEPT</p> <p>Severe, major depression, bipolar, schizophrenia: DECLINE</p>	<p>If hospitalized within the past 10 years due to: DECLINE</p> <p>Otherwise: ACCEPT</p>	<p>Treated with one or two medications and no impact on ADLs or time off work: CLASSIC 1</p> <p>Treated with 3 medications: CLASSIC 2</p> <p>Treated with 4+ medications (FOR ALL MENTAL HEALTH CONDITIONS), recent hospitalization, past suicide attempt, impact on ADLs: DECLINE</p>	<p>USUALLY ACCEPT</p> <p>If diagnosed within the past 6 months, or for which you've been hospitalized: DECLINE</p>	<p>1 medication, situational in nature: STANDARD</p> <p>Major depression, bipolar, schizophrenia: DECLINE</p>

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Arrhythmia	<p>ONLY If within the past ten (10) years NO diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT</p> <p>*Call carrier. Med records required</p> <p>ALL OTHER: DECLINE</p>	EVER: DECLINE	EVER: DECLINE	<p>If A-Fib - see below</p> <p>Paroxysmal super ventricular tachycardia, Premature atrial complexes, sinus bradycardia (BPM ≥45), or wandering pacemaker: CLASSIC 1</p> <p>Paroxysmal ventricular tachycardia, premature ventricular complexes, ventricular fibrillation, or any arrhythmia combined with ischemic heart disease or other organic heart disease: DECLINE</p>	EVER: DECLINE	EVER: DECLINE
Arthritis	<p>In the past ten (10) years, diagnosed with, received treatment or had follow-up for Rheumatoid: DECLINE</p> <p>Others: ACCEPT</p>	<p>QUESTIONNAIRE REQUIRED</p> <p>Osteoarthritis: ACCEPT</p> <p>Rheumatoid - mild no limitations: ACCEPT</p> <p>Severe/Moderate (RX include Humira, Enbrel, Prednisone): DECLINE</p>	<p>Moderate/Severe rheumatoid arthritis treated with Humira, Enbrel or Methotrexate: DECLINE</p>	<p>OSTEOARTHRITIS CLASSIC1</p> <p>RHEUMATOID</p> <p>Mild/Moderate and with NO use of corticosteroids, immunosuppressants, gold, sulphasalazine, chloroquine or methotrexate and able to perform all ADLs: CLASSIC1</p> <p>Severe and with use of any of the meds listed above AND able to perform all ADLs: CLASSIC2</p> <p>Otherwise: DECLINE</p>	<p>Psoriatic mild, working full time: USUALLY ACCEPT</p> <p>Diagnosed with Rheumatoid, Methotrexate or Steroid use, OR ANY diagnosis of arthritis within the past 6 months: DECLINE</p>	<p>Rheumatoid with minimal, slight impairment: STANDARD</p> <p>Rheumatoid All others: DECLINE</p>

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Asthma	<p>Tobacco use and moderate OR severe OR complications: DECLINE</p> <p>MODERATE: Daily symptoms and exacerbations two or more times per weeks, some restrictions on activities, daily use of bronchodilator, up to two weeks of missed time from work in the past 12 months.</p> <p>SEVERE: Daily symptoms, hospital admission within the past year, symptoms not relieved with treatment, history of life-threatening attack, or greater than two weeks of work missed due to asthma in the past 12 months.</p>	<p>QUESTIONNAIRE REQUIRED</p> <p>Mild/Moderate: ACCEPT</p> <p>Severe or hospitalization: DECLINE</p>	<p>Mild ONLY: ACCEPT</p> <p>Chronic or Severe: DECLINE</p>	<p>MILD Treated daily with single medication, inhaler use only as needed, tobacco OR non-tobacco: CLASSIC 1</p> <p>MODERATE Non-tobacco ONLY, treated daily with medication, inhaler use only as needed: CLASSIC 2</p> <p>SEVERE Non-tobacco ONLY, with continuous use of steroids and rescue inhalers: CLASSIC 2</p> <p>*If severe and recent hospitalization or tobacco user: DECLINE</p>	<p>Well controlled, seasonal with allergies: ACCEPT</p> <p>Tobacco use: POSSIBLE ACCEPT</p> <p>Steroid use or hospitalized/visited emergency room within last year: DECLINE</p>	<p>Mild, occasional, brief episodes, allergic, seasonal: STANDARD</p> <p>Moderate, more than 1 episode a month STANDARD</p> <p>Steroidal use, severe, hospitalization or ER visit within the past 12 months, or combined with tobacco use - smoker: DECLINE</p>
Atrial Fibrillation (A-Fib)	<p><u>ONLY</u> If within the past ten (10) years <u>NO</u> diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT</p> <p>*Call carrier. Med records required</p> <p>ALL OTHER: DECLINE</p>	<p>EVER: DECLINE</p>	<p>EVER: DECLINE</p>	<p>Corrected with successful ablation: CLASSIC 1</p> <p>Ongoing treatment or current symptoms: CLASSIC 2</p> <p>Accompanied by coronary or cerebral vascular disease: DECLINE</p>	<p>With RF ablation, no re-occurrence after 3 months: POSSIBLE ACCEPT</p> <p>Otherwise: DECLINE</p>	<p>EVER: DECLINE</p>
Autism	<p>No Info on app or UW guide. Please contact carrier.</p>	<p>EVER: DECLINE</p>	<p>No Info on app or UW guide. Please contact carrier.</p>	<p>Fully functioning, able to attend school, classes CLASSIC 1</p> <p>Moderate to severe: DECLINE</p>	<p>EVER: DECLINE</p>	<p>No Info on app or UW guide. Please contact carrier.</p>

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Bipolar Disorder	DECLINE	EVER: DECLINE	DECLINE (Including Bipolar depression)	Minimum one year after diagnosis AND mild or moderate, well controlled with one OR two medications, and little impact on ADLs: CLASSIC 2 More than 2 medications, diagnosed within one year, recent hospitalizations, past suicide attempts, or interferes with ADLS: DECLINE	EVER: DECLINE	EVER: DECLINE
Blood Pressure (Hypertension)	ACCEPT If hospitalized in the past five (5) years: DECLINE	QUESTIONNAIRE REQUIRED If controlled. MUST be 50 lbs lighter than relative build chart: ACCEPT	ACCEPT Table 2 or higher build with tobacco use, diabetes, asthma or multiple impairments OR hospitalizations within past 5 years: DECLINE	Well controlled (with or without medication): CLASSIC 1 Uncontrolled: DECLINE (possible classic 2 with risk assessment)	Controlled and after 6 months of treatment: ACCEPT *See question 9B	Controlled, 2 or fewer medications - must provide current BP history: STANDARD Uncontrolled, more than 3 medications, or combined with Thyroid disorder: DECLINE
Bronchitis	If Chronic: DECLINE * See COPD	Acute: ACCEPT Chronic: DECLINE	Chronic: DECLINE	Acute: CLASSIC 1 Chronic: *SEE COPD	If Chronic: DECLINE	Acute, recovered: STANDARD Chronic: DECLINE
Build Charts Height/Weight + Multiple Impairments	SEE BUILD CHART AND DIABETIC BUILD CHART (if applicable).	Only use Foresters chart if the proposed insured has <u>NO</u> other medical impairments other than height/weight. See diabetic rate/ build chart (if applicable) OR call Foresters risk assessment for 2nd opinion 877-622-4249	Yes/No - 1 build chart	SEE BUILD CHART for Classic 1 or Classic 2.	Yes/No - 1 build chart	SEE BUILD CHART for Table 2 and Table 4. Also applicable for Occidental

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Bypass Surgery (CABG)	<p><u>ONLY</u> If within the past ten (10) years <u>NO</u> diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT</p> <p>*Call carrier. Med records required</p> <p>ALL OTHER: DECLINE</p>	EVER: DECLINE	EVER: DECLINE	<p>Over age 60, non-tobacco: MIN CLASSIC 1</p> <p>Under age 60, non-tobacco: MIN CLASSIC 2</p> <p>Over age 60, tobacco: MIN CLASSIC 2</p> <p>Under age 60 and tobacco user, ongoing angina after procedure, combined with stroke/TIA, diabetes, has had multiple heart attacks, new stenosis, stenosis requiring bypass, angioplasty, or (re)stent(s): DECLINE</p>	EVER: DECLINE	EVER: DECLINE
Cancer Melanoma/Skin/ Basal/Squamous	<p>More than five (5) years since last diagnosis and last treatment of internal cancer (excluding basal or squamous cell): *POSSIBLE ACCEPT</p> <p>If within the past ten (10) years diagnosis, treatment (including medication) or any follow-up: Metastatic (spread), Hodgkins Disease, Leukemia, Lymphoma, Liver, Lung or Pancreatic cancer: DECLINE</p> <p>*If cancer was any type other than those listed above for decline, consideration is possible with medical records provided by the proposed at the time of application.</p>	<p>QUESTIONNAIRE REQUIRED</p> <p>Diagnosis and recommended treatment, with no recurrence over 10 years ago: ACCEPT</p> <p>Basal Cell: ACCEPT</p> <p>All other cancers including Hodgkin's Lymphoma: DECLINE</p>	EVER: DECLINE (Except basal cell or squamous cell skin cancer)	<p><u>BASAL CELL</u> Successfully removed: CLASSIC 1</p> <p><u>INTERNAL CANCER</u> Single occurrence, over 5 years since successful treatment, regular follow up testing completed: Breast stage 0&1 Prostate stage 1&2 Testicular stage 1 Thyroid stage 1&2 Melanoma stage 1A &1B Cervical stage 0&1A CLASSIC 1</p> <p>All other types, staging, multiple cancers, recurrence, spreading through lymph nodes, or other areas of the body: DECLINE</p>	<p>DECLINE (Except basal cell skin cancer)</p>	<p>Basal or Squamous cell skin carcinoma ONLY and an isolated occurrence: STANDARD</p> <p>7 years since surgery, diagnosis, or last treatment, no recurrence or additional occurrence: STANDARD</p> <p>All other internal cancers: DECLINE</p>

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Cardiomyopathy	<p><u>ONLY</u> If within the past ten (10) years NO diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT</p> <p>*Call carrier. Med records required</p> <p>ALL OTHER: DECLINE</p>	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE
Crohn's	<p>If less than 1 year since last flare-up or attack (symptoms include: fever, anemia, severe colic, dehydration, weight loss and/or hospitalization) OR have pending surgery or had surgery less than 6 months ago: DECLINE</p>	<p>QUESTIONNAIRE REQUIRED</p> <p>> 5 years in remission: ACCEPT</p>	<p>No Info on app or UW guide. Please contact carrier.</p>	<p>More than 1 year since last attack, no ongoing treatment with corticosteroids or immunosuppressive therapy and no current symptoms: CLASSIC1</p> <p>Use of corticosteroids or immunosuppressive drugs but NO current symptoms or attacks within the past year: CLASSIC2</p> <p>Current symptoms of attack within the last year: DECLINE</p>	EVER: DECLINE	<p>Diagnosed prior to age 20 or within the past 12 months: DECLINE</p>
Colitis	<p>If within the past ten (10) years diagnosis, treatment (including medication) or any follow-up: Moderate to severe UC: DECLINE</p>	<p>QUESTIONNAIRE REQUIRED</p> <p>Ulcerative: Mild to moderate, intermittent: ACCEPT</p>	ACCEPT	<p><u>Ulcerative</u></p> <p>Intermittent, mild or moderate (single or intermittent attack with clinical remission greater than 1 month), without corticosteroid or immunosuppressive therapy: CLASSIC1</p> <p>Otherwise: MIN CLASSIC2</p>	<p>IBS: ACCEPT</p> <p>Ulcerative Colitis: DECLINE</p>	<p>Ulcerative, diagnosed prior to age 20 or within the last 12 months: DECLINE</p>

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COPD (Chronic Obstructive Pulmonary Disease)	EVER: DECLINE	<p>QUESTIONNAIRE REQUIRED</p> <p><u>Strong Foundation ONLY:</u> Non Smoker, mild COPD, no oxygen, no steroids or serious COPD medications. Very little shortness of breath(SOB); able to climb 1 flight of stairs with NO SOB: ACCEPT</p> <p><u>ALL Smart UL:</u> DECLINE</p>	EVER: DECLINE	<p>Mild or moderate, no current shortness of breath, non-smoker ONLY, and only occasional time off work: CLASSIC 2</p> <p>Severe, oxygen use, or smoker: DECLINE</p>	EVER: DECLINE	EVER: DECLINE
CHF (Congestive Heart Failure)	<p><u>ONLY</u> If within the past ten (10) years <u>NO</u> diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT</p> <p>*Call carrier. Med records required</p> <p>ALL OTHER: DECLINE</p>	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE
Cystic Fibrosis	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE
Depression	<p>ACCEPT</p> <p>Moderate to severe: DECLINE</p> <p>*Moderate/severe: multiple medications for depression, more than one week of work missed in the past 12 months due to depression, history of hospitalizations for depression, history of suicidal ideation</p>	<p>QUESTIONNAIRE REQUIRED</p> <p>Mild > age 25, onset more than 1 year or later, no hospitalization or time off work: ACCEPT</p> <p>Severe, major depression, bipolar, schizophrenia: DECLINE</p>	<p>ACCEPT</p> <p>Hospitalized within the past 10 years, or severe depression, or bipolar depression: DECLINE</p>	<p>Treated with one or two medications and no impact on ADLs or time off work: CLASSIC 1</p> <p>Treated with 3 medications: CLASSIC 2</p> <p>Treated with 4+ medications (FOR ALL MENTAL HEALTH CONDITIONS), recent hospitalization, past suicide attempt, impact on ADLs: DECLINE</p>	<p>Mild with no hospitalization within 3 years, no more than 1 medication, <u>AND</u> <u>NOT</u> diagnosed within the past 6 months: USUALLY ACCEPT</p> <p>Otherwise or with alcohol abuse and/or narcotic pain medication, OR major depression: DECLINE</p>	<p>1 medication, situational in nature: STANDARD</p> <p>Major depression, bipolar, schizophrenia: DECLINE</p>
Dementia	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE

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<p>Diabetes</p> <p>*Must be under table 2 build OR Refer to diabetic UW chart.</p>	<p>GENERAL GUIDELINES:</p> <p>Insulin: diabetics under age 50, tobacco or nicotine use. DECLINE</p> <p>Non-insulin (ORAL MEDS ONLY): diabetics under age 30, age 30-49 who use tobacco or nicotine products, age 50-65 who use tobacco or nicotine and have had diabetes for more than 15 years. DECLINE</p> <p>Complications such as nerve pain, kidney disease and/or retinopathy: DECLINE</p> <p>ALL DIABETIC PROPOSED INSUREDS MUST FIT WITHIN THE DIABETIC BUILD CHART ACCORDING TO DIABETIC CALCULATIONS FOUND ON PAGE 9 OF THE SAFE SHEILD PRODUCT GUIDE (12/19)</p>	<p>Please see Diabetic rating sheet for all Smart UL and diabetic calculator for all Strong Foundation</p> <p>Strong Foundation: Type 1 or 2 based on A1C, duration, build, and with no complications: Individual consideration - based on SF rating calculator</p> <p>Smart UL: Type 2 only based on current age of 20-29, duration < 5 years. Type 2 based on current age of 30+ and any duration since diagnosis: ACCEPT based on results of rating worksheet</p> <p>Smart UL treated with insulin, poor control, any complications including heart disease, kidney disease, PVD, neuropathy, retinopathy or excessive build: DECLINE</p>	<p>Diagnosed > age *45 w/ table 2 or higher build or tobacco use, or table 2 or higher with asthma, or any complications (table 1, 2) or PVD: DECLINE</p> <p>*CA and VI, age is 50</p> <p>Otherwise: ACCEPT</p>	<p>GESTATIONAL After childbirth and recovery (diabetes resolved): CLASSIC 1 Currently Pregnant: DECLINE</p> <p>TYPE 1 Age 60 or older, good control, non-tobacco: CLASSIC 1 Age 30-59, good control, non-tobacco OR IF age 60 or older, good control, tobacco, or near upper build chart: CLASSIC 2</p> <p>If age 30-59 and tobacco, OR at any age uncontrolled sugars, any complications, combined with heart disease, kidney disease, stroke/TIA, or PVD: DECLINE</p> <p>TYPE 2 Current age 40 and older, good control, non-tobacco: CLASSIC 1 Current age 40 or older and tobacco, OR current age 20-39 non-tobacco with good control or near upper build chart: CLASSIC 2</p> <p>Under age 20, age 20-39 and tobacco user, any complications, combined with heart disease, kidney disease, stroke/TIA, or PVD: DECLINE</p>	<p>Type 2, oral meds or diet controlled after 6 months of treatment: USUALLY ACCEPT</p> <p>Type 2, onset under age 20, OR pregnant and gestational, OR type 1 with insulin, onset under ago 60: DECLINE</p> <p>*SEE Question 7 and Question 9A for diabetic questions.</p>	<p>Controlled with oral medications: STANDARD</p> <p>Combined with overweight, gout, retinopathy, protein in urine, diagnosed prior to age 35, or tobacco use within the past 12 months, or uses insulin: DECLINE</p>
<p>Disabled/ Disability</p>	<p>ACCEPT</p>	<p>ACCEPT</p>	<p>Read application question 9. If multiple impairments including table build, call carrier for instruction.</p>	<p>DECLINE</p>	<p>Due to arthritis: DECLINE</p>	<p>If receiving SSDI, income benefits, or not working due to medical reasons: DECLINE</p>

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Driving Record (Including D.U.I.)	Past 3 years: DWI, DUI, 3 or more driving violations license suspended or revoked or combination thereof: DECLINE	(Assumes no jail time or probation) Single DUI within 12 months/2 DUI within 5 years: DECLINE	Last 5 years: 4 or more moving violations, DUI, or reckless driving convictions: DECLINE	>3 years since: single DUI and with no other citations, OR fewer than 3 speeding/similar tickets: CLASSIC 1 3 or more DUIs ever: DECLINE *otherwise email uwrisk@gpmlife.com for risk assessment	Within the past 2 years: convicted, pled guilty charged with any DUI, reckless driving, 3 or more moving violations, driver's license suspended or revoked: DECLINE	License currently suspended or revoked. DWI, or 2 or more accidents, or 3 or more driving violations or combination thereof within the last 3 years: DECLINE
Drug Abuse/ Addiction	In the past 5 years, used or had been treated for amphetamines, cocaine, narcotics, hallucinogens, or barbiturates (OTHER THAN MARIJUANA): DECLINE * See Marijuana for specific guidelines	All others except marijuana: DECLINE *see marijuana for details and questionnaire notice	Used or convicted unlawful drugs (excluding marijuana) or prescription drugs other than as prescribed within the past 10 years: DECLINE	Minimum 5 years since successful treatment, no relapse: CLASSIC 1 Within 5 years of treatment or current substance abuse: DECLINE	Occasional recreational marijuana use: ACCEPT Cocaine, Amphetamines within 5 years: DECLINE Prescription Narcotics, abuse/ long-term use: DECLINE	Treatment 4+ years or more, and non-usage since: STANDARD Treatment, or illegal drug use within the last 4 years: DECLINE
Epilepsy	Epilepsy or seizures in the past year: DECLINE	QUESTIONNAIRE REQUIRED Controlled on meds, no seizures for 2 years, no complications: ACCEPT	EVER: DECLINE	Absence or petit mal seizures, OR fewer than 12 Grand mal seizures per year: CLASSIC 1 More than 12 Grand mal seizures per year: CLASSIC 2 History of Epilepticus, personality or cognitive changes, progression of underlying disease: DECLINE	Grand Mal or Petit Mal attack over 6 months: POSSIBLE ACCEPT Epilepsy or seizure disorder diagnosed within the past 6 months, hospitalizations within the past 12 months, or ANY driving restrictions: DECLINE	Petit Mal seizures: STANDARD All others: DECLINE
Felony (Probation & Parole)	Past 3 years: DECLINE	If on probation/ parole, incarcerated or criminal charges pending: DECLINE If no jail time served, individual consideration after 1 year; 5 years if jail time served	Convicted of or awaiting trial for a felony within the past 10 years: DECLINE Current Probation and Parole: Call carrier for instruction	3+ years since nonviolent conviction, parole or probation: CLASSIC 1 Otherwise, or multiple separate criminal convictions: DECLINE	10 year look back: POSSIBLE ACCEPT Within the past 10 years for conviction of, pled guilty to, or awaiting trial: DECLINE	Felony within the past 5 years: DECLINE Probation or Parole within the past 6 months: DECLINE
Fibromyalgia	ACCEPT	No depression and working full time: ACCEPT	ACCEPT	Able to work, no ADLs limitations: CLASSIC 1 All other situations: DECLINE	Not disabled, no narcotic pain medications: ACCEPT	STANDARD

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Gastric Bypass	6+ months since surgery: ACCEPT	After 1 year, weight stabilized: ACCEPT	After 1 year: ACCEPT	6+ months since successful surgery: CLASSIC 1	Over 5 years w/ no complications and within height/weight: POSSIBLE ACCEPT Otherwise: DECLINE	1+ years post surgery and no complication: STANDARD Weight reduction surgery within the past 1 year or any history of complications such as dumping syndrome: DECLINE
Heart Attack	ONLY If within the past ten (10) years NO diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT *Call carrier. Med records required ALL OTHER: DECLINE	EVER: DECLINE	EVER: DECLINE	ALL CASES must be at least six months since heart attach, non or minimal heart damage, non-smoker and without ANY other medical issues SEE UNDERWRITING GUIDE *otherwise email uwrisk@gpmlife.com for risk assessment	EVER: DECLINE	EVER: DECLINE
Heart Murmur	ONLY If within the past ten (10) years NO diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT *Call carrier. Med records required ALL OTHER: DECLINE	QUESTIONNAIRE REQUIRED “Innocent” and no symptoms or treatment: ACCEPT All other: DECLINE	EVER: DECLINE	“Innocent” and NO symptoms or treatment: CLASSIC 1 All other: DECLINE	Mitral Valve Prolapse, no medications: USUALLY ACCEPT Otherwise: POSSIBLE DECLINE	History of treatment or surgery: DECLINE
Heart Surgery	ONLY If within the past ten (10) years NO diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT *Call carrier. Med records required ALL OTHER: DECLINE	EVER: DECLINE	EVER: DECLINE	*See Stent & Bypass Heart Valve repair, surgery replacement: DECLINE	Heart Valve Repair: DECLINE *See question 2A	EVER: DECLINE

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Hepatitis	A, recovered: ACCEPT B or C: DECLINE	A, recovered: ACCEPT B or C: DECLINE	A: POSSIBLE ACCEPT B or C EVER: DECLINE	HEPATITIS B Fully resolved with no residual effects and not taking any anti-viral drugs: CLASSIC 1 Currently taking anti- viral drugs: CLASSIC 2 HEPATITIS C DECLINE	A, recovered: ACCEPT B or C: DECLINE	Any history of, diagnosis of, or treatment for Hep B or C: DECLINE
HIV + VE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	Tested Positive: DECLINE
Immune System or Connective Tissue Disorder	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE
Kidney Disease/ Failure/Dialysis Kidney Stones	Stones: ACCEPT Disease, dialysis, or chronic: DECLINE	QUESTIONNAIRE REQUIRED Stones: ACCEPT Disease, dialysis, or chronic: DECLINE	Stones: ACCEPT Disease, dialysis, or chronic: DECLINE	Disease, dialysis, failure: DECLINE	Kidney transplant donor or kidney stones: USUALLY ACCEPT Otherwise, transplant recipient, OR chronic: DECLINE	Stones: STANDARD Disease, insufficiency or failure, nephrectomy, polycystic kidney disease, transplant recipient: DECLINE
Leukemia	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE
Lupus	Discoid: ACCEPT Systemic: moderate or severe. Can include swollen joints, pleuritic chest pain or effusion and/or complications with kidneys: DECLINE	QUESTIONNAIRE REQUIRED Discoid: ACCEPT Systemic: (Erythematous) DECLINE	Discoid: ACCEPT Systemic, or Scleroderma EVER: DECLINE	DISCOID CLASSIC 1 SYSTEMIC Mild, few symptoms without use of corticosteroids, immunosuppressant s, antimalarial drugs, or biologics and able to perform all ADLs: CLASSIC 1 Moderate, SLE related chest pain, swollen joints, or treated with corticosteroids, immunosuppressant s, antimalarial drugs, or biologics and able to perform all ADLs: CLASSIC 2 Severe: DECLINE	Discoid: ACCEPT Systemic, or Scleroderma EVER: DECLINE	Systemic (SLE): DECLINE
Liver Disease OR Transplant	EVER, or recommended to receive organ or bone marrow transplant: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE *Including cirrhosis	EVER: DECLINE	EVER: DECLINE

DISEASE/ DISORDER	COLUMBIAN FINANCIAL GROUP: Safe Shield	FORESTERS: Smart U.L. & Strong Foundation	MUTUAL OF OMAHA: Term Life Express - G.U.L. Express	GPM: Equity Protector	AMERICO: HMS Series	American Amicable/ Occidental: Home Protector
Marijuana	If smoked within the past 12 months, tobacco rates apply. If ingested, tobacco rates to not apply.	<p>QUESTIONNAIRE REQUIRED</p> <p>Recreational use up to 6 times per week: ACCEPT</p> <p>Daily use: Individual consideration</p> <p>Medical use: Depends on the reason for use. Call for Risk assessment</p>	<p>With occasional use: ACCEPT (Non tobacco rates)</p>	<p>With occasional recreational use up to 12 times a month: CLASSIC 1 (Non-tobacco rates)</p> <p>Daily use: CLASSIC 1 (Tobacco rates)</p> <p>Medical Marijuana: DECLINE</p>	Possible tobacco rates (occasional use only): ACCEPT	No Info on app or UW guide. Please contact carrier.
Multiple Sclerosis (MS)	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	<p>1+ year since diagnosis, mild, no or minimal symptoms: CLASSIC 1</p> <p>Moderate symptoms preventing full time work but working part time: CLASSIC 2</p> <p>Severe, wheelchair use or ambulance assistance, or diagnosed within the past year: DECLINE</p>	EVER: DECLINE	EVER: DECLINE
Oxygen Use	See transportation assistance	DECLINE	EVER: DECLINE (Excluding use for sleep apnea)	DECLINE	EVER: DECLINE	EVER: DECLINE
Pacemaker	<p><u>ONLY</u> If within the past ten (10) years NO diagnosis, treatment (including medication) or any follow-up: POSSIBLE ACCEPT</p> <p>*Call carrier. Med records required</p> <p>ALL OTHER: DECLINE</p>	EVER: DECLINE	EVER: DECLINE	<p>CLASSIC 1</p> <p>Accompanied by ischemic heart disease or other organic heart disease: DECLINE</p>	EVER: DECLINE	EVER: DECLINE
Pancreatitis	EVER: DECLINE	<p>QUESTIONNAIRE REQUIRED</p> <p>Single attack, acute > 1 year ago, non alcohol-related, no complications: ACCEPT</p> <p>Alcohol related, chronic: DECLINE</p>	<p>ACCEPT</p> <p>Chronic EVER: DECLINE</p>	<p>Single acute episode, more than 1 year since recovery and not alcohol related: CLASSIC 1</p> <p>Related to alcohol, chronic, or complications mentioned above: DECLINE</p>	EVER: DECLINE	Chronic or multiple episodes: DECLINE

DISEASE/ DISORDER	COLUMBIAN FINANCIAL GROUP: Safe Shield	FORESTERS: Smart U.L. & Strong Foundation	MUTUAL OF OMAHA: Term Life Express - G.U.L. Express	GPM: Equity Protector	AMERICO: HMS Series	American Amicable/ Occidental: Home Protector
Paralysis	Any Paraplegia or Quadriplegia: DECLINE	Paraplegia or Quadriplegia: DECLINE	Paraplegia or Quadriplegia EVER: DECLINE	Paraplegia or Quadriplegia: DECLINE	Due to accident: POSSIBLE ACCEPT Otherwise: DECLINE	Includes para/ quadriplegia: DECLINE
Parkinson's Disease	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE
Peripheral Vascular Disease (PVD)	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE
Pulmonary Embolism	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	STANDARD
Sarcoidosis	If active disease and/or residual pulmonary impairment: DECLINE	QUESTIONNAIRE REQUIRED Localized, non- pulmonary: ACCEPT Pulmonary: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	Pulmonary: DECLINE
Schizophrenia	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE
Sleep Apnea	ACCEPT	QUESTIONNAIRE REQUIRED Narcolepsy or occasional episodes: ACCEPT	ACCEPT	Well controlled and consistent CPAP use: CLASSIC 1 Treated with oxygen: DECLINE	Current Successful treatment w/ CPAP or BIPAP: ACCEPT If diagnosed within the past 6 months, or for which you're not being treated for (CPap or BiPap): DECLINE	STANDARD Combined with history of overweight, poorly-controlled blood pressure, COPD, or heart arrhythmia: DECLINE

DISEASE/ DISORDER	COLUMBIAN FINANCIAL GROUP: Safe Shield	FORESTERS: Smart U.L. & Strong Foundation	MUTUAL OF OMAHA: Term Life Express - G.U.L. Express	GPM: Equity Protector	AMERICO: HMS Series	American Amicable/ Occidental: Home Protector
Stroke/CVA/TIA	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	STROKE: FOR ALL CASES must be at least one year since single stroke, no or minimal residual symptoms, non-tobacco user. 70+ years old at diagnosis: CLASSIC 1 Ages 40-69 at diagnosis: CLASSIC 2 Under the age of 40 at diagnosis, or multiple strokes, or a single stroke with severe residuals: DECLINE TIA: FOR ALL CASES applicants must be at last one year since single TIA and non-tobacco use Age 40 or older: CLASSIC 1 Age less than 40: CLASSIC 2 Multiple TIAs, current tobacco, combined with heart disease or diabetes: DECLINE	EVER: DECLINE	TIA: After 6 months, no residuals: STANDARD Combined with tobacco use-smoker: DECLINE STROKE: DECLINE
Suicide Attempt	N/A	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE	EVER: DECLINE
Transportation Assistance	Permanent use of the following: walker, wheelchair, electric scooter, oxygen, or catheter DECLINE	Due to chronic illness or disease, or related to injury or disability resulting in permanent and ongoing wheelchair use: DECLINE	SEE questions 1-7	*Call for Risk Assessment	DECLINE	EVER: DECLINE

BUILD CHARTS - GENDER NEUTRAL

Height	CFG	FORESTERS	FORESTERS (With NO additional ratable impairments)	MUTUAL OF OMAHA	MUTUAL OF OMAHA *TABLE 2	GPM Classic 1/ Classic 2	AMERICO HMS Series	American Amicable Home Protector Max Table 4
4'8"	189	185	189	197	184	177/195	188	
4'9"	196	193	196	202	189	183/201	195	
4'10"	203	198	203	208	194	189/209	202	199
4'11"	210	207	210	214	199	196/216	209	205
5'	217	212	217	220	205	203/223	216	212
5'1"	224	221	224	226	211	210/231	223	220
5'2"	232	225	232	232	215	216/238	231	227
5'3"	239	234	239	238	220	223/246	238	234
5'4"	247	243	247	245	225	231/254	246	242
5'5"	255	250	255	251	231	238/262	254	249
5'6"	263	259	263	258	239	245/270	262	257
5'7"	271	265	271	265	245	253/278	270	265
5'8"	279	274	279	274	251	260/287	278	273
5'9"	287	281	287	282	258	268/295	286	281
5'10"	296	292	296	289	266	276/304	295	289
5'11"	304	298	304	298	274	284/312	303	298
6'	313	307	313	305	281	292/321	312	306
6'1"	322	314	322	313	289	300/330	321	315
6'2"	331	325	330	321	296	308/339	330	323
6'3"	340	336	339	329	303	316/348	339	332
6'4"	349	342	349	338	311	325/358	348	341
6'5"	358	353	358	347	319	334/367	357	350
6'6"	367	360	367	358	328	342/377	366	359
6'7"	377		377	367	336	351/387	376	368
6'8"	386		386	376	345	360/396		378
6'9"	396		396	385	352	369/406		387
6'10"				395	359			