

Underwriting Hints for Senior Life Applications

The **Senior Whole Life** and **Senior Graded Whole Life** products and applications were developed to require limited underwriting but these products are not guaranteed issue.

The application itself dictates most of the underwriting:

- **Section A – Life**
 - Yes to question 1 (prior Declines) will be considered on a case-by-case basis after review of the prior coverage. Many of these will still be Declines.
 - Yes to question 2 will cause the application to be issued at tobacco rates.
 - Yes to questions 3-5 will cause the life application to be declined.
- **Section B – Accident**
 - Yes to any questions in Section B will cause the A71 application to be issued with a rider.
 - REMINDER: If the Senior Life product is declined, the A71 will also be declined.
- **Section C – Cancer**
 - Yes to the question in Section C will cause the Cancer application to be declined.

Underwriting also reviews the application and uses the following process:

- If the applicant has ever been declined for any AIL Life policy in the past, the new application will undergo a review of prior medical history to see if an offer can be made. Some cases that were previously declined will qualify for coverage on the Senior Life product, but many will remain Declines.
- If the applicant has a condition within our Auto Decline guidelines (Underwriting Flash Sheet), the application will be declined.
- If the applicant has an existing Senior Life Plan in force that is at the maximum benefit, they are not eligible for more coverage, and the new application will be declined.
- If the applicant previously had a WLUW offered/issued, the application will be declined maximum coverage.
- If the applicant's weight on the application is more than 25 pounds greater than the maximum weight chart on the Flash Sheet, the application will be declined.
- All applications undergo a Prescription History Search (excluding Canada). If the applicant is taking any prescription medication (identified on a prescription check) that conflicts with the answers on the application or falls within an Auto Decline situation on the Underwriting Flash Sheet, the application will be declined.
 - **Hint***: It is a good idea to list the prescription medication(s) the applicant is taking and the reason they are taken in the agent notes section of eApp. This step will assure that the agent is not surprised by the prescription history search results.

*This hint is intended to help eliminate or reduce surprises in the outcome of the application. If you have a better idea of what to look for when taking an application, you can be better prepared and can better prepare the customer for a possible modification/rider, or you may choose not to complete an application if you know the client will be declined.

- A sample listing of some of the most frequently seen prescriptions with conditions resulting in a Decline:

- » **Alzheimer's Disease/Dementia:**

- Donepezil (Aricept)
- Galantamine (Razadyne, formerly Reminyl)
- Memantine (Namenda)
- Rivastigmine (Exelon)

- » **Chronic Kidney Failure/ Kidney Dialysis medications:**

- Calcitrol (Rocaltrol, Vectical)
- Calcium Acetate
- Cinacalcet (Sensipar)
- Lanthanum carbonate (Fosrenol)
- Renvela (Sevelamer)

- » **Transplant medications:**

- Azathioprine (Azasan or Imuran)
- Cyclosporine (Sandimmune, Neoral, Gengraf)
- Mycophenolate Mofetil
- Mycophenolic Acid (Cellcept, Myfortic)
- Tacrolimus – oral form (Envarsus XR, Protopic, Astagraf XL)

- » **Breast Cancer medications (Requiring a Call):**

- Anastrozole (Arimidex)
- Exemestane
- Letrozole (Femara)
- Tamoxifen

- » **Prostate Cancer medications:**

- Bicalutamide (Casodex)

- » **Chemotherapy medications:**

- Capecitabine (Xeloda)
- Hydroxyurea (Droxia, Hydrea)
- Methotrexate (Otrexup, Xatmep, Trexall, Rasuvo)

Note: The list of prescriptions above is not an all-inclusive list of the drugs that may cause a Decline.