

# Uninsurable Preexisting Conditions

## Underwriting guidelines

Additional underwriting, including a prescription drug check, and a live phone verification (PV) is required on all benefit amounts over \$50,000. Amounts under \$50,000 will be at the discretion of the underwriter. A maximum of \$100,000 may be issued to each of the following categories: Cancer, Heart Attack & Stroke, and Specified Disease (Base and Riders).

*The underwriter will make the final determination in all cases.*

## HIV/AIDS

Medical conditions including; but not limited to, those listed below are not insurable for any coverage:

- a. Acquired immune deficiency syndrome (AIDS)
- b. AIDS related complex (ARC)
- c. Human immunodeficiency syndrome (HIV)

## Cancer

Medical conditions including, but not limited to, those listed below are not insurable for any coverage under the base policy/rider if the customer has been diagnosed or received medical advice or treatment within the last 10 years:

- a. Internal cancer
- b. Melanoma
- c. Malignant tumors
- d. Carcinoma in situ, although it does not include nonmelanoma skin cancers, premalignant lesions, or benign tumors or polyps
- e. Blood cancer including; but not limited to:
  - i. Leukemia
  - ii. Lymphoma
  - iii. Non-Hodgkin's lymphoma
  - iv. Myelodysplastic syndrome
  - v. Myeloma
  - vi. Myeloproliferative Disorders; including but not
  - vii. limited to:
  - viii. Polycythemia vera
  - ix. Chronic idiopathic myelofibrosis
  - x. Essential thrombocythemia

## Heart Attack & Stroke

Medical conditions including, but not limited to those listed below are not insurable for any coverage under the base policy/rider if the customer has been diagnosed or received medical advice or treatment within the last 10 years.

Disease or disorder of the heart or circulatory system, heart conditions, heart valve disorders, or blood clots; including but not limited to:

- a. Aneurysm
- b. Angina pectoris
- c. Arteriosclerosis
- d. Atrial fibrillation/flutter
- e. Bradycardia
- f. Cardiomyopathy
- g. Carotid artery disease
- h. Cerebrovascular accident
- i. Congenital heart disease
- j. Congestive heart failure
- k. Cor pulmonale
- l. Dextrocardia
- m. Endocarditis
- n. Myocarditis
- o. Pericarditis
- p. Peripheral atherosclerosis
- q. Premature ventricular contractions (PVC)
- r. Raynaud's phenomenon
- s. Rheumatic fever
- t. Tachycardia
- u. Temporal arteritis
- v. Tetralogy of fallot
- w. Thromboangitis obliterans disease
- x. Thromboembolic disease
- y. Pulmonary hypertension
- z. Diabetes associated with insulin use, excluding gestational diabetes, neuropathy or retinopathy.
- aa. High blood pressure for which three or more medications have been taken concurrently.

## How Multiple Flexible Choice Policy Affect Policyholder

Here are examples of how multiple Flexible Choice policy purchases affect policyholder benefits.

**Joe bought a Critical Choice Cancer policy in 2010 with a benefit amount of \$25,000.**

**A** Joe buys a Flexible Choice Cancer base plan for \$10,000.

Joe is under the \$50,000 benefit amount and does not require Phone Verification.

**B.** Joe buys a Flexible Choice Heart base plan for \$10,000 and a Cancer Rider for the same amount.

The \$10,000 Cancer Rider still contributes to the \$100,00 maximum, but the overall benefit total for Cancer coverage is \$35,000, so Joe is below the \$50,000 threshold.

- C.** Jane, Joe's wife, wants to purchase a \$50,000 Flexible Choice Cancer plan for both of them.  
Jane would not need PV because she is under the \$50,000 threshold. Joe would go through PV because his \$50,000 would be added to the \$25,000 he has in force.
- D.** Joe wants to purchase a Flexible Choice Cancer Plan for \$80,000.  
We would require PV for Joe because his total amount requested is above \$50,000, but we would also reach out to Joe and advise that he is only eligible for \$75,000 in coverage of Flexible Choice Cancer because no one can have more than \$100,000 in coverage.
- E.** Joe wants to purchase a Flexible Choice Heart Plan for \$80,000.  
We would require PV for Joe because his total amount requested is above \$50,000. He can keep his cancer plan as well because each person can have up to \$100k per category of coverage.