FIELD UNDERWRITING GUIDE

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ABOUT THIS GUIDE
This guide is designed to help familiarize advisors with our life and critical illness insurance underwriting processes and to outline potential underwriting assessments for some of the most common medical conditions and non-medical risks.

Note that all possible underwriting decisions included in this guide are provided strictly for information purposes only. They are subject to change and the final underwriting decision may vary depending on the details provided in the life application and information obtained through our underwriting process.

Empire Life assumes no responsibility for any reliance made on or misuse or omissions of the information contained in this document.

Abbreviations Used In this Guide

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>NM</td>
<td>Non-medical</td>
</tr>
<tr>
<td>ECG</td>
<td>Electrocardiogram</td>
</tr>
<tr>
<td>PM</td>
<td>Paramedical</td>
</tr>
<tr>
<td>TM</td>
<td>Treadmill Stress ECG</td>
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<tr>
<td>UHIV</td>
<td>Urine HIV</td>
</tr>
<tr>
<td>IR</td>
<td>Inspection Report</td>
</tr>
<tr>
<td>APS</td>
<td>Attending Physician’s Statement</td>
</tr>
<tr>
<td>FQ</td>
<td>Financial Questionnaire</td>
</tr>
<tr>
<td>BP</td>
<td>Blood Profile</td>
</tr>
<tr>
<td>MVR</td>
<td>Motor Vehicle Report</td>
</tr>
<tr>
<td>EX</td>
<td>Exam by M.D.</td>
</tr>
<tr>
<td>PHI</td>
<td>Personal History Tele-Interview</td>
</tr>
</tbody>
</table>

IMPORTANT INFORMATION TO COLLECT WHEN COMPLETING THE APPLICATION

- Date of diagnosis of condition/illness
- Name of medication and dosage – past and current
- Related treatments such as radiation, surgery, counselling
- Time off work – Reason, dates and length
- Contact information for family doctor and any specialist seen
- Details for any completed investigations and are any pending
- Recurrence of symptoms if any – details and dates
- Complete applicable questionnaires, e.g. alcohol/drug use, aviation, asthma, foreign travel, scuba diving

What is a Trial Application?

Trial applications are preliminary applications which can be submitted to determine insurability for medical impairments, lifestyle issues, avocations, finances. Age and amount requirements are not arranged until eligibility has been determined. Usually the underwriter will obtain an Attending Physician’s Statement for medical impairments – appropriate questionnaires should be submitted with the application for medical and other issues which have prompted the trial application.

All questions on the application be completed in full with as much detail as possible.

What Underwriting Decisions Are Made?

- Accept – standard
- Accept – with rating and/or exclusion
- Decline – no offer will be made now or in the future
- Decline – with possible offer of reconsideration at future date
**SMOKING DEFINITION**

A smoker is considered someone who, in the past 12 months, has used more than 12 large cigars, or used any other tobacco, cigarette, e-cigarette, cigarillo, a pipe, chewing tobacco, nicotine patches or gum or betel nuts.

Tobacco use includes use of small cigars (approximate diameter of cigarettes)

Users of marijuana and hashish may be considered with non-smoker rates if there has been no use of e-cigarettes, tobacco or nicotine in any form, in the last 12 months.

Marijuana prescribed for medicinal purposes may also be considered with non-smoker rates if, as stated previously, there is no use of e-cigarettes, tobacco or nicotine in any form, in the last 12 months. Decisions other than standard non-smoker may be applied depending on a number of criteria including frequency, quantity and reason for use.

**USEFUL LINKS**

For detailed information about our underwriting process and requirements, please check our Underwriting section on the advisor website at www.empire.ca/advisor/support/underwriting/secure/en/.

---

**Helpful links**

| Tips to speed up Underwriting | www.empire.ca/advisor/support/underwriting/tips-to-speed-up-underwriting/secure/en/ |
| Guidelines for Immigrants | www.empire.ca/docs/pdf/secure/E-0769-GuidelinesForImmigrants-EN-web.pdf |

**BUILD CHART FOR LIFE INSURANCE**

<table>
<thead>
<tr>
<th>Height(ft./in.)</th>
<th>125%</th>
<th>150%</th>
<th>175%</th>
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The above ratings are based on Empire Life’s guidelines as of to July 2020, and are subject to change. Combinations of build with any other risk factors may result in a higher rating or decline. The chart should be used as a reference tool only. Each Cell is the maximum weight allowed for each rating.

**EXAMPLE:** If your client is 5’2” 207 lbs, they would be rated 150% for build. If your client is 5’5” 245 lbs, your client would be rated 200% for build.
### BUILD CHART FOR CRITICAL ILLNESS INSURANCE

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The above ratings are based on Empire Life’s guidelines as of July 2020, and are subject to change. Combinations of build with any other risk factors may result in a higher rating or decline. The chart should be used as a reference tool only. Each Cell is the maximum weight allowed for each rating.

EXAMPLE: If your client is 5’2” 199 lbs, they would be rated 150% for build. If your client is 5’5” 245 lbs, your client would be rated 200% for build.

### MEDICAL RISKS – DETAILS AND POSSIBLE DECISIONS

#### Alcohol Excess Use

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Excessive alcohol use, can lead to increased risk of health problems such as injuries, liver disease, and cancer | • Current age  
• Past and current use – Amount consumed, i.e. daily, weekly and how many at each sitting  
• Ever been advised to reduce consumption or seek treatment  
• Details of any treatment  
• If treated, any relapses  
• Ever had a DUI | Alcohol and Drug Use Questionnaire  
APS  
Blood profile | Depends on age, amount of consumption, dates, any associated risks  
If no treatment and drinking 5 or more drinks per day – 200% to decline  
If treatment and any relapses – decline  
If treatment and no relapse in one year from date treatment ended – possible high rating | Depends on age, amount of consumption, dates, any associated risks  
If no treatment and drinking 5 or more drinks per day – 200% to decline  
If treatment and any relapses – decline  
If treatment and no relapse for 3 years from date treatment ended – possible high rating |
# Anemia

Anemia is a condition that develops when blood lacks enough healthy red blood cells or hemoglobin. It can be caused by blood loss, decreased red blood cell production, iron or vitamin deficiency, bone marrow problems.

**Considerations**
- Current age
- Date of diagnosis
- Severity of symptoms
- Frequency of attacks
- Type of medication
- Dosage of medication
- Any hospitalization or ER visits
- Any limitation of activities
- Any other medical condition

**Requirements**
- APS

**Possible Underwriting Decision – Life**
- Must have been fully investigated
- Depends on type, cause and severity – can range from standard to decline

**Possible Underwriting Decision – Critical Illness**
- Must have been fully investigated
- Depends on type, cause and severity – can range from standard to decline

---

# Angioplasty

Angioplasty – Refer to Coronary Artery Disease

# Anxiety/Stress (also see Depression)

Fear and worry out of proportion to the circumstances. Sometimes accompanied by physical symptoms such as palpitations. There are several types of anxiety including generalized, panic attacks, stress. Can be situational and related to life events such as loss of employment, divorce, bereavement.

**Considerations**
- Current age
- Date of diagnosis and onset
- Severity of disease
- Type of affective disorder
- Frequency of episodes
- Treatment (medication and dosage; any counselling)
- Any suicidal thoughts or attempts
- Any hospitalization or ER visits
- Any limitation of activities
- Any time off work

**Requirements**
- Nervous Disorder questionnaire
  - Possibly APS depending on severity, date of onset, duration

**Possible Underwriting Decision – Life**
- If off work at time of application – decline with possible reconsideration in one year
  - Mild (not associated with depression) – standard
  - Moderate – 150% to decline
  - Severe – 200% to decline

**Possible Underwriting Decision – Critical Illness**
- If off work at time of application – decline with possible reconsideration in one year
  - Mild to moderate (not associated with depression) – standard
  - Severe – 150% to decline
**Arthritis**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arthritis</td>
<td>• Current age • Type • Date of onset • Severity • Treatment • Medication and dosage • Any limitation of activities</td>
<td>APS</td>
<td>Depends on type and severity</td>
<td>Depends on type and severity</td>
</tr>
<tr>
<td></td>
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<td></td>
<td><strong>Osteoarthritis</strong> • Mild or moderate – standard • Severe – 200% to decline • Pending surgery – decline for 6 months</td>
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<tr>
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<td></td>
<td><strong>Rheumatoid Arthritis</strong> • Mild – 150% • Moderate – 200% • Severe – 250% to decline</td>
<td></td>
</tr>
</tbody>
</table>

**Asthma**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthma</td>
<td>• Current age • Date of diagnosis • Severity • Type of medication / treatment • Smoking • Any visits to the ER or hospitalization</td>
<td>APS</td>
<td>Mild – Standard • Moderate – 150% to 250% • Severe – 250% to Decline</td>
<td>• Mild to moderate – Standard</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Respiratory questionnaire</td>
<td></td>
<td>• Severe – 175% to Decline</td>
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<td>• Smoker – higher rating</td>
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</tbody>
</table>
### Attention Deficit Hyperactivity Disorder

<table>
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<tr>
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<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADHD</td>
<td>• Current age • Date of diagnosis • Stability of disease • Functional and social capacity • Any other associated conditions such as any other mental health disorders • Treatment</td>
<td>APS</td>
<td>Children&lt;br&gt;Mild to moderate – no significant behavioural problems • Standard&lt;br&gt;Severe or with behavioural problems or other mental disorders • Decline – possible reconsideration at age 16</td>
<td>Children&lt;br&gt;Mild to moderate – no significant behavioural problems • Standard&lt;br&gt;Severe or with behavioural problems or other associated disorders • Decline – possible reconsideration at age 16</td>
</tr>
<tr>
<td>Adults</td>
<td></td>
<td></td>
<td>Adults&lt;br&gt;No associated complications • Standard&lt;br&gt;With complications such as depression, anxiety • Rate for complications</td>
<td>Adults&lt;br&gt;No associated disorders • Standard&lt;br&gt;With complications such as depression, anxiety • Rate for complications</td>
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</table>

### Atrial Fibrillation/Flutter

<table>
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<tr>
<th>Condition</th>
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<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atrial fibrillation/flutter</td>
<td>• Current age • Heart rate • Type – Constant or intermittent • High blood pressure • Any other cardiac impairments • Date of last episode</td>
<td>APS</td>
<td>Constant type 150% to decline&lt;br&gt;Intermittent type – Standard to decline</td>
<td>Constant type – decline&lt;br&gt;Intermittent type – 150% to decline</td>
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### Autism Spectrum Disorder

<table>
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<tr>
<th>Condition</th>
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<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Autism spectrum disorder (ASD) is a developmental condition that can involve challenges in social interaction, communications, and behaviour. Asperger’s Syndrome is included | • Current age  
• Date of diagnosis  
• Functional and social capacity  
• Able to live independently  
• Education  
• Employment situation  
• Treatment  
• Any other co-existing conditions such anxiety, depression, ADHD | APS          | Age 8 or younger – decline  
Over age 8 – Standard to decline – depends on date of diagnosis, severity, level of independence, any complications | Age 8 or younger – decline  
Over age 8 – Standard to decline – depends on date of diagnosis, severity, level of independence, any complications |

### Blood Pressure (Hypertension)

<table>
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<tr>
<th>Condition</th>
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<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Primary hypertension is the most common type and can be caused by diet, stress and genetics. Secondary hypertension is related to an underlying cause such as kidney disease | • Current age  
• Date of diagnosis  
• Type of medication  
• Current blood pressure reading  
• Compliance with treatment and follow-up  
• Smoking  
• Any other medical condition, such as obesity, diabetes, kidney disease, heart disease, stroke, etc. | Para-medical or Vital Stats  
Blood profile  
Urine HIV | Depends on severity and control  
If treated, well controlled and has regular follow-ups with attending physician – can usually be standard | Depends on severity and control  
If treated, well controlled and has regular follow-ups with attending physician – can usually be standard |
**Cancer – Breast**

<table>
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<tr>
<th>Condition</th>
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</tr>
</thead>
</table>
| Breast cancer is the most common type of cancer in women and most are diagnosed between ages 50-64. It is the leading cause of cancer death in women | - Current age  
- Date of diagnosis  
- Type and stage  
- Type of treatment including surgery  
- Date treatment completed  
- Any recurrence or spread | APS to include pathology report | Depends on type, staging, any lymph node involvement and the length of time since treatment ended  
Rating can be a percentage, flat extras for specified period of time from number of years since treatment ended, or a combination of both  
Some carcinoma-in-situ can be standard after 3 years since treatment ceased  
If diagnosed at a young age (<50), an additional 150% rating will likely apply | The only types that can be considered are Ductal carcinoma in-situ (DCIS) and Lobular carcinoma in-situ (LCIS), Stage 0 and diagnosed over 5 to 10 years depending on age.  
In these cases, if insurable, exclusion will apply for breast cancer and metastases,  
All others are Decline |

**Cancer – Colorectal**

<table>
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<tr>
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</tr>
</thead>
</table>
| Colorectal cancer can affect any part of the large bowel, although it often appears in the lower part of the colon, the sigmoid colon or the rectum | - Current age  
- Date of diagnosis  
- Grade and stage of tumour  
- Type of treatment  
- Date treatment completed  
- Any recurrence or spread | APS to include pathology report | Depends on type, staging, any lymph node involvement and number of years since treatment ended  
Rating can be a combination of percentage and reducing flat extra  
Some carcinoma-in-situ can be standard after 3 years since treatment ceased  
Others are rated to decline.  
Rating can range from $5.00/1,000 to $15.00/1,000 and possible 150% | Carcinoma-in-situ treated with bowel resection with regular follow ups and no family history may be considered 5 years after treatment ended with exclusion for cancer of the colon and metastases  
Stage 1 may be considered 7 years after date treatment ended with exclusion for cancer of the colon and metastases.  
All other stages are Decline |
## Cancer – Lung

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<tr>
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<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Lung cancer is the uncontrolled growth of abnormal cells that starts in one or both lungs. There are 2 main types – non-small cell and small cell. Small cell grows more quickly | • Current age  
• Date of diagnosis  
• Type and stage  
• Type of treatment  
• Date treatment completed  
• Any recurrence or spread | APS to include pathology report | Depends on type, staging, any lymph node involvement, smoking and number of years since treatment ended  
Rating is usually flat extras for a reducing number of years since treatment ended  
Some low grade tumors can be standard after 5 years since date of last treatment  
Others are rated to decline. Rating can range from $10.00/1,000 to $15.00/1,000  
If still smokes, decline | All cases are Decline  
Do not order APS |

## Cancer – Prostate

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<tr>
<th>Condition</th>
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<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Prostate cancer is usually a slow growing tumour and one of the most common forms of cancer in males | • Current age  
• Date of diagnosis  
• Type and stage  
• Type of treatment  
• Date treatment completed  
• Any recurrence or spread | APS to include pathology report + current PSA | Depends on type, staging, any lymph node involvement and length of time since treatment ended  
Rating are usually a flat extra for a reducing number of years since treatment ended  
Adenocarcinoma, Stage 1, can be standard after one year since date of last treatment  
Others are rated to decline. Rating can range from $7.50/1,000 to $10.00/1,000  
Stage 1 may be considered with exclusion 10 years after treatment ended.  
Stages 2 to 4 – Decline | Stage 1 may be considered with exclusion 10 years after treatment ended.  
Stages 2 to 4 – Decline |
### Cancer – Skin – Basal Cell

<table>
<thead>
<tr>
<th>Condition</th>
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</thead>
</table>
| Basal Cell Carcinoma is the most common skin cancer. It rarely spreads or causes death but if it does invade surrounding tissues it is considered to be malignant | • Current age  
• Pathology – confirmation that it is basal cell  
• Date of diagnosis.  
• Type of treatment  
• Date treatment completed  
• Any recurrence or spread  
• Any dysplastic nevi | APS with pathology report  
If any dysplastic nevi, confirmation that is being followed | If less than 5.0 cm, usually standard after lesion has been completely removed  
Others are rated or declined  
Rating is usually a flat extra for a reducing number of years since treatment ended. It can range from $5.00/1,000 to $7.50/1,000 | Stage 0 and Stage 1 may be standard.  
Stage 2 may be considered with exclusion for skin cancer and any metastases.  
Stage 3 and 4 – Decline. |

### Cancer – Skin Squamous Cell

<table>
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<tr>
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</tr>
</thead>
</table>
| Squamous cell carcinoma is cancer of the squamous cells of the skin. It can also occur in other parts of the body such as digestive tract, lungs, bladder | • Current age  
• Pathology  
• Date of diagnosis.  
• Type of treatment  
• Date treatment completed  
• Any recurrence or spread  
• Any dysplastic nevi | APS with pathology report  
If any dysplastic nevi, confirmation that is being followed | Depends on location. If skin and is Stage 0 or 1 could be standard after removal  
Others are rated or declined  
Rating is usually a flat extra for a reducing number of years since treatment ended. It can range from $5.00/1,000 to $15.00/1,000 | History of one lesion only  
Stage 0 standard  
Stage 1 150%  
Stage 2 Decline for 3 years and then exclusion for skin cancer and any metastases  
Stages 3 and 4 – Decline |
### Cancer – Skin – Melanoma

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Melanoma</td>
<td>• Current age</td>
<td>APS with pathology report</td>
<td>Melanoma-in-situ – declined for 3 months after treatment and possible standard thereafter</td>
<td>Stage 0 – decline for 3 months from end of treatment and then exclude melanoma and metastases</td>
</tr>
<tr>
<td></td>
<td>• Pathology</td>
<td>If any dysplastic nevi, confirmation that is being followed</td>
<td>Others are rated to decline</td>
<td>Stage 1A – Decline for 4 years from end of treatment and then excluded melanoma and metastases.</td>
</tr>
<tr>
<td></td>
<td>• Date of diagnosis</td>
<td></td>
<td>Rating is usually a flat extra for a reducing number of years since treatment ended. It can range from $7.50/1,000 to $15.00/1,000</td>
<td>Stage 1B, 2, 3 and 4 – Decline</td>
</tr>
<tr>
<td></td>
<td>• Type of treatment</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• Date treatment completed</td>
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<tr>
<td></td>
<td>• Any recurrence</td>
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<tr>
<td></td>
<td>or spread</td>
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<tr>
<td></td>
<td>• Any dysplastic nevi</td>
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</tbody>
</table>

### Cancer – Thyroid

<table>
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<tr>
<th>Condition</th>
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<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thyroid</td>
<td>• Current age</td>
<td>APS with pathology report</td>
<td>Papillary tumor 2 cm or less – reducing flat extra of $5.00/1,000 – may be standard after 3 years</td>
<td>All ages, cancer size &lt; 2 cm at time of diagnosis, total thyroidectomy, confined to the organ, no nodes, no lymphovascular involvement and post-operative ablative radioactive iodine and normal follow-up</td>
</tr>
<tr>
<td>cancer</td>
<td>• Pathology</td>
<td></td>
<td>Papillary tumours &gt; 2 cm and follicular tumours – reducing flat extra in range of $5.00/1,000 to $15.00/1,000. Possible standard after 5 to 6 years</td>
<td>0-5 years – Decline</td>
</tr>
<tr>
<td></td>
<td>• Type of cancer</td>
<td></td>
<td>Medullary – rating could be a combination of percentage and flat extra ranging from $5.00/1,000 to $15.00/1,000</td>
<td>5-10 years Exclude cancer of thyroid</td>
</tr>
<tr>
<td></td>
<td>• Date of diagnosis</td>
<td></td>
<td>Anaplastic – usually a decline</td>
<td>Thereafter – standard.</td>
</tr>
<tr>
<td></td>
<td>• Type of treatment</td>
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<tr>
<td></td>
<td>• Date treatment completed</td>
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<tr>
<td></td>
<td>• Any recurrence</td>
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<td></td>
<td>or spread</td>
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### Cancer

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<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Cancers – other than those listed above | • Current age  
• Date of diagnosis  
• Type and stage  
• Type of treatment including surgery  
• Date treatment completed  
• Any recurrence or spread | APS to include pathology report | Depends on type, staging, any lymph node involvement and the length of time since treatment ended  
Rating can be a percentage, flat extras for specified period of time from number of years since treatment ended, or a combination of both  
Some carcinoma-in-situ can be standard after 3 years since treatment ceased | Very early stages may be considered with exclusion.  
Others – decline |

### Chronic Obstructive Lung Disease (including chronic bronchitis and emphysema)

<table>
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<tr>
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</tr>
</thead>
</table>
| Chronic obstructive pulmonary disease (COPD) is an inflammatory lung disease that causes obstructed airflow from the lungs. Symptoms include breathing difficulty, cough, sputum production and wheezing | • Smoking status  
• Severity  
• Symptoms  
• Results of pulmonary tests | Respiratory Questionnaire APS(depending on severity) | Mild – Std to 175%  
Moderate – 200% to Decline  
Severe – Usually decline  
** Smoking results in the higher ratings | Mild – 150% to 200%  
Moderate – 200% to decline  
Severe – decline  
** Smoking results in the higher ratings |
**Concussion**

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</table>
| A concussion is a traumatic brain injury that affects brain function. Effects are usually temporary and can include headache, vision impairment, tremor, dizziness, problems with concentration and memory | • Severity  
• Any residual neurological deficits  
• MRI results  
• Number of concussions  
• Time since last concussion | APS if severe and/or multiple concussion | Mild and full recovery – standard  
More severe (hemorrhage or loss of consciousness):  
Full recovery and no neurological deficits:  
Decline if within one year and then standard  
With neurological deficits:  
Mild – assess for residuals  
Moderate to severe – decline  
Multiple – I.C. | Mild and full recovery – standard.  
More severe (hemorrhage or loss of consciousness):  
Full recovery and no neurological deficits:  
Decline if within one year and then standard  
With neurological deficits:  
Mild – assess for residuals and possible exclusion of some covered conditions  
Moderate to severe – decline  
Multiple – I.C. |

**Coronary Artery Disease (including by-pass surgery and angioplasty)**

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</table>
| Coronary artery disease is failure of the coronary arteries to provide an adequate blood flow to the heart. Manifestations are silent heart attack (no symptoms – usually detected on routine testing), Angina (chest pain or squeezing sensation), heart attack or myocardial infarction | • Current age  
• Date of onset  
• Number of arteries involved  
• Medications  
• Dosage of medication  
• Current blood pressure reading  
• Current cholesterol reading  
• Regular follow ups  
• Details of hospitalization  
• Any limitation of activities  
• Smoking  
• Any other medical condition, such as obesity, diabetes, stroke  
• Any current symptoms | APS to include cardiac test results e.g. – ECG, Stress ECG, angiogram, perfusions studies | If diagnosed before age 35 – decline  
If diagnosed between 35 - 40 – individual consideration will be given and high rating may be possible  
If surgery or angioplasty within 6 months – declined  
Others will depend on type, severity, follow up and smoking status  
Rating can range from 200% to decline | All cases – Decline  
– Do not order Requirements |
**Crohn’s Disease (also see Ulcerative colitis)**

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</table>
| Crohn’s disease is a type of inflammatory bowel disease that may affect any part of the gastrointestinal tract | • Current age  
• Date of diagnosis.  
• Symptoms and severity  
• Frequency of flare-ups  
• Treatment (type, medication, dosage, any surgery)  
• Any hospitalization or ER visits  
• Any limitation of activities  
• Any complications or other medical condition, such as anemia, arthritis or other inflammatory disease | APS | Depends on age of diagnosis and severity:  
**MILD**  
• Current – possible 175%  
• Within 1 -2 years of last flare up – possible 150%  
• > 2 years – possible standard  
**MODERATE**  
• Within 1 year of last flare up – possible 200%  
• 1-5 years with no flare ups – possible 150% to 175%  
• > 5 years with no flare ups – possible standard  
**SEVERE**  
• If severe within 2 years – possible 300%  
• > 2 years with no flare ups – possible 200% to 250%  
• Any surgery – decline for 6 months | All cases within 2 years – treat as severe.  
Medical treatment only:  
All cases with any complications such as weight loss, anemia arthritis, iritis are decline.  
**MILD**  
150% and exclude cancer of the large and small intestines including metastases.  
**MODERATE**  
175% and exclude – cancer of the large and small intestines including metastases.  
**SEVERE**  
200% and exclude cancer of the large and small intestines including metastases.  
**With Surgery:**  
Within 12 months – Decline  
After 12 months , no symptoms – 150% and exclude cancer of the large and small intestines including metastases.  
With any complications post surgery – Individual Consideration – usually decline.
## Depression (also see Anxiety)

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</table>
| Depression is a serious medical condition with many emotional, physical, behavioural symptoms | • Number of episodes  
• Date of last episode  
• Severity  
• Time loss from work  
• Medication and or psychotherapy  
• Any hospitalization or ER visits  
• Any suicidal thought, gestures or attempts  
• Any drug or alcohol use | APS Psychiatric questionnaire | If off work at time of application – decline with possible reconsideration in one year  
Depends on severity, frequency and date of last episode  
If only one mild episode – could be standard  
Others – 150% to decline  
If suicide attempt, rating will be higher, also may include a reducing flat extra of $7.50/1,000 for at least 3 years | Mild to moderate – standard  
Severe Decline for one year from date of diagnosis or in patient treatment. After that:  
1-3 years – 200%  
3-4 years – 150%.  
After 4 years – standard  
If one suicide attempt decline for 5 years and then rate as above. If more than one attempt – Decline |

## Diabetes – Type 1

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</table>
| Type 1 diabetes is a disease in which the pancreas does not produce any insulin. Previously was called Juvenile Diabetes or Insulin Dependent Diabetes. Usually occurs before age 30 | • Current age.  
• Date of diagnosis  
• Duration  
• Treatment (type, medication, dosage)  
• Degree of control  
• Compliance with treatment  
• Well followed  
• Smoking  
• Any hospitalization or ER visits  
• Any other medical condition, such as obesity, kidney disorder, vision problem, heart disease, stroke, circulatory problems, neuropathy | APS Blood profile to include HGB A1C and HOS | Depends on gender, age diagnosed, duration, control, smoking habits any co-morbid conditions  
Rating can range from 150% for best cases to decline | All cases – Decline  
– Do not order Requirements |
# Diabetes – Type 2

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</table>
| Type 2 diabetes is a disease in which your pancreas does not produce enough insulin, or your body does not efficiently use the insulin it makes. It is also known as Non-Insulin dependent diabetes | • Current age  
• Date of diagnosis  
• Duration  
• Treatment (type, medication, dosage)  
• Degree of control  
• Compliance with treatment  
• Well followed  
• Smoking  
• Any hospitalization or ER visits  
• Any other medical condition, such as obesity, kidney disorder, vision problem, heart disease, stroke, circulatory problems, neuropathy | APS  
Blood profile to include HGB A1C and HOS | Depends on gender, age diagnosed, duration, control, smoking habits any co-morbid conditions  
Rating can range from 150% for best cases to decline | If treated with insulin, HbA1C > 8.0, any ratable complications such as high blood pressure, cholesterol or build – Decline  
If under age 40 – Decline  
If over age 40 - 150% to Decline depending on age, duration and level of control |

## Drug Use

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</tr>
</thead>
</table>
| Pattern of use of a substance or use of a substance that could lead to abuse | • Current age  
• Type of drug use past and current  
• Duration of use and date of last use  
• Frequency of usage  
• Any treatment and if so details | Alcohol and Drug Use Questionnaire | Depends on type of drug use, frequency, date last used:  
**Marijuana**  
Occasional use – standard  
If more than occasional use – standard to decline  
**Medicinal – Decision depends on underlying reason for taking medicinal marijuana**  
Other drugs such as **Cocaine**  
Decline for 3 years from date of last use and then high rating  
Any IV drug use – decline for 5 years with no history of relapse  
Combination of multiple drugs may warrant a longer decline period | Depends on type of drug use, frequency, date last used:  
**Marijuana**  
Occasional use – standard  
If more than occasional use – standard to decline  
**Medicinal – Decision depends on underlying reason for taking medicinal marijuana**  
Other drugs such as **Cocaine**  
Decline for 3 years from date of last use and then high rating.  
Any IV drug use – decline  
Combination of multiple drugs may warrant a longer decline period |
## Epilepsy

Epilepsy is a central nervous system (neurological) disorder in which brain activity becomes abnormal, causing seizures. There are many possible causes.

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</tr>
</thead>
<tbody>
<tr>
<td>Epilepsy</td>
<td>• Age • Cause</td>
<td>Seizures Questionnaire APS (depending on severity)</td>
<td><strong>Single seizure:</strong>&lt;br&gt;Unknown cause –&lt;br&gt;&lt; 6 months decline&lt;br&gt;&gt; 6 months possible standard&lt;br&gt;Known Cause – rate for cause&lt;br&gt;<strong>Epilepsy on medication – Cause Unknown</strong>&lt;br&gt;Mild&lt;br&gt;Last episode:&lt;br&gt;&lt; 6 months – decline&lt;br&gt;6 months to 2 years – 200%&lt;br&gt;&gt; 2 to 5 years – 150%&lt;br&gt;&gt; 5 years – standard&lt;br&gt;Moderate&lt;br&gt;Last episode:&lt;br&gt;&lt; 6 months – decline&lt;br&gt;6 months - 2 years – 300%&lt;br&gt;&gt; 2 - 5 years – 200%&lt;br&gt;&gt; 5 years – 150%&lt;br&gt;Severe&lt;br&gt;Last episode:&lt;br&gt;&lt; 2 years – decline&lt;br&gt;2-5 years – 300%&lt;br&gt;6-8 years – 200%&lt;br&gt;&gt; 8 years – 150%&lt;br&gt;<strong>Other seizures</strong>&lt;br&gt;Seizures attributed to fever may be standard.&lt;br&gt;Other known cause e.g alcohol withdrawal, brain tumor – rate for cause and severity</td>
<td><strong>Single seizure:</strong>&lt;br&gt;Unknown cause –&lt;br&gt;&lt; 1 year – decline&lt;br&gt;1-3 years – 150%&lt;br&gt;&gt; 3 years – Standard&lt;br&gt;Known Cause – rate for cause&lt;br&gt;<strong>Epilepsy on medication – Cause Unknown</strong>&lt;br&gt;Mild&lt;br&gt;Last episode &lt; 1 year – decline&lt;br&gt;1-2 years – 250%&lt;br&gt;&gt; 2-5 years – 200%&lt;br&gt;&gt; 5 years – 150%&lt;br&gt;Moderate&lt;br&gt;Last episode&lt;br&gt;&lt; 2 years – decline&lt;br&gt;2-5 years – 250%&lt;br&gt;&gt; 5 years – 175%&lt;br&gt;Severe&lt;br&gt;Decline&lt;br&gt;<strong>Other Seizures</strong>:&lt;br&gt;Known cause e.g alcohol withdrawal, brain tumor – rate for cause and severity</td>
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</table>

Seizures attributed to fever may be standard. Other known cause e.g alcohol withdrawal, brain tumor – rate for cause and severity.
### Fibromyalgia

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<th>Requirements</th>
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<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Fibromyalgia | • Current age  
  • Date of diagnosis  
  • Details of time loss from work  
  • Symptoms  
  • Severity  
  • Treatment  
  • Underlying disease ruled out | APS depending on severity | Usually standard as long as underlying disease ruled out and the client is not on disability  
Use of narcotic drugs may result in a rating | No underlying disorder – standard  
Otherwise – rate for cause |

### Gastric Bypass surgery (Bariatric/weight loss surgery)

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Surgical procedure for treatment of obesity. Procedures include the Roux-en-Y gastric by-pass (RYGB), the laparoscopic sleeve gastrectomy (LSG), the laparoscopic adjustable gastric band (LAGB), and the endo luminal obesity procedure. | • Date of surgery  
  • Type of surgery  
  • Any complications such as nutritional deficiencies due to malabsorption, fatty liver, chronic diarrhea, gastric reflux  
  • Current build  
  • Amount of weight loss | APS | Decline within 6 months of surgery.  
After 6 months and no complications, assessment is based on current height and weight  
After 6 months and complications, assessment is based on current height and weight and the complications | Decline within one year of surgery  
After one year and no complications, assessment is based on current height and weight  
After one year and complications, assessment is based on current height and weight and the complications |

### Hepatitis A

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
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</tr>
</thead>
</table>
| Hepatitis A | • Age  
  • Number of attacks  
  • Date since complete recovery  
  • Treatment  
  • Blood test results | APS depending on severity and how long since recovered | If present – decline until recovered  
If completely recovered and liver enzymes are normal – could be standard  
If liver enzymes are not normal – could be rated 150% to decline | If present – decline until recovered  
If completely recovered and liver enzymes are normal for minimum 3 months – could be standard  
If liver enzymes are not normal – could be rated 150% to decline  
If status is questionable – Decline |
## Hepatitis B

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B is a virus that attacks the liver. It can cause serious disease, including permanent liver damage. It can be acute (recovered) or chronic</td>
<td>• Age at infection&lt;br&gt;• Acute or chronic&lt;br&gt;• If acute, date since compete recovery&lt;br&gt;• If chronic – whether it is well followed&lt;br&gt;• Any symptoms such as fever, jaundice&lt;br&gt;• Treatment&lt;br&gt;• Blood test results</td>
<td>APS&lt;br&gt;Current Blood profile with liver enzyme testing and Hepatitis screening</td>
<td>Acute infection – could be standard depending on Hepatitis screening results&lt;br&gt;Chronic infection – could be 175% to decline depending on blood profile results</td>
<td>Acute infection – could be standard depending on Hepatitis screening results&lt;br&gt;Chronic infection – possible 125% with exclusion for liver cancer and metastases – to decline depending on blood profile results</td>
</tr>
</tbody>
</table>

## Hepatitis C

<table>
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<tr>
<th>Condition</th>
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<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis C is an inflammation of the liver caused by infection with the hepatitis C virus. It can cause serious disease, including permanent liver damage</td>
<td>• Age at infection&lt;br&gt;• Current age&lt;br&gt;• Acute or chronic&lt;br&gt;• If recovered, date since compete recovery&lt;br&gt;• If chronic – whether it is well followed&lt;br&gt;• Any symptoms such as fever, jaundice&lt;br&gt;• Treatment&lt;br&gt;• Blood test results&lt;br&gt;• Biopsy results&lt;br&gt;• Alcohol consumption</td>
<td>APS with biopsy results&lt;br&gt;Current Blood profile with liver enzyme testing and Hepatitis screening</td>
<td>Treated infection – decline if less than 6 months since treatment ceased&lt;br&gt;If more than 6 months since treatment ceased, could be standard to decline depending on blood profile results, any fibrosis of liver&lt;br&gt;Untreated infection – could be 150% to decline depending on age, blood profile results and any liver fibrosis</td>
<td>Treated infection – decline if less than 6 months since treatment ceased&lt;br&gt;If more than 6 months since treatment ceased, could be standard to decline depending on blood profile results, any fibrosis of liver&lt;br&gt;If insurable, likely will also have exclusion for liver cancer and any metastases&lt;br&gt;Untreated infection – could be 150% to decline depending on age, blood profile results and any liver fibrosis. If insurable, likely will also have exclusion for liver cancer and any metastases</td>
</tr>
</tbody>
</table>
### Hodgkin’s disease (Hodgkin’s Lymphoma)

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Hodgkin lymphoma is a malignant disease of the lymphatic system | • Current age  
• Date of diagnosis  
• Type and stage  
• Type of treatment  
• Date treatment completed  
• Any recurrence or spread | APS with pathology report | Ratings depend on staging and date since last treated  
All cases are declined for at least one year. After that, a reducing flat extra is possible in the range of $8.00/1,000 to $16.00/1,000 for 5 years  
A percentage rating of 150% may be added depending on type of treatment | All cases – Decline  
Do not order APS |

### Non-Hodgkin’s Disease (Non-Hodgkin’s Lymphoma)

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Non - Hodgkin’s Lymphomas are cancers of the lymphoid tissue. NHL has 30 different subtypes, with differing characteristics | • Current age  
• Date of diagnosis  
• Type and stage  
• Type of treatment  
• Date treatment completed  
• Any recurrence or spread | APS with pathology report | Ratings depend on staging and date since last treated  
All cases are declined for at least 3 years post-treatment. After that ratings can range from 200% to decline | All cases – Decline  
Do not order APS |

### Hyperthyroid

<table>
<thead>
<tr>
<th>Condition</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Hyperthyroidism is a condition where the thyroid gland makes too much of the thyroid hormone. It can cause weakness, fatigue, increased heart rate, weight loss | • Current age  
• Date of diagnosis and onset  
• Treatment (surgery, medication)  
• Results of any tests, biopsies  
• Any limitation of activities  
• Any hospitalization or ER visits  
• Any complications | APS | Present  
If no symptoms – could be standard  
If having symptoms declined for further investigation  
**Surgery or treatment completed**  
If within 6 months – declined  
If > 6 months – standard to 200% | Present  
If no symptoms – could be standard  
If having symptoms declined for further investigation  
**Surgery or treatment completed**  
If within 6 months – declined  
If > 6 months – standard to decline depending if any complications.  
If persistent exophthalmos – exclusion for blindness |
## Hypothyroid

<table>
<thead>
<tr>
<th>Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hypothyroidism is a condition where the thyroid levels are decreased. It can cause weakness, fatigue, cold intolerance, weight gain, depression</td>
</tr>
</tbody>
</table>

### Considerations
- Current age
- Date of diagnosis and onset
- Treatment
- Any limitation of activities
- Any complications

### Requirements
Details

### Possible Underwriting Decision – Life
- Juveniles: Individual Consideration depending on age of diagnosis and severity.
- **ADULTS**
  - Untreated: No symptoms – or complications – standard
  - With symptoms: 150% to Decline
- **Treated**
  - No symptoms – standard
  - Treatment with symptoms: 175% to Decline

### Possible Underwriting Decision – Critical Illness
- Juveniles: Individual Consideration depending on age of diagnosis and severity.
- **ADULTS**
  - Untreated: No symptoms – or complications – standard
  - With symptoms: 175% to Decline
- **Treated**
  - No symptoms – standard
  - Treatment with symptoms – Decline

## Kidney Disease – Glomerulonephritis

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>There are many different types of kidney diseases. Glomerulonephritis is one of the most common. It can be acute or chronic.</td>
</tr>
</tbody>
</table>

### Considerations
- Current age
- Date of diagnosis
- Severity
- Type (acute or chronic)
- Treatment
- Date of recovery
- Any progression
- Any hospitalization or ER visits
- Any complications

### Requirements
- APS Blood profile if APS does not have current info
- HOS if APS does not have current info

### Possible Underwriting Decision – Life
- **Acute**
  - Within one year of diagnosis: declined
  - Could be standard if recovered for one year and only one occurrence
  - Otherwise would be rated in range of 150% to 200% depending on number of years since recovery
- **Chronic**
  - 200% to decline depending on severity

### Possible Underwriting Decision – Critical Illness
- **Acute**
  - Present or within 5 years of diagnosis: declined
  - 5 - 10 years: no complications – 150%
  - More than 10 years: Standard
- **Chronic**
  - Decline
### Multiple Sclerosis

<table>
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<tr>
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</tr>
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</table>
| Multiple sclerosis is an inflammatory disease in which the insulating covers in the nerve cells of the spinal cord and brain are damaged | • Current age  
• Date of onset  
• Severity  
• Treatment (type, dosage)  
• Any progression  
• Any limitation of activities  
• Any hospitalization or ER visits | APS | Depends on severity and date of onset  
Ratings are in the range of 150% for mild to decline for severe | All cases – Decline  
Do not order APS |

### Parkinson’s Disease

<table>
<thead>
<tr>
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</tr>
</thead>
</table>
| Parkinson’s Disease is a progressive degenerative disease. Signs and symptoms are tremors, stiffness, slowness of movements, impaired balance and co-ordination. | • Severity  
• Age of diagnosis  
• Treatment  
• Stability | APS | If diagnosed under age 35 – Decline  
If diagnosed over age 35 – 150% to decline depending on severity and level of control | All cases – Decline  
Do not order APS |

### Sleep Apnea

<table>
<thead>
<tr>
<th>Condition</th>
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</table>
| Sleep apnea is a common sleep disorder characterized by brief interruptions of breathing (apneas) during sleep. | • Current age  
• Date of diagnosis  
• Type – whether it is central, mixed or obstructive  
• Severity of disease  
• Treatment (CPAP or surgery)  
• Compliance with treatment  
• Date of last sleep study  
• Any other conditions such as obesity, hypertension, heart disease | APS to include sleep study results | Central – Decline  
Obstructive :  
Mild – standard  
Moderate – 150%  
Severe – 250% to Decline | Central – Decline  
Obstructive – depends on treatment and severity  
If treated  
Very mild – standard.  
Moderate – 150%  
Severe – 250%  
If untreated  
Mild to moderate – 150%  
Severe – 250% to decline |
### Stroke

<table>
<thead>
<tr>
<th>Condition</th>
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</tr>
</thead>
</table>
| Stroke    | • Current age  
• Date of diagnosis  
• Number of strokes  
• Treatment  
• Any residual impairment  
• Blood pressure readings  
• Smoking – past and current use | APS | Depends on age, type, number of strokes, any residual impairment  
More than one stroke – decline  
Stroke within one year – decline with possible reconsideration after one year. Others are rated 150% to decline, depending on above noted factors. A stroke at a younger age will usually have a higher rating | All cases – Decline  
Do not order APS |

### Transient Ischemic Attack

<table>
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<tr>
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</tr>
</thead>
</table>
| Transient ischemic attack (TIA) | • Current age  
• Date of diagnosis  
• Number of TIA’s  
• Treatment  
• Any residual impairment  
• Blood pressure readings  
• Smoking – past and current use | APS | Depends on age, type, number of strokes, recency  
1 or 2 TIAs within a year are decline for at least 6 months and one year if under age 40. After that rating will apply. Ratings are in the 150% to 225% range depending on age and frequency. 3 TIAs or more will be considered as stroke | All cases – Decline  
Do not order APS |
### Ulcerative Colitis (also see Crohn’s Disease)

<table>
<thead>
<tr>
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</tr>
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</table>
| Ulcerative colitis is a type of inflammatory bowel disease that causes ulcerative lesions in the lining of the colon | • Current age  
• Date of diagnosis  
• Symptoms and severity  
• Frequency of flare-ups  
• Treatment (type, medication, dosage, any surgery)  
• Any hospitalization or ER visits  
• Any limitation of activities  
• Any complications or other medical condition, such as arthritis or other inflammatory disease | APS | Depends on age of diagnosis and severity:  
**MILD**  
Proctitis only, not requiring treatment with oral steroids or immune therapy – possible standard  
**MODERATE**  
• Within 6 months of last flare-up possible 200%  
• >6 months to 5 years of last flare-up possible 150% to 175%  
• After 5 years with no flare-ups possible std  
**SEVERE**  
• Within 2 years of last flare-up possible 300%  
• >2 to 10 years since last flare-up possible 200% to 250%  
• After 10 years since last flare-up possible 150%  
• Any surgery would be a decline for 6 months | All cases within 2 years – treat as severe.  
All cases with any complications such as weight loss, anemia arthritis, iritis are decline.  
**Medical treatment only:** Mild with no complications – 150% and exclude colon cancer including metastases  
Moderates with no complications 175% and exclude colon cancer including metastases.  
Severe with no complications 200% and exclude colon cancer including metastases.  
**With Surgery:**  
Within 12 months – Decline  
After 12 months, no symptoms – 150% and exclude colon cancer including metastases.  
With any complications post surgery – Individual Consideration – usually decline |

### NON-MEDICAL RISKS – DETAILS AND POSSIBLE DECISIONS

#### Aviation – Private

<table>
<thead>
<tr>
<th>Sport</th>
<th>Considerations</th>
<th>Requirements</th>
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<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Private pilots licenced to fly for recreational reasons | • Current age  
• Type of license  
• Types of aircraft  
• Where flying – whether it is a remote area  
• Number of hours flown for past 12 months  
• Number of hours to be flown for next 12 months | Aviation questionnaire | Depends on type of licence, type of aircraft, if flying over remote areas and number of hours flown annually  
Ratings range from $2.50/1,000 to decline | Aviation exclusion |
### Mountain Climbing and Rock Climbing

<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>Mountain climbing can involve rock, snow and ice</td>
<td>- Current age&lt;br&gt;- Experience&lt;br&gt;- Member of club&lt;br&gt;- Grade&lt;br&gt;- Altitude&lt;br&gt;- Location</td>
<td>Mountaineering Questionnaire</td>
<td>Depends on type, altitude and location 4,000 meters (13,000 feet) – is usually $2.50/1,000 as long as in North America Heights over 4,000 meters (13,000 feet) or outside North America – $5.00/1,000 to decline</td>
<td>Depends on type, altitude and location Up to 6,000 metres (19,700 feet) – Mountaineering and climbing exclusion &gt; 6,0000 meters (19,700 feet) – Decline Himalayas – Decline</td>
</tr>
</tbody>
</table>

### Scuba Diving

<table>
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<tbody>
<tr>
<td>Scuba diving is a form of underwater diving where the diver uses a self-contained underwater breathing apparatus (scuba)</td>
<td>- Current age&lt;br&gt;- Involved in any hazardous diving like wreck, cave or ice diving&lt;br&gt;- Certification&lt;br&gt;- Average depth and frequency&lt;br&gt;- Deepest depth and frequency&lt;br&gt;- Location&lt;br&gt;- Any medical conditions&lt;br&gt;- Lifestyle</td>
<td>Scuba diving questionnaire</td>
<td>Average depth of 100 feet or less with no hazardous activities – standard Any deeper depths and hazardous diving would have a flat extra of $2.50/1,000 to decline</td>
<td>Average depth of 100 feet or less with no hazardous activities – standard. 101 feet to 125 feet – Exclusion for scuba diving &gt; 125 feet – Decline Any hazardous diving would either be Decline or have an exclusion</td>
</tr>
</tbody>
</table>

### Skiing/Snowboarding

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>Extreme Skiing/Snowboarding</td>
<td>- Type – Heli, Cat, Back country, Freestyle/acrobatics&lt;br&gt;- Location&lt;br&gt;- Any accidents&lt;br&gt;- Frequency&lt;br&gt;# of years experience&lt;br&gt;- Competitive or professional</td>
<td>Snow Skiing/Boarding questionnaire</td>
<td>Usually standard</td>
<td>Usually standard</td>
</tr>
</tbody>
</table>
## Occupation – Commercial Aviation

<table>
<thead>
<tr>
<th>Occupation</th>
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<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial pilots</td>
<td>• Current age&lt;br&gt;• Number of years and hours experience&lt;br&gt;• Type of license&lt;br&gt;• Type of aircraft&lt;br&gt;• Where flying – whether it is a remote area</td>
<td>Aviation Questionnaire</td>
<td>Commercial pilots and crew members flying scheduled airlines with at least one base in Canada/U.S – may be standard&lt;br&gt;Commercial pilots flying smaller aircraft for purposes such as commuter flights, cargo – may be standard if airline is strictly regulated and not flying over remote areas&lt;br&gt;Other types of flying such as crop dusting, inspection photography, bush pilots may have rating anywhere from $2.50/1,000 and up&lt;br&gt;Aviation Exclusions are not allowed when aviation is an occupation&lt;br&gt;Other occupations and crew members may also require a rating</td>
<td>Commercial pilots and crew members flying scheduled airlines with at least one base in Canada/U.S – may be standard&lt;br&gt;Commercial pilots flying smaller aircraft for purposes such as commuter flights, cargo – may be standard if airline is strictly regulated and not flying over remote areas&lt;br&gt;Other types of flying such as crop dusting, inspection photography, bush pilots may have exclusion or be declined&lt;br&gt;Other occupations and crew members may also require a rating</td>
</tr>
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</table>

## Occupation – Miners

<table>
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</thead>
<tbody>
<tr>
<td>Mining</td>
<td>• Title&lt;br&gt;• Job duties&lt;br&gt;• Any associated illness such as respiratory or musculoskeletal</td>
<td>Occupation details on application</td>
<td>Usually standard</td>
<td>Usually standard</td>
</tr>
</tbody>
</table>
## Occupation – Occupations Involving Travel outside of Canada

<table>
<thead>
<tr>
<th>Occupation</th>
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<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missionary, peacekeeping, diplomats, foreign aid, journalists</td>
<td>Usually decline with one possible exception – professionals working in Canada who travel on very short missions to assist, usually on their vacation and possibly with their church group. They may be involved in doing dental work, hearing aids, surgery, building homes and water wells, etc. Depending on the short duration, annual frequency and location, these individuals may be a standard risk.</td>
<td></td>
<td></td>
<td>Usually Decline – Do not order requirements</td>
</tr>
</tbody>
</table>

## Driving

<table>
<thead>
<tr>
<th>Description</th>
<th>Considerations</th>
<th>Requirements</th>
<th>Possible Underwriting Decision – Life</th>
<th>Possible Underwriting Decision – Critical Illness</th>
</tr>
</thead>
</table>
| Motor vehicle accidents are a significant cause of death especially at younger ages | • Current age  
• DUI  
• Other infractions – if speeding how much over the limit  
• Any suspensions  
• Any accidents | MVR or Motor Vehicle Questionnaire  
DUI cannot be considered while licence suspended.  
Single DUI (including 24 hour suspension) within one year:  
• Ratings (after suspension completed and within one year of infraction) range from 2.50 per 1,000 to 5.00 per 1,000 depending on age and other infractions  
• After one year, individual consideration will be given  
2 DUI’s – decline if last one within 5 years – after that individual consideration  
A few minor infractions could be standard | Individual Consideration – 150% to decline  
A few minor infractions – could be standard |
FAMILY HISTORY AND CRITICAL ILLNESS

A family history of disease or death, especially if diagnosed at a young age, may indicate that the Proposed Insured is also at increased risk for the same or related illness. The number of first degree relatives (i.e. parents and siblings) is also a factor that is taken into consideration during underwriting.

Family history conditions with a higher probability for a person to be diagnosed with the same illness include cancer, cardiovascular disease, diabetes, and dementia.

A rating or exclusion may apply for the Critical Illness coverage while the life may be accepted at standard or with a lower rating.

Some examples are:

**Family History of Breast Cancer**

**One first degree relative – relative diagnosed age \( \leq 50 \)**

- Life: Standard
- Critical Illness: Male standard; Female – exclude breast, ovarian cancer and any metastases

**One first degree relative – relative diagnosed age >50**

- Life and Critical Illness – standard

**Two first degree relatives – relative diagnosed age \( \leq 50 \)**

- Life – 150%
- Critical Illness – Male – exclude breast cancer and any metastases; Female – exclude breast, ovarian cancer and any metastases

**Family History of Cardiovascular Disease**

**One first degree relative – relative diagnosed age <60**

- Life – Standard
- Critical Illness – Standard

**Two first degree relatives – youngest age of relative at diagnosis or death**

- Life – <age 45 – 150%; >age 45 and up – Standard
- Critical Illness – <age 45 – 200%; age 45 - 59 – 175%

FREQUENTLY ASKED QUESTIONS

**Q.** When applying for both Life and CI, what evidence chart should I use?

**A.** The chart with the higher combination of requirements should be used.

**Q.** How long are medical requirements valid for?

**A.** Medical requirements completed in the past 12 months can usually be accepted, subject to a current non-medical.

**Q.** Who is deemed to be a non-resident of Canada and are they eligible for insurance with Empire?

**A.** In general, a non-resident is a person who lives outside of Canada, regardless of citizenship and does not file “regular” Canadian tax forms. They are not eligible for insurance due to Canadian tax consequences.

**Q.** Can a person have a different decision on a life and a critical Illness policy?

**A.** Yes, this is because life insurance assesses mortality while critical illness assesses the incidence of the client developing one of the covered conditions.
Q. Why are travel guidelines not published?
A. This is because conditions can change on a day-to-day basis with regard to civil unrest, terrorism, environmental factors.

Q. What is a trial application?
A. Trial applications are preliminary applications, which can be submitted to determine insurability for medical impairments, lifestyle issues, avocations, finances. Age and amount requirements are not arranged until eligibility has been determined. Usually the underwriter will obtain an Attending Physician’s Statement for medical impairments – appropriate questionnaires should be submitted with the application for medical and other issues which have prompted the trial application. The underwriter will assess and give you a tentative decision subject to age/amount requirements.

Q. When should I submit a cover letter?
A. You can submit a cover letter when you feel additional information may be helpful in the underwriting of the case – e.g. financial cases where the amount may seem high but there is a valid reason to justify; reason for foreign travel – a one-time trip for a family event.

Q. Does Empire accept clients who are HIV positive?
A. Unfortunately at this time, Empire does not.

Q. Can a person who is currently pregnant be considered for life insurance?
A. Yes – as long there are no complications (including gestational diabetes) and no history of complications with previous pregnancies.

Q. Is vaping assessed at smoker or non-smoker rates?
A. E-Cigarette or any other device, used to vape marijuana only (no nicotine) is non-smoker rates (as long as our smoking question is answered “no”).
   E-cigarette or any other device used to vape nicotine or other substances, other than marijuana, is smoker rates even if nicotine free liquid is used in the past 12 months

Q. Can second hand smoke cause positive nicotine result in the urinalysis?
A. No. The laboratory has a high threshold result for nicotine detection

Q. Does Empire automatically share Underwriting requirements when insurance with another company is pending?
A. No. We only share requirements with other companies when we are specifically asked to do so.

Q. What is reinsurance?
A. Reinsurance is insurance for insurance companies. It’s a way of transferring or “ceding” some of the risk insurance companies assume. There are 2 types of reinsurance:
   • Facultative which is negotiated separately for each policy that is reinsured. It is used for higher face amounts and often for rated or declined cases.
   • Automatic (treaty) where the ceding company and the reinsurer negotiate and execute a reinsurance contract under which the reinsurer covers the specified share of all the insurance policies issued by the ceding company which come within the scope of that contract.
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A/A</td>
<td>Age and amount</td>
</tr>
<tr>
<td>ADB</td>
<td>Accidental Death Benefit</td>
</tr>
<tr>
<td>AML</td>
<td>Anti-money laundering</td>
</tr>
<tr>
<td>APS</td>
<td>Attending Physician’s Statement</td>
</tr>
<tr>
<td>BBR</td>
<td>Business Beneficiary Report</td>
</tr>
<tr>
<td>BP</td>
<td>Blood Profile</td>
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<tr>
<td>CBC</td>
<td>Complete Blood Count</td>
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<tr>
<td>CI</td>
<td>Critical Illness</td>
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<tr>
<td>CR</td>
<td>Child Rider</td>
</tr>
<tr>
<td>CXR</td>
<td>Chest x-ray</td>
</tr>
<tr>
<td>DI</td>
<td>Disability Insurance</td>
</tr>
<tr>
<td>ECG</td>
<td>Electocardiogram</td>
</tr>
<tr>
<td>EX ECG</td>
<td>Exercise Electrocardiogram</td>
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<tr>
<td>FMV</td>
<td>Fair Market Value</td>
</tr>
<tr>
<td>GIB</td>
<td>Guaranteed Insurability Benefit</td>
</tr>
<tr>
<td>H&amp;W</td>
<td>Height and weight</td>
</tr>
<tr>
<td>IR</td>
<td>Inspection report</td>
</tr>
<tr>
<td>JFTD</td>
<td>Joint First to Die</td>
</tr>
<tr>
<td>JLTD</td>
<td>Joint Last to Die</td>
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<tr>
<td>LTC</td>
<td>Long term care</td>
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<tr>
<td>Med</td>
<td>Medical Exam</td>
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<tr>
<td>MIB</td>
<td>Medical Information Bureau</td>
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<tr>
<td>MVR</td>
<td>Motor Vehicle Report</td>
</tr>
<tr>
<td>NB</td>
<td>New Business</td>
</tr>
<tr>
<td>NM</td>
<td>Non-medical</td>
</tr>
<tr>
<td>NS</td>
<td>Non-smoker</td>
</tr>
<tr>
<td>NPW</td>
<td>Not proceeded with</td>
</tr>
<tr>
<td>NW</td>
<td>Net worth</td>
</tr>
<tr>
<td>PAC</td>
<td>Pre-authorized chequing</td>
</tr>
<tr>
<td>PAD</td>
<td>Pre-authorized debit</td>
</tr>
<tr>
<td>PM or Para</td>
<td>Para-medical</td>
</tr>
<tr>
<td>POI</td>
<td>Proof of Income</td>
</tr>
<tr>
<td>POS</td>
<td>Policy Owner Services</td>
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<tr>
<td>SIN</td>
<td>Social Insurance Number</td>
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<tr>
<td>SM</td>
<td>Smoker</td>
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<tr>
<td>TIA</td>
<td>Temporary Insurance Agreement</td>
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<tr>
<td>RTW</td>
<td>Return to Work</td>
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<tr>
<td>UHIV</td>
<td>Urine HIV</td>
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<tr>
<td>UL</td>
<td>Universal Life</td>
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<tr>
<td>WP</td>
<td>Waiver of Premium</td>
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</tbody>
</table>
The Empire Life Insurance Company
259 King Street East,
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The Empire Life Insurance Company (Empire Life) is a proud Canadian company that has been in business since 1923. We offer individual and group life and health insurance, investment and retirement products, including mutual funds through our wholly-owned subsidiary Empire Life Investments Inc.

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