



## Generation Protector<sup>®</sup> Series

Long Term Care Insurance Policies  
from Allianz Life Insurance Company  
of North America

## Underwriting guide



# Underwriting mission statement

*To issue as many applications as possible while protecting the risk pool of the business.*

## Underwriting philosophy

Underwriting focuses on three main elements in the process of evaluating risk:

- Health status: What are the health impairments?
- Functionality: How well does the client get around, how active is she/he?
- Cognition: Is there evidence of memory problems?

An important aspect of underwriting is to recognize the impact of social support, social activities, and exercise tolerance on LTCi risk.

Underwriting strategies are directed at ascertaining the degree of severity, control and stability of medical conditions and the impact of those conditions to the individual's health status, functionality, and cognitive abilities.

## Information hotline: 800.950.7372

When to use the Information hotline:

- To prequalify a client relative to health status and/or functionally.
- To clarify interpretation of this underwriting guide with respect to individual client's health.

## Hotline information

7:00 a.m. – 6:00 p.m. Central time (Monday – Thursday)

7:00 a.m. – 5:00 p.m. Central time (Friday)

# Table of Contents

Premium rate class descriptions .....	5
Previously-declined cases .....	5
Underwriting requirements .....	6
Policy dating .....	6
Field selection .....	7
Prequalifying an applicant .....	7
Outcomes other than applied for, what to expect .....	8
Build chart .....	9
Automatic decline list, uninsurable health conditions .....	10
Prescription drug guide, for uninsurable conditions .....	12
Impairment guide .....	15

## Premium Rate Classes

---

Long term care insurance from Allianz offers five premium rate classes, noted below. To avoid difficulty in placing a policy with a higher premium than was originally quoted, pay special attention to health impairments and functionality when quoting the rate class. Should your client qualify for a better rate than quoted, the appropriate (better risk) class will be issued.

**The underwriting process takes into consideration the age of the individual, build, smoking status, the extent and severity, stability and instability of medical conditions, any comorbid conditions, as well as the functional and cognitive status, in determining the rate class that is ultimately issued.**

### Preferred Plus (healthy, nonsmoking applicants)

**DO NOT SUBMIT AT PREFERRED PLUS RATE CLASS UNLESS ALL OF THE FOLLOWING CONDITIONS ARE MET**

- Nonsmoker for the last 24 months (other tobacco use acceptable).
- Weight within Preferred Plus range on Build Chart.
- Consultation with a physician, to include a physical exam, within the last 18 months.
- No history of treatment for serious health conditions.
- Applicant may be receiving regular treatment of a preventative nature (see impairment section of this guide for examples of individual health conditions).

### Preferred (smokers or nonsmokers; stable health history).

- Smoker in otherwise good health.
- Weight within Preferred range on the Build Chart.
- Medical history of health conditions which are well controlled and have an excellent prognosis.

### Standard (moderate health problems, well controlled, well managed, and stable)

- Under treatment for a serious health condition that requires close medical supervision.
- History of a combination of mild to moderate conditions (comorbid).

### Select I and Select II (well managed multiple health conditions, complex medical history, or recent changes in health status)

- Medical conditions in combination with mild functional involvement.
- Multiple medical conditions of a moderate nature.

### Individual Consideration (IC)

- Medical history does not fall within the parameters of the individual impairment as listed.
- Specifics on the application and medical history are evaluated by the underwriter based on the effect on risk of the product.
- Cases approved after individual consideration are typically counter-offers used to offer some coverage while protecting the risk to the company.

### Previously declined cases

We encourage agents to call the Information Hotline at 800.950.7372 to discuss previously declined cases or any case that involves complex medical history. **As a general rule, we do not accept applications from individuals who have been declined by other LTCi companies.**

# Underwriting Requirement Chart

The Underwriting Requirement Chart below indicates the requirements needed based on age and benefits. The Home Office will always take care of ordering all requirements, including the face-to-face interviews. The Home Office does all Phone History Interviews (PHIs). The Home Office will obtain medical records.

Ages	18-69	70-84
PHI	Required	N/A
F/F	For specific conditions	Required
APS	Required	Required

## Underwriting specifics

**Any applicant age 65 through 71 who has not been seen by a physician within the past 24 months will not be considered for coverage until he/she has completed a physical exam at his/her own expense; or until he/she has a face-to-face interview which will include a complete blood profile (BLDPF) and a Home Office urine specimen (HOS).**

**Any applicant age 72 through 84 who has not been seen by a physician within the last 24 months will not be considered for coverage until he/she has completed a physical exam\* at his/her own expense.**

\*The extent of the exam is minimally a 'screening physical exam' although the physician may have other requirements for someone not current on health maintenance. Allianz does not have a form for this purpose; documentation of clinical information is the responsibility of the physician.

Additional requirements may be ordered at the discretion of the underwriter, based on the applicant's health history.

### Personal History Interview (PHI)

Telephone interviews will be ordered on all applicants age 69 and younger. Medical questions such as height, weight, or blood pressure would be examples of questions asked during telephone interviews. Specific questions related to activities of daily living (ADLs), such as "Do you have difficulty dressing?" will be asked on every interview. The interview may also include some cognitive test questions.

### Face-to-Face Assessments (F/F)

Face-to-Face Assessments will be ordered through the Home Office on all applicants age 70 and older. On spousal applications where one applicant is age 70 or older and the second applicant is younger, this assessment will be done on both applicants. The interview will include a detailed health history, blood pressure, height and weight, and a memory test. The Home Office pays for these assessments.

### Attending Physician's Statement (APS)

Medical records will be ordered on each applicant. The Home Office will order them. Primary care physician records are the most commonly required ones; occasionally specialist records are necessary for clinical detail on a particular condition.

## Policy Dating

- When applicants are approved for coverage, a policy will be issued with an effective date that may range from 60 days prior to the application date (back-dating to save age) to 30 days after the underwriting approval date (post-dating to match the renewal date of the policy being replaced).
- Back-dating and post-dating must be requested on the application and will be accommodated if there are no concerns regarding the applicant's health status.
- Current dating will not be required if it would change the issue age.

## Field selection

---

- Eligible issue ages for Generation Protector II™ and Generation Protector Select™ are 18-84 years, based on applicant age at last birthday.
- The Build Chart in this guide will help to determine the proper rating class based on height and weight.
- The Prescription Drug Guide is a partial listing of certain medications that may indicate that a client has an uninsurable condition. This guide may assist in determining the client's impairments or insurability.
- The health conditions listed in the Impairment Guide section may assist in determining a client's risk class and insurability. If the client qualifies for a better risk class than applied for, the underwriter will issue the better risk class.
- Consider whether the applicant functions independently; and whether he/she requires assistance to walk.
- Consider whether the applicant is able to perform, without assistance, the activities of daily living (ADLs).\*
- Consider whether the applicant has any difficulty with the instrumental activities of daily living (IADLs).\*\*
- Determine whether the applicant is currently receiving disability or worker's compensation payments; this may indicate a current or recent history that typically excludes the applicant from insurability at the present time.

\*ADLs include bathing, eating, dressing, toileting, continence, and transferring.

\*\*IADLs include housekeeping, laundry, transportation, meal preparation, handling personal finances, taking medications, and using the telephone.

**Inability to perform ADLs or IADLs may indicate a functional or cognitive limitation, which is not an acceptable risk.**

## Prequalifying questions to ask of the applicant:

---

The answers to these questions are helpful in calling the hotline for a prequalifying question.

- Gender?
- Age?
- Height?
- Weight?
- Smoker?
- Medications?
- Non-prescription medications?
- Health conditions in the last five years?
- How long has the client had these health conditions and how long have these conditions been stable?

**The underwriting process takes into consideration the age of the individual, the extent and severity of any health condition, stability and instability of health condition(s), the comorbid relationship of any conditions, as well as the functional and cognitive status, in determining the rate class that is ultimately issued.**

**The information provided during the prequalifying process is carefully considered by the underwriter, along with the information developed during the PHI, F2F, and from medical records of the applicant's physician.**

## What to expect when the underwriting decision is other than applied for:

- 1) The underwriter will put a note on the Web site when the decision has been made.
- 2) The underwriter will include a clinical reason for a decision other-than-applied-for within the data privacy guidelines of HIPAA.
- 3) The underwriter will write a letter to the applicant with the decision other-than-applied-for, with a copy to the agent. The wording of this letter must also comply with data privacy regulations.
- 4) The underwriter will place a phone call to the agent with the decisions other-than-applied-for; a message will be left, if voicemail is available; a message will include the name and extension number of the underwriter.
- 5) The agent may call the underwriter for information to clarify the decision, if the wording of the above-mentioned communication is not clear.
- 6) The underwriter will reference the information that was disclosed by the applicant together with the underwriting guidelines on which the decision was made.
- 7) The underwriter will tell the agent if this is a permanent decline, or when a re-application would be appropriate.  
**NOTE: Reapplication is subject to full underwriting, and premium will be based on attained age.**  
**NOTE: A permanent decline stops any further underwriting processing at this point.**
- 8) For the most positive outcome of ongoing discussions about the decision, it is recommended that the agent discuss the letter with the client.
- 9) The client is encouraged to speak to his/her physician about health conditions that are unknown to the client, as well as about dates of clinic visits mentioned in the letter.

## Build chart

Height	Weight								
	SI	S	P	P+	P	S	SI	SII	IC
4' 7"	68-72	73-75	76-77	78-141	142-147	148-166	167-176	177-186	187-190
4' 8"	70-75	76-77	78-79	80-145	146-152	153-170	171-181	182-190	191-196
4' 9"	73-78	79-80	81-82	83-149	150-157	158-176	177-186	187-195	196-204
4' 10"	77-81	82-84	85-90	91-154	155-162	163-181	182-191	192-201	202-210
4' 11"	79-83	84-87	88-93	94-158	159-168	169-188	189-198	199-208	209-217
5' 0"	82-86	87-92	93-96	97-163	164-174	175-194	195-204	205-215	216-225
5' 1"	85-89	90-95	96-99	100-169	170-180	181-201	202-211	212-222	223-232
5' 2"	87-92	93-98	99-103	104-175	176-186	187-207	208-218	219-229	230-240
5' 3"	90-94	95-102	103-106	107-180	181-191	192-214	215-225	226-237	238-248
5' 4"	92-98	99-104	105-109	110-186	187-197	198-221	222-232	233-244	245-256
5' 5"	95-100	101-107	108-113	114-192	193-204	205-228	229-240	241-252	253-264
5' 6"	99-102	103-110	111-117	118-198	199-210	211-235	236-247	248-260	261-272
5' 7"	103-105	106-113	114-120	121-204	205-217	218-242	243-255	256-268	269-280
5' 8"	105-109	110-117	118-124	125-210	211-222	223-249	250-262	263-272	273-289
5' 9"	107-113	114-120	121-127	128-216	217-228	229-257	258-270	271-284	285-297
5' 10"	110-117	118-124	125-131	132-222	223-236	237-264	265-278	279-292	293-306
5' 11"	113-121	122-128	129-135	136-229	230-243	242-272	273-286	287-301	302-315
6' 0"	116-124	125-132	133-139	140-235	236-250	251-279	280-294	295-309	310-324
6' 1"	118-128	129-136	137-143	144-242	243-257	258-288	289-302	303-318	319-333
6' 2"	121-132	133-139	140-147	148-249	250-264	265-295	296-311	312-326	327-342
6' 3"	125-135	136-143	144-151	152-256	257-272	273-303	304-319	320-335	336-351
6' 4"	129-139	140-147	148-155	156-263	264-279	280-312	313-328	329-344	345-361
6' 5"	132-142	143-151	152-159	160-270	271-287	288-317	318-334	335-350	351-371
6' 6"	138-146	147-155	156-163	164-277	278-294	295-322	323-340	341-355	356-381
6' 7"	140-150	151-159	160-168	169-282	283-302	303-326	327-345	346-360	361-391
6' 8"	143-154	155-163	164-172	173-289	290-310	311-330	331-349	350-365	366-400

## Automatic decline list

---

Conditions listed below are uninsurable.

An application should not be submitted if an applicant has any of the following conditions.

---

ADL, activity of daily living deficits

Adult day care services, current

AIDS, acquired immune deficiency syndrome

Alzheimer's disease, memory loss, dementia

Ambulation difficulty, unsteadiness, instability, shuffling gait, use of assistive devices

Amyotrophic lateral sclerosis, ALS, Lou Gehrig's disease, progressive neurological disease

Aplastic anemia, bone marrow failure syndrome

Arteriosclerosis obliterans, plaque formation of vessels to the extent of closure of blood vessels

Assisted living residence, current

Ataxia, lack of muscle coordination, due to a disorder in the brain

---

Brain impairments, disorders not identified elsewhere in this guide, most commonly damage as a result of trauma

Buerger's disease; inflammation of the blood vessels, with subsequent clotting disorder

---

Cardiomyopathy, disease of heart muscle

Catheter use, urinary, daily or indwelling; a tube passed into the urinary bladder to allow the excretion of urine.

CCRC living, current

Cirrhosis of the liver, gradual destruction of the ability of the liver to function

Claudication, pain in legs associated with poor circulation

Collagen disease, an autoimmune rheumatic disorder affecting tendons, bones, and tissues.

Confusion, mental disorientation

CREST syndrome, slowly progressive systemic sclerosis

Creutzfeld-Jakob syndrome, a disease of the nervous system that causes dementia

Cystic fibrosis, congenital disease of the lungs

---

Defibrillator, implantable cardioverter defibrillator, ICD, device to control heart rhythm disorder

Dementia, memory impairment or loss, all types of cognitive deficits

Dermatomyositis, chronic weakness and inflammation of muscles

Dialysis, kidney/renal, the process of mechanically removing metabolic wastes from the blood

Disabled, and/or collecting disability or workers compensation benefits

---

Esophageal varices, chronic obstruction of blood flow of the esophagus related to liver function

---

Hemiplegia, paralysis of one side of the body

Hemophilia, blood clotting disorder

Hepatitis, chronic, active; inflammation of the liver; see impairment guide also

HIV positive; a blood test has indicated infection from the AIDS virus

Home care services, current or within the past 12 months

Hydrocephalus, abnormal accumulation of fluid in the brain

Huntington's chorea, inherited disease of the nervous system

ICD, implantable cardioverter defibrillator, device to control heart rhythm disorder

Intestinal angina, abdominal pain caused by narrowed blood vessels to the intestines

---

Kidney transplant, surgical implantation of donor kidney to replace one removed due to disease

---

Lambert-Eaton syndrome, myasthenia gravis syndrome, a neurological disorder that causes weakened muscles.

Lupus, systemic lupus erythematosus, SLE, chronic inflammation caused by auto immune disease

---

Medicaid recipient

Memory loss, cognitive deficit, dementia

Mental retardation, disorder of below average mental functioning

Multiple myeloma, cancer of white blood cells

Multiple sclerosis, inflammatory disease of central nervous system (brain and spinal cord)

Muscular dystrophy, congenital disease with progressive weakness and degeneration of muscle

Myelodysplasia, myelodysplastic syndrome, bone marrow disorder

---

Nephrosclerosis, hardening of kidney tissue

Nephrotic syndrome, progressive kidney damage with kidney failure

---

Nursing home confinement, current or recent

Obesity (as defined by weight above the top cut off of the Build Chart) frequently a co-morbid with other conditions such as diabetes, high blood pressure, heart disease or arthritis

Organ transplant (except cornea – see Impairment Guide)

Organic brain syndrome (OBS), chronic disease or injury that interferes with brain function

---

Oxygen use, supplemental therapy to increase oxygen availability for the body

Parkinson's disease, chronic progressive nervous disease with progressive muscle weakness.

Pick's disease, dementia that begins at an earlier age than senile dementia

Polycystic kidney disease, genetic disorder causing numerous cysts in kidneys leading to reduced kidney function and failure

Polycythemia vera, p. vera, excess of red blood cells involving bone marrow function

---

Pulmonary hypertension, high blood pressure in the arteries that supply the lungs

---

Quadriplegia, paralysis of all four limbs

Renal failure, renal insufficiency, kidney insufficiency or failure, gradual progressive loss of kidney function

Retinitis pigmentosa, gradual disintegration of eye function and progressive loss of vision

Retinopathy, diabetic, disturbance of vision secondary to the effects of diabetes

---

Schizophrenia, chronic, often debilitating mental illness

Scleroderma, progressive hardening and tightening of skin and connective tissues

Sclerosing cholangitis, narrowing and hardening of bile ducts resulting in liver damage

Shunt (heart, brain, kidney), an artificial passage to divert fluids within the body

Shy-Drager syndrome, progressive disorder of nervous system

---

Social Security Disability Insurance recipient

Thromboangiitis obliterans (Buerger's disease), inflammation of blood vessels with clotting

---

Transplant (except cornea – see Impairment Guide)

Waldenstrom's disease or syndrome, bone marrow and blood disease

Walker use

Wheelchair use

# Prescription drug guide

## Drugs prescribed for uninsurable conditions

If the applicant is taking one of these drugs for the reason stated, he/she is not eligible for coverage. This list is a reference guide for prequalifying cases; it is not intended to be an exhaustive, all-inclusive list.

Drug name	Alternate name for same drug	Condition for which drug is most commonly used
Actimmune	Interferon gamma 1-b	Chronic granulomatous disease
Abilify	Aripiprazole	Schizophrenia
Akineton	Biperiden	Parkinson's disease
Aldazine	Mellaril, Thioridazine	Mental health
Amantadine	Symmetrel	Parkinson's disease
Antabuse	Disulfiram	Alcoholism
Aranesp	Darepeotinalfa	chronic anemia; renal failure
Aricept	Donepezil	Dementia
Artane	Novohexidyl	Parkinson's disease
Avonex	Interferon, Rebif	Multiple sclerosis
AZT	Retrovir, Apo-zidovudine	HIV
Bendopa	Levodopa	Parkinson's disease
Benztropine mesylate	Cogentin	Parkinson's disease
Betaseron	Interferon, Recombinant	Multiple sclerosis
Bromocriptine	Parlodel	Parkinson's disease
Carbidopa	Sinemet	Parkinson's disease
Chlorpormazine	Thorazine	Mental health
Cladribine	Leustatin	Leukemia, multiple sclerosis
Clorazil	Clozapine	Mental health
Clozapine	Clorazil	Mental health
Codeine		Pain control
Cogentin	Apo-benzotropine	Parkinson's disease
Cognex	Tacrine HCl	Dementia
Combivir	Zidovudine, Lamivudine	HIV
Comtan	Entacapone	Parkinson's disease
Copaxone	Glatiramer acetate	Multiple sclerosis
Dantrium	Dantrolene	Multiple sclerosis
Dantrolene	Dantrium	Cerebral palsy, multiple sclerosis
Darvocet		Pain control
Demerol		Pain control
Deprynel	Eldepryl	Dementia, Parkinson's disease
Dilaudid		Pain control
Donepezil	Aricept	Dementia
Dopar	Levodopa	Parkinson's disease
Duragesic		Pain control
Edrophonium Chloride	Tensilon	Myasthenia gravis
Eldepryl	Selegiline	Parkinson's disease
Epogen	Erythropoietin	Renal failure, anemia of chronic disease
Eulexin	Flutamide	If for recurrent prostate cancer
Exelan		Dementia
Fluphenazine	Prolixin	Mental health
Flutamide	Eulexin	Cancer
Glatiramer acetate	Copaxone	Multiple sclerosis
Haldol	Haloperidol	Mental health
Hydergine	DHE45	Dementia
Infergen	Interferon alfacon-1	Hepatitis, other liver disease
Insulin		Diabetes
Interferon	Betaseron	Multiple sclerosis
Intron-A	Interferon	Cancer

Invirase
Kadian
Larodopa
Leukine
Leuprolide
Levodopa
Lorcet, Lortab
Loxapine
Lupron
Mellaril
Mestinon
Methadone
Mirapex
Moban
Morphine
MS-Contin
Naltrexone
Namenda
Narcotics, regular use
Navane
Neostigmine
Neumega
Neupogen
Niloric
Norgesic
Nubain
Orap
Oxycodone
Parlodel
Pegasys
PEG-Intron
Percocet
Percodan
Pergolide
Permitil
Perphenazine
Pimozide
Procrit
Prolixin
Prostigmin
Rebetron
Regonol
Revia
Requip
Retrovir
Rilutek
Risperdal
Roferon-A
Roxicet
Saquinavir

## Prescription drug guide (continued)

### Drugs prescribed for uninsurable conditions

If the applicant is taking one of these drugs for the reason stated, he/she is not eligible for coverage. This list is a reference guide for prequalifying cases; it is not intended to be an exhaustive, all-inclusive list.

Drug name	Alternate name for same drug	Condition for which drug is most commonly used
		HIV
Morphine sulfate	Narcotic pain control	
Levodopa	Parkinson's disease	
Sargramostim, GM-CSF	Bone marrow transplants	
Lupron	Cancer	
Carbidopa, Sinemet	Parkinson's disease	
Hydrocodone	Pain control	
Loxitane	Mental health	
Leuprolide	If for recurrent prostate cancer	
Thioridazine	Mental health	
Edrophonium	Myasthenia gravis	
Dolophine	Pain control	
Pramipexide	Parkinson's disease	
Molindone	Mental health	
	Narcotic pain control	
	Narcotic pain control	
	Alcohol abuse	
Memantine	Dementia	
	Pain control	
Thiothixene	Mental health	
Prostigmin	Myasthenia gravis	
Oprelvekin	Severe blood disease	
G-CSF, filgrastim	Blood cell enhancer in advanced disease	
	Dementia	
	Pain control	
	Pain control	
Pimozide	Mental health	
Oxycontin, Proladone	Pain control	
Bromocriptine	Parkinson's disease	
Peginterferon alfa-2a	Chronic hepatitis C	
Peginterferon alfa-2a	Chronic hepatitis C	
	Pain control	
	Pain control	
Permax, Celance	Parkinson's disease	
Prolixin	Mental health	
Trilafon	Mental health	
Orap	Mental health	
Erythropoietin	Renal failure; anemia of chronic disease	
Fluphenazine	Mental health	
Neostigmine	Myasthenia gravis	
	Hepatitis C	
	Myasthenia gravis	
	Alcohol abuse	
	Parkinson's disease	
	HIV	
Riluzole	ALS	
Risperidone	Mental health	
Recombinant, rIFN-A	AIDS, cancer, hepatitis, leukemia	
	Pain control	
	HIV	

## Prescription drug guide (continued)

### Drugs prescribed for uninsurable conditions

If the applicant is taking one of these drugs for the reason stated, he/she is not eligible for coverage. This list is a reference guide for prequalifying cases; it is not intended to be an exhaustive, all-inclusive list.

Drug name	Alternate name for same drug	Condition for which drug is most commonly used
Selegiline	Eldepryl	Dementia, Parkinson's disease
Serentil, Serlect	Mesoridazine	Mental health
Seroquel	Quetiapine	Mental health
Sinemet.	Carbidopa, Levodopa	Parkinson's disease
Sparine		Mental health
Stadol		Pain control
Stelazine	Trifluoperazine HCl	Mental health
Symmetrel	Amantadine	Parkinson's disease
Synapton		Dementia
Tacrine		Dementia
Talwin	Pentazocine	Pain control
Taractan		Mental health
Tasmar	Tolcapone	Parkinson's disease
Tensilon	Edrophonium	Myasthenia gravis
Thioridazine	Mellaril	Mental health
Thiothixene	Navane	Mental health
Thorazine	Chlorpromazine	Mental health
Tindal		Mental health
Tolcapone	Tasmar	Parkinson's disease
Trichlorfon		Dementia
Trifluoperazine	Stelazine	Mental health
Trilafon	Perphenazine	Mental health
Ultracet		Pain control
Zeldoz		Mental health
Zidovudine		HIV
Ziprasidone		Mental health

# Impairment guide

**It is important to remember this is only a guide, and the final rate class will be determined by the underwriter, based on all the facts of the case.**

**The risk class criteria indicated in this guide serve as general reference points.**

**The risk class criteria do not account for the age of the applicant or the impact of multiple disorders on one another.**

**The risk class criteria assume fully functional and intact cognitive status of the applicant, except if stated otherwise.**

- The following is a list of medical conditions intended to provide a general idea of whether a client is insurable, and, if so, whether she/he qualifies at Preferred Plus, Preferred, Standard, Select I, or Select II risk class.
- In general, the underwriter will postpone coverage in those cases in which major surgery has recently been completed or is pending.
- The waiting period for the specific condition needs to be met in order for coverage to be considered.
- **Call the Underwriting Information Hotline at 800/950-7372 for any questions regarding a client's insurability.**

**P+** = Preferred Plus

**P** = Preferred

**S** = Standard

**IC** = Individual Consideration

**SI** = Select I

**SII** = Select II

**NI** = Not Insurable

## A

**Ablation**, radio-frequency treatment to correct heart rhythm abnormality; refer to condition for which this procedure is done.

**Abscess**, localized infection

**P+** If locations other than brain and spinal cord, resolved and six months after treatment/surgery, without residual complications.

**IC** If involving brain or spinal cord, resolved without residual effects.

**NI** Unresolved or < six months after treatment.

**Acoustic neuroma**, benign growth on the nerve from the brain to the inner ear

**P+** 48 months' stability; stable after treatment, no known residual tumor; no residual neurological symptoms.

**P** 12 months' stability after treatment; no known residual disease or symptoms;

**S** 60 months' stability; tumor present, unoperated, or residual tumor post-treatment; no symptoms; tumor size stable on imaging.

**SI** 36 months' stability; present, unoperated; residual tumor post-treatment; no symptoms; tumor size stable on imaging.

**NI** Any cognitive or functional impairment; related use of any assistive device; any progressive symptoms.

**Addison's disease**, endocrine disorder of hormonal imbalance

**P** Controlled on medications, no complications, no other clinical conditions, after 24 months' stability.

**IC** With any other clinical conditions, any hospitalizations, after 24 months' stability.

**NI** All others.

**ADL deficits, Activities of Daily Living deficits**

**NI** Any mental or physical limitations in performing ADLs such as eating, transferring, bathing, dressing, toileting, continence.

**Adult day care**, community-based group programs designed to meet the needs of cognitively impaired adults

**NI** Attends adult day care.

**AIDS/HIV infection**, chronic, life-threatening condition that destroys the cells of the immune system

**NI**

**Alcoholism, alcohol abuse, alcohol dependency**, chronic progressive disease of impaired control over alcohol intake.

**P** In recovery 60 months, good health, stable.

**S** In recovery 36 months, good health, stable.

**SI** In recovery 36 months, one related health condition, well controlled, stable.

**SII** In recovery 36 months, more than one health condition all well controlled and stable.

**NI** In recovery less than 36 months, or any relapses during recovery period, or continued drinking.

**Alzheimer's Disease**, dementia, progressive memory impairment

**NI**

**Amaurosis fugax**, painless, temporary loss of vision

**S** Single episode, 60 months' stability, no comorbid conditions.

**IC** Single episode, after 36 months' stability, no comorbid conditions.

**NI** With smoking, or with atrial fibrillation, or with carotid stenosis > 50 %.

---

**Ambulation difficulty**, unsteadiness, instability, imbalance, shuffling gait, need for assistive devices to walk or move around

**NI**

---

**Amnesia, transient global amnesia**, partial loss of recall of events or experiences

**P** Single episode, after 24 months' stability; no comorbid (see NI).

**S** Single episode, after 12 months' stability, no comorbid.

**SI** Multiple episodes, after 36 months' stability.

**NI** With atrial fibrillation, or with carotid stenosis: 50 %, or with any cognitive or functional impairment.

---

**Amputation**, loss of a limb or appendage; a face to face interview is likely to be ordered.

**P** Trauma cause, single extremity, independent in ADLs, stable 12 months.

**S** Trauma cause, two extremities, independent in ADLs, stable 12 months.

**IC** Others.

**NI** Any amputation necessitated by or resulting from disease (e.g. diabetes, neurological, infection, or peripheral vascular disease); any amputations that result in residual impairment of independent function, significant clinical depression, and/or inability to perform any ADLs or IADLs; amputation of more than two extremities; or any evidence of osteomyelitis or of non-healing stump; narcotics required for phantom limb pain on a regular basis.

---

**Amyotrophic lateral sclerosis, ALS, Lou Gehrig's Disease**, progressive neurological disease

**NI**

---

**Anemia**, low level of red blood cells, low hemoglobin

**P+** Cause known, condition treated, resolved, mild, and stable 12 months; Hemoglobin (Hgb) > 13.

**P** Cause known, condition treated, resolved, 6 months' stability, Hgb > 12.

**S** Cause known, condition treated, resolved, stable 6 months, Hgb 10 – 11.9.

**SI, SII** Cause known, current treatment, hgb 9 – 9.9, stable x 18 months.

**IC** Others.

**NI** Anemia that is severe, or unstable, or specific diagnosis of aplastic anemia; anemia that is poorly controlled due to conditions of stomach or colon, or poorly controlled gynecological bleeding, or blood loss due to active malignancy.

---

**Aneurysm, abdominal aortic**, weakening of major blood vessel in the abdomen

**P** Surgically corrected, stable 12 months.

**S** Present < cm size, well-controlled blood pressure, size monitored, stable 24 months.

**NI** Present > 4 cm size.

---

**Aneurysm, thoracic aortic**, weakening of major blood vessel in the chest

**P** Surgically repaired, stable 12 months, no residual cognitive or functional limitations.

**S** Surgically repaired, stable 12 months, no cognitive impairment, mild functional residuals, fully independent.

**NI** Present, un-operated, or with any residual cognitive impairment, or any need for assistance with ADLs/IADLs, any moderate or severe functional impairment.

---

**Aneurysm, cerebral**, weakening of blood vessel(s) within the brain

**P** Surgically treated, no residual effects, normal cognitive function, no other vascular diseases, stable 36 months.

**S** Surgically treated, no residual effects, normal cognitive status, no other vascular diseases, 12 months' stability.

**NI** Present, or untreated, residual effects, cognitive loss, other vascular disorders.

---

**Angina pectoris**, chest pain related to the heart

**P** Well-controlled with medications, with bypass surgery, or with angioplasty, or with stent, stable 6 months; no elevated blood pressure, nonsmoker.

**S** Well-controlled with medications, well-controlled mild hypertension, stable 6 months, nonsmoker.

**SI, SII** Controlled with medications, controlled mild hypertension, non-smoker.

**IC** Occasional symptoms or with history of myocardial infarction, heart attack; nonsmoker.

**NI** Poorly-controlled symptoms, or with poor exercise tolerance, or smoker; with history of poorly controlled hypertension, heart attack, TIA, stroke, diabetes, atrial fibrillation.

---

**Angioplasty**, revascularization, repair of coronary arteries

**P** 6 months' stability, successful procedure, no complications, nonsmoker, no elevated blood pressure, no heart attack, stable angina.

**S** 6 months' stability, well controlled angina, nonsmoker, heart attack greater than 18 months ago, no other coronary surgeries.

**NI** Poorly-controlled symptoms, or poor exercise tolerance, or smoker, or with history of poorly-controlled hypertension, or heart attack within past 18 months; or with history of TIA, stroke, diabetes, atrial fibrillation, or heart failure.

---

**Anxiety disorder**, excessive worry, may interfere with daily activities

- P+** Mild symptoms, no hospitalizations for this condition, no social or functional impairment; stable, no flare up of symptoms or medication changes in past 36 months; occasional medication, i.e. once/wk or less.
  - P** Mild symptoms, use of one medication on a regular basis (> 3 x wk).
  - S** Moderate symptoms, daily medication use, no functional or social impairment, stable 60 months.
  - SI** Moderate symptoms, daily medication use, no functional or social impairment, stable 36 months.
  - SII** Moderate symptoms, regular use of medications, past history of hospitalization greater than 10 years ago; stable 36 months.
  - NI** Any degree of anxiety that impairs social or functional activity; hospitalization or ER visit(s) for this condition within past 10 yrs; symptoms unstable, poorly-controlled.
- 

**Aplastic anemia**, failure of bone marrow to produce blood cells

- IC** Resolved, stable 12 months, off all treatment, normal lab values, related cause identified and resolved.
  - NI** Present, unresolved.
- 

**Arnold Chiari malformation**, a disorder in which a portion of brain protrudes into the spinal canal

- P+** Asymptomatic, incidental finding, no cognitive limitations, no functional limitations.
  - P** Surgically treated, no residual cognitive or functional impairments, stable 12 months.
  - S** Surgically treated, no residual cognitive or functional impairments, stable 6 months.
  - SI** Current with mild, infrequent symptoms, occasional medications.
  - SII** Current with mild, occasional symptoms, regular medications.
  - NI** Currently symptomatic, surgery recommended or pending, and/or with any neurological or cognitive impairments.
- 

**Arteriosclerosis**, thickening, hardening, or plaque formation in the arteries

- P** 6 months' stability, without symptoms, diagnosed on examination; no comorbid conditions (see NI, below).
  - S** 12 months' stability, with mild symptoms well-controlled, no comorbid conditions (see NI).
  - NI** With smoking, or with residual symptoms of peripheral arterial disease, post operative complications; with diabetes, heart disease, atrial fibrillation, current skin ulcers, gangrene, other vascular disease, history of TIA, stroke, cognitive or functional limitations.
- 

**Arteriosclerosis obliterans**, progressive plaque formation within arteries to the extent that the vessels are entirely blocked

**NI**

---

**Arteriovenous malformation, AV malformation**, congenital malformation of arteries and veins

- P** 48 months' stability after full surgical resection or coil embolization, no residual lesion, no symptoms.
  - IC** All others.
  - NI** Present, unoperated; with residual lesion.
- 

**Arthritis, degenerative arthritis, osteoarthritis**, inflammation of joint(s)

- P+** Mild or minimal symptoms, or seen only on xray; no prescription medications for this for the past 36 months, no prednisone or cortisone treatment at any time, no surgery done or recommended; no functional limitations, no joint injections.
  - P** Mild to moderate symptoms, regular use of non-prescription medications; no joint replacements, no functional limitations, no joint injections.
  - S** Moderate symptoms, regular use of prescription medications, no functional limitations; single non-weight-bearing joint replacement stable 6 months.
  - SI** Moderate symptoms, no physical limitations, no use of narcotics, treatment with injections acceptable after 6 months' stability, prescription medications acceptable; multiple non-weight-bearing joint replacements.
  - SII** Moderate symptoms, mild physical limitations, occasional use of narcotics; other prescription medications acceptable.
  - NI** With more than mild physical limitations; surgery anticipated, surgery completed within the past 6 months; regular narcotic use; need for assistive devices.
- 

**Arthritis, Rheumatoid arthritis**, chronic inflammatory autoimmune disease, primarily of joints but can involve internal organs and tissues

- P** Mild, controlled with mild anti-inflammatories, stable 12 months, no functional limitations, no assistive devices.
  - S** Moderate, controlled with one medication, no steroid use, stable one year; no functional limitations, no assistive devices.
  - SI, SII** Moderate, controlled with multiple medications, history of one joint replacement stable 12 months; no functional limitations, no assistive devices.
  - NI** Physical limitations, history of multiple joint replacements, or anticipated surgery, any functional limitations or assistive devices.
- 

**Assisted living**, includes CCRC (continuous care retirement community)

- NI** Assisted living facilities offer help with ADLs such as eating, bathing, dressing, laundry, housekeeping, and assistance with medications. Many facilities also have centers for medical care; however, the care offered may not be as intensive or available to residents as the care offered at a nursing home. Assisted living is not an alternative to a nursing home, but an intermediate level of long-term care.
-

**Asthma**, inflammation of air passages of lungs and bronchial tubes

- P+** Mild, occasional medication use only, no Prednisone use, FEV1 >65%.
  - P** Mild, controlled with medications, no hospitalizations; inhaled steroids acceptable, stable 24 months without flare ups, past smoker > 24 months ago.
  - S** Mild to moderate; ≤ 4 attacks/yr, no hospitalizations, stable 24 months, with or without smoking; FEV1 50 – 65%.
  - SII** Moderate; with or without smoking; controlled with medication, oral steroids acceptable if within guidelines under 'steroid use' in this guide; with associated respiratory diseases such as COPD or bronchiectasis if FEV1 50 – 65% between attacks; inhaled steroids acceptable; may have 1 or 2 short courses of oral steroids per year; no hospitalizations in past 24 months.
  - NI** Severe disease, FEV1 < 50% between attacks; chronic daily use of steroids, associated unstable respiratory disease; history of hospitalization within the past 60 months.
- 

**Ataxia**, lack of muscle coordination due to disorder in the brain

**NI**

---

**Atrial fibrillation, episodic, paroxysmal**, recurrent rapid irregular heartbeat

- P** One or two brief episodes in 36 months; no known underlying heart disease; mild hypertension and mild diabetes acceptable.
  - S** Brief episodes; no syncope; no ER visits; no hospitalizations; no diabetes, TIA, stroke, coronary artery disease, no heart valve disease, no cardiomyopathy; no congestive heart failure; hypertension with excellent control is acceptable; 12 months stability; taking Coumadin with good compliance.
  - IC** Others.
  - NI** Poorly-controlled, not treated with anticoagulant medication, or with 2 episodes per year, or with diabetes, heart attack, TIA, stroke, CVA, with disease of heart valves, cardiomyopathy, or congestive heart failure.
- 

**Atrial fibrillation, chronic**, ongoing rapid irregular heartbeat

- S** Fibrillation controlled, with anticoagulant medications, without symptoms, syncope, other cardiovascular disease; stable 12 months, no hospitalizations or ER visits; no diabetes, TIA, stroke, coronary artery disease, no additional heart disease; hypertension under excellent control.
  - NI** Poorly-controlled, or with diabetes, TIA, stroke, additional heart disease (especially valve disease, cardiomyopathy, congestive heart failure).
- 

**Avascular necrosis**, loss of blood supply to bones resulting in the collapse of bone tissue

- P** Single bone, fully resolved with no functional limitations, 12 months' stability.
  - S** Recurrent episodes, single bone involvement, no functional limitations, 12 months' stability.
  - NI** Single or multiple episodes, or due to chronic illness, or with residual deficits.
- 

**AV malformation, arteriovenous malformation**, congenital malformation of arteries and veins

- P** 48 months' stability after full surgical resection or coil embolization, no residual lesion, no symptoms.
  - IC** All others.
  - NI** Present, unoperated; with residual lesion.
- 

## **B**

**Back disorder**, symptoms relative to bones and associated structures of the spine

- P+** No symptoms or medications for the past 36 months; no current physical therapy; no functional limitations.
  - P** Mild symptoms persistent but stable 6 months; no functional limitations, no disability, no assistive devices; regular use non-prescription medications.
  - S** Current mild to moderate symptoms; or symptoms relative to herniated disc; no functional limitations; regular use of prescription medication acceptable; no current narcotic use; see physical therapy guidelines.
  - SI** Compression fracture(s) on imaging study; no osteoporosis; mild to moderate symptoms, no narcotic use, minimal functional limitations.
  - SII** Mild to moderate symptoms; multiple medications acceptable; occasional narcotic use (≤ 3 x wk); minimal functional limitations.
  - NI** Severe symptoms, or disabling symptoms, any functional limitations, regular narcotic use, surgery recommended or planned, or receiving work comp, or disability reimbursement.
- 

**Back pain, muscle strain of the back**, symptoms of the back that do not involve bones and spinal structures; the underwriter will take into account the circumstance of the onset of symptoms, the intensity and duration of the pain. If symptoms are related to a fall, it cannot be as a result of dizziness, imbalance, vertigo, or syncope; those conditions will be underwritten separately.

- P+** 6 – 12 months' stability, no symptoms currently, muscle strain only, with no neuro-skeletal involvement, not related to falling, no functional limitations, no current treatment;
- P** 3 – 6 months' stability; muscle strain only with no neuro-skeletal involvement, not related to falls, no functional limitations, current treatment with OTC remedies only.
- S** Persistent mild-moderate muscle strain symptoms, stable with no neurological involvement, not related to falls; no functional limitations, no current narcotic use; no use of Rx Neurontin; 6-12 months' stability.

- SI** Moderate symptoms with mild functional limitations; no need for assistive devices; no neurological involvement; 12 months' stability;
- NI** Severe persistent symptoms, any neurological involvement, current narcotic use, more than mild functional limitations, use of Neurontin; need for assistive devices.
- 

**Barrett's esophagus, cell changes in the lining of the esophagus**

- P** Good response to treatment, with stable follow-up endoscopies;
- S** No endoscopy in the past 24 months;
- SI** No endoscopy in the past 36 months;
- SII** Chronic mild symptoms controlled with medication, negative biopsies, stable endoscopies;
- NI** Poorly-controlled, or any dysplasia on biopsy
- 

**Bell's palsy, partial paralysis of facial nerve**

- P+** Past history with complete recovery.
- P** Residual facial weakness not disabling.
- 

**Benign prostatic hypertrophy, BPH, enlarged prostate gland**

- P+** BPH present, minimal symptoms, unoperated, or surgery with good results, normal PSA, 3 months' stability;
- P** Mild to moderate symptoms, no surgery recommended or pending; normal PSA, 6 months' stability; past surgery with good results.
- NI** BPH, severe symptoms, or surgery recommended or pending; abnormal prostate exam, not worked up, or work up in progress, pending results of exam. See guidelines for PSA readings in this guide.
- 

**Bipolar, manic depression, mental illness of extreme mood swings which can be disabling**

- S** Well-controlled on medication; a single hospitalization more than 10 years ago acceptable; fully independent, no cognitive or functional limitations; 48 months' stability.
- SI** 36 months' stability; well-controlled on medication; a single hospitalization more than 10 years ago acceptable; fully independent, no cognitive or functional limitations.
- SII** 24 months' stability; well-controlled on medication; a single hospitalization more than 10 years ago acceptable; fully independent, no cognitive or functional limitations
- NI** Multiple psychiatric hospitalizations; any cognitive or functional impairment; multiple medication adjustments in past 48 months; hospitalization within the past 120 months.
- 

**Bladder disease, infection, infections of urinary bladder**

- P+** ≤ 4 per year, with complete recovery.
- P, S** Chronic low grade infections without incontinence.
- NI** Chronic infections; chronic incontinence.
- 

**Bladder prolapse, urinary bladder disorder**

- P+** Mild to moderate with no symptoms; or post-surgery, released from surgeon's care; no incontinence.
- IC** Other
- 

**Blood pressure, high or elevated, hypertension, abnormally high pressure in the arteries**

- P+** Mild, controlled at no greater than 140/90 average reading, without heart disease; without diabetes; stable 24 months.
- P** Mild, controlled with average readings no greater than 140/90, non-smoker, no heart disease, no diabetes; stable 12 months.
- S** Mild, controlled, stable 12 months; without diabetes; with mild stable coronary disease, average readings no greater than 140/90.
- S** Moderate, controlled without diabetes, without heart disease, stable 12 months, with average readings no greater than 145/95.
- SI** Moderate, control with medication(s), average readings ≤ 145/95, may be in combination with other cardiac conditions or diabetes if all conditions well controlled; 6 months' stability.
- SII** Moderate, controlled with medication(s), average readings < 160/90, with any other conditions well controlled, 6 months' stability.
- NI** Poorly-controlled with average readings greater than 160/95, or together with poorly controlled diabetes, severe coronary artery disease, stroke, TIA, atrial fibrillation, heart valve disease.
- 

**Braces, external appliance to support joint movement; face to face assessment may be required**

- SI, SII** Used for weakness, not for paralysis; without ADL limitations; single brace of leg, foot, or ankle acceptable.
- NI** With ADL limitations; with any other limb amputation.
- 

**Brain impairment, an abnormality of the function of the brain; may be cognitive or functional; most commonly a result of trauma**

- IC** Post-injury that does not significantly interfere with cognition or function.
- NI** Post-injury that continues to significantly interfere with brain function, cognition or function.
- 

**Brain tumor, benign, an abnormal growth of tissue within the brain**

- S** Stable 60 months after treatment, no functional or cognitive limitations, follow-up imaging studies favorable.
- NI** Present, unoperated; with cognitive or functional impairments, use of any assistive devices, and all others.
-

**Breast cancer, in situ**, early stage, localized malignancy of the breast

- P** 12 – 24 months' stability; one or two limited areas, surgically treated; lymph nodes negative; no recurrence.
  - S** 36 months' stability; extensive or recurrent disease, surgically treated; lymph nodes negative.
  - IC** Others; if any positive lymph nodes, rate as invasive breast cancer.
- 

**Breast cancer, invasive**, malignancy of the breast that involved additional tissue

- P** 96 months' stability; surgically treated, lymph nodes negative; no recurrence, 90 day elimination period (EP).
  - P** 60 months' stability; surgically treated; lymph nodes negative; no recurrence, 180 day EP.
  - S** 48 months' stability; surgically treated; lymph nodes negative; no recurrence.
  - SI** 36 months' stability; surgically treated; lymph nodes negative; no recurrence.
  - SII** 24 months' stability' surgically treated; lymph nodes negative; no recurrence.
  - IC** Moderately large lesion; any with positive lymph nodes; with recurrence.
  - NI** Other.
- 

**Breast disorder, benign**, a non-malignant abnormality of breast tissue

- P+** Fibrocystic disease, no surgery recommended or planned.
- 

**Bronchiectasis**, chronic dilatation of the breathing tubes in the lower part of the lungs

- P, S** Mild disease, non-smoker, 24 months without symptoms, no periods of disability, no respiratory therapy, normal PFTs, controlled with non-steroidal medication.
  - SI, SII** Moderate disease, non-smoker, controlled with medications, no history of respiratory therapy or steroids in past 12 months, FEV1 > 65%.
  - NI** Severe disease, frequent exacerbations, current steroid use, with smoking; FEV1 less than 50%.
- 

**Bronchitis**, infection in the air passages of the lungs

- P+** Acute attacks only, < 4 x year, resolved without complications, no underlying chronic bronchitis or COPD.
  - P** ≥ 4 attacks per year, without complications, mild well controlled asthma, no underlying chronic bronchitis or COPD; occasional short course of oral steroid use is acceptable.
  - IC** Chronic symptoms; all others.
- 

**Buerger's disease, thromboangiitis obliterans**, Inflammation of blood vessels with clotting.

- NI**
- 

**Bypass surgery**, coronary artery bypass grafting, CABG

- P** 6 months' stability; blood pressure well-controlled, no chest pain, or angina; no diabetes, heart attack,stroke, TIA, or atrial fibrillation; nonsmoker.
  - S** 6 months' stability, well-controlled with medications, well-controlled hypertension, nonsmoker; no heart attack, diabetes, stroke, TIA, atrial fibrillation; angina stable.
  - SI** 6 months' stability, former smoker, well-controlled with medications, well-controlled hypertension; no diabetes, stroke, TIA, atrial fibrillation; angina stable; no heart attack > 24 months ago.
  - NI** Poorly-controlled symptoms, or with poor exercise tolerance, or with smoking, poorly controlled hypertension, recent heart attack, any TIA, stroke, diabetes, atrial fibrillation, or other heart condition.
- 

**C**

**Cancer** (See impairment listings for specific type of cancer, if available; for other types of cancer, use this guide.) Cancer is an abnormal growth of malignant tissue.

- P** 60 months' stability; treated for cure, lymph nodes negative, no recurrence.
  - S** 36 months' stability, treated for cure, lymph nodes negative, no recurrence.
  - S** 48 months' stability; treated for cure, lymph nodes positive, no recurrence.
- 

**Cancer of the breast, in situ**, early stage, localized malignancy of the breast

- P** 12 – 24 months' stability; one or two limited areas, surgically treated; lymph nodes negative; no recurrence.
  - S** 36 months' stability; extensive or recurrent disease, surgically treated; lymph nodes negative.
  - IC** Others; if any positive lymph nodes, rate as invasive breast cancer.
- 

**Cancer of the breast, invasive**, malignancy of the breast that involved additional tissue

- P** 96 months' stability; surgically treated; lymph nodes negative; no recurrence, 90 day elimination period (EP).
  - P** 60 months' stability; surgically treated, lymph nodes negative; no recurrence, 180 day EP.
  - S** 48 months' stability; surgically treated; lymph nodes negative; no recurrence.
  - SI** 36 months' stability; surgically treated; lymph nodes negative; no recurrence.
  - SII** 24 months' stability; surgically treated; lymph nodes negative; no recurrence.
  - IC** Most moderately large lesions; cases with positive lymph nodes; any recurrence.
  - NI** Other.
-

**Cancer of the colon**, malignancy of the intestine

Tumor staged as "in situ":

- P** 24 months' stability, good follow-up.
- S** No period of stability, surgically removed.

Tumor stage Duke's A:

- P** 48 months' stability.
- S** 24 months' stability.
- SI** 12 months' stability.

Tumor stage Duke's B:

- P** 60 months' stability; surgically treated, negative lymph nodes; no recurrence.
- S, SI, SII** 36 months' stability; surgically treated, negative lymph nodes; no recurrence.

Tumor with positive lymph nodes:

- S** 60 months' stability; surgically treated; no recurrence.
  - SI, SII** 48 months' stability; surgically treated; no recurrence.
  - NI** Others
- 

**Cancer of the ovary**, malignancy of the ovaries

Negative lymph nodes, surgically treated, no recurrence:

- P** 60 months' stability.
- S** 36 months' stability.

Positive lymph nodes, surgically treated, no recurrence:

- P** 96 months' stability.
  - S** 60 months' stability.
  - SI, SII** 48 months' stability.
  - NI** Others
- 

**Cancer of the prostate**, malignancy of the prostate gland

Gleason 2 – 5; tumor stage T1 or T2; no recurrence:

- P** 60 months' stability, 90 day elimination period (EP).
- S** 36 months' stability, 90 day EP.
- SI** 24 months' stability, 180 day EP.
- SII** 12 months' stability, 180 day EP.

Gleason 6; tumor stage T1 or T2; no recurrence:

- P** 60 months' stability, 90 day EP.
- S** 36 months' stability, 180 day EP.

Gleason 7; tumor stage T1 or T2; no recurrence;

- S** 60 months' stability, 90 day EP.
  - SI** 36 months' stability, if pre-treatment PSA less than 20, 180 day EP.
  - IC** Others, 48 months' stability, 180 day EP.
  - NI** High stage/grade, hormone treatment (for example: Lupron, Eulixin)
- 

**Cancer of the skin**, basal cell or squamous cell cancers, malignancy of skin

- P+** Up to 4 (four) basal cell or squamous cell lesions removed, without complications.
  - P+** Other recurrences, or moderate stage, or recurrence, none for 48 months.
  - P** Other recurrences, or moderate stage, none for 24 months.
  - S** Frequent recurrence, but none for 24 months.
  - IC** Others (for malignant melanoma, see below).
- 

**Cancer of the skin, malignant melanoma**, serious type of skin cancer

- P** Very early stage, completely removed, 48 months' stability.
  - S** Very early stage, completely removed, 24 months' stability.
  - S** With any recurrence; with any positive lymph node, 120 months' stability.
  - SI, SII** Early stage, completely removed, 48 months' stability.
  - NI, IC** With recurrence; with positive lymph nodes.
- 

**Cane use**; the condition for which cane is used will be underwritten

- IC** Single-point, straight cane; face-to-face interview may be required; no falls; over the age of 60 when cane use began.
  - NI** Quad-cane, or four-point cane use, including occasional use; any falls or fractures.
- 

**Cardiomyopathy**, disease of heart muscle

- IC** Mild with minimal symptoms, stable 12 months.
  - NI** All others.
-

**Carotid artery disease**, thickening, narrowing or plaque formation in arteries of the neck

- P** Mild, < 50% stenosis, no stroke or TIAs, without symptoms, nonsmoker, stable 24 months from date of diagnosis.
  - S** Moderate, 51–60% stenosis, nonsmoker, without stroke or TIA, stable 24 months from time of diagnosis.
  - SI** Moderate, 61 – 69% stenosis, nonsmoker, if corrected with endarterectomy, no stroke or TIA, stable 24 months from time of diagnosis.
  - SII** Moderate with < 69 % stenosis, nonsmoker, with any other health conditions that are well controlled, stable 24 months.
  - NI** Severe, 70% stenosis, or symptomatic with any degree stenosis, or with TIA or stroke, or smoker currently or in the past 24 months.
- 

**Carpal tunnel syndrome**, repetitive stress injury, restricted or painful movement of wrist

- P+** Mild symptoms, no functional limitations.
  - P** Mild symptoms, non-prescription medication use, no regular narcotic use, no functional limitations, no brace or wrist support.
  - S** Mild to moderate symptoms, minimal functional limitations, prescription medication use, no regular narcotic use, nighttime wrist support only.
  - SI** Moderate symptoms, minimal functional limitations, prescription medication use, no regular narcotic use, daytime wrist support.
  - SII** Severe current symptoms, increasing functional limitations;
  - NI** Any symptoms that cause functional limitations, current regular narcotic use, surgery recommended and not done, or surgery scheduled.
- 

**Cataract**, clouding of the normally clear lens of the eye

- P+** Present, but surgery not necessary; or surgery completed without complications.
  - P** Surgery pending on one eye; other eye already done, or has no significant visual impairment.
  - SI** Surgery pending, both eyes.
- 

**Catheter use**; the need for a tube to be inserted into the urinary bladder to allow for excretion of urine

**NI**

---

**CCRC**, continuous care retirement community residence

Assisted living facilities offer help with ADLs such as eating, bathing, dressing, laundry, housekeeping, and assistance with medications. Many facilities also have centers for medical care; however, the care offered may not be as intensive or available to residents as the care offered at a nursing home. Assisted living is not an alternative to a nursing home, but an intermediate level of long-term care.

**NI**

---

**Cerebral palsy**, congenital neurological disorder

- SI, IC** Mild disease, minimal ambulatory difficulty without braces; orthotics acceptable, no functional impairment, living independently.
  - SII, IC** Mild disease, minimal ambulatory difficulty with braces; orthotics acceptable; no functional impairment, living independently.
  - NI** All others.
- 

**Cerebral vascular accident**, see “stroke”

---

**Charcot-Marie-Tooth disease**, disorder of nerves of feet, legs, hands

- S** 60 months' stability; mild involvement of feet and legs only, no assistive devices or braces required.
  - IC** 24 months' stability, ambulatory without assistance; no more than very slowly progressive.
- 

**Cholecystitis/cholelithiasis, gall bladder disease**, inflammation of, or stones in the gallbladder

- P+** stones present, incidental finding, no symptoms; or after surgery with no complications, and 3 months stability.
  - P** 12 months' stability, stones present, single flare of symptoms, no surgery done;
  - S** 24 months' stability, 1 or 2 past episodes of symptoms, or with mild cholecystitis, stable with no current symptoms.
  - IC** All others.
- 

**Chronic fatigue syndrome**, ongoing symptoms of persistent fatigue which may interfere with daily activities.

- P** History of condition, fully recovered, 24 months' stability; no past or present limitations, no history of being on disability from work or otherwise functionally impaired; no current treatment.
  - S** Mild symptoms, 24 months' stability, treated with non-prescription medications, no past or present functional limitations.
  - SI, SII** Moderate symptoms, 24 months stability, use of prescription medications, no functional limitations, no narcotic use.
  - NI** Described as severe, or with past or present associated memory loss; or recent onset < 24 months; or regular use of narcotics, any functional limitations.
- 

**Chronic obstructive pulmonary disease (COPD), emphysema**, persistent obstruction of the airways of the lungs

- P** Mild disease, non-smoker; FEV1 greater than 65%.
  - S** Moderate disease, non-smoker; FEV1 50 – 65%.
  - IC** Mild disease, continued smoking with FEV1 greater than 65%.
  - NI** Severe, or FEV1 less than 50%.
- 

**Cirrhosis, liver**, gradual destruction of the ability of the liver to function

**NI**

---

**Claudication**, pain in legs associated with poor circulation

**NI**

---

**Colitis, ulcerative**, inflammatory bowel disease

- P+** Asymptomatic, or minimal symptoms, stable 24 months, no treatment, no medication, acceptable medical follow-up (including colonoscopies), weight stable within guidelines for P+.
  - P** Status post total colectomy, no complications, no problems with ileostomy management, stable since surgery, no treatment or medication, 24 months' stability.
  - S** Minimal to moderate symptoms, controlled with one medication, acceptable medical follow-up (including colonoscopies), weight stable, overall condition stable 24 months.
  - SI** 24 months' stability, moderate symptoms, acceptable medical follow up including colonoscopy, multiple medications; no flares in stability period, weight stable.
  - SII** Moderate symptoms, acceptable medical follow-up including colonoscopies, multiple medications, no flares in past 12 months, weight stable.
  - NI** All others.
- 

**Collagen-vascular disease/mixed connective tissue diseases**

Auto-immune rheumatic disorder with features similar to, and overlapping with lupus, polymyositis, and scleroderma

**NI**

---

**Colon cancer**, malignancy of the intestine

Tumor staged as "in situ":

- P** 24 months' stability, good follow-up.
- S** No period of stability, surgically removed.

Tumor stage Duke's A:

- P** 48 months' stability.
- S** 24 months' stability.
- SI** 12 months' stability.

Tumor stage Duke's B:

- P** 60 months' stability; surgically treated, negative lymph nodes; no recurrence.
- S, SI, SII** 36 months' stability; surgically treated, negative lymph nodes; no recurrence.

Tumor with positive lymph nodes:

- S** 60 months' stability; surgically treated; no recurrence.
  - SI, SII** 48 months' stability; surgically treated; no recurrence.
  - NI** Others
- 

**Colostomy**, an opening of a portion of the bowel through the abdominal wall; reason for surgery will also be underwritten

- SI** Stable 24 months post surgery.
  - NI** Complications, or lack of stability period.
- 

**Complex regional pain syndrome, reflex sympathetic dystrophy, causalgia**, chronic pain due to traumatic nerve injury

- P** 12 months' stability, fully resolved, no residuals.
  - S** 12 months' stability, with non-prescription medications, no current physical therapy; or with 60 months' stability, currently symptomatic, controlled with prescription medications; no functional limitations.
  - SI, SII** Currently symptomatic, may be controlled with prescription medications, without functional limitations.
  - NI** Currently symptomatic or with current functional limitations, current physical therapy, current regular narcotic pain control.
- 

**Confusion**, mental disorientation

**NI**

---

**Congestive heart failure**, CHF, weakened ability of the heart muscle to pump blood

- P** History of congestive heart failure, resolved and stable for 12 months, off heart medication.
  - S** 12 months' stability, history of CHF, underlying heart problem fully investigated and treated successfully; ejection fraction of greater than 45%.
  - SI, SII** Chronic or multiple episodes of congestive heart failure, stable 24 months, underlying heart problem stable with ejection fraction greater than 45%.
  - NI** Others
- 

**COPD, chronic obstructive pulmonary disease, emphysema**, persistent obstruction of the airways of the lungs

- P** Mild disease, non-smoker; FEV1 greater than 65%.
  - S** Moderate disease, non-smoker; FEV1 50 – 65%.
  - IC** Mild disease, continued smoking with FEV1 greater than 65%.
  - NI** Severe, or FEV1 less than 50%.
-

**Corneal transplant**, replacement of diseased cornea of the eye

- P** One eye involved only; other eye with normal cornea; no significant visual impairment, 24 months' stability.
  - SI** 24 months' stability, both eyes involved without rejection, no complications
  - NI** Others
- 

**Coronary artery disease, coronary artery bypass graft surgery (CABG)**, surgical placement of a donor vessel, or shunt, to route blood flow around a blockage in a vessel of the heart

- P** 6 months stability; blood pressure well-controlled, no chest pain, or angina; no diabetes, heart attack, stroke, TIA, or atrial fibrillation; nonsmoker.
  - S** 6 months' stability, well-controlled with medications, well-controlled hypertension, nonsmoker; no heart attack, diabetes, stroke, TIA, atrial fibrillation; angina stable.
  - SI** 6 months' stability, former smoker, well-controlled with medications, well-controlled hypertension; no diabetes, stroke, TIA, atrial fibrillation; angina stable; no heart attack > 24 months ago.
  - NI** Poorly-controlled symptoms, or with poor exercise tolerance, or with smoking, poorly controlled hypertension, recent heart attack, any TIA, stroke, diabetes, atrial fibrillation, or other heart condition.
- 

**CREST syndrome**, slowly progressive systemic sclerosis

- NI**
- 

**Creutzfeldt-Jakob syndrome**, a form of dementia

- NI**
- 

**Crohn's disease**, inflammatory disease of small bowel

- P** Stable 12 months, minimal or no symptoms, unoperated, no associated complications, no steroid treatment, weight stable;
  - P** 60 months' stability since last flare, or since surgery; no current symptoms; no oral steroids or 6-mercaptopurine (Purinethol); no more than one related surgery.
  - S** Stable 12 months or more since last flare, or since surgery, no symptoms, no current symptoms; no oral steroids or 6-mercaptopurine (Purinethol); no more than 1 related surgery.
  - SI** Mild symptoms, no oral steroids; 6-MP (Purinethol) is acceptable.
  - SII** Moderate symptoms, whether or not surgically treated previously, low dose steroid treatment and/or 6-MP (Purinethol) acceptable.
  - NI** Less than 12 months since major flare, any complications, including fistula, malabsorption, weight loss, bowel obstruction, significant abdominal pain, hospitalization in past year.
- 

**Cushing's syndrome**, disorder of the adrenal glands

- IC** Caused by pituitary tumor or adrenal tumor, resolved after surgery; will be rated according to primary cause, underlying disease, and steroid use.
  - NI** If caused by steroid use, and currently remains on steroids.
- 

**CVA, see "stroke"**

---

**Cystic fibrosis**, congenital disease of the lungs

- NI**
- 

## **D**

**Defibrillator, implantable cardioverter defibrillator, ICD**, device to control heart rhythm disorder

- NI**
- 

**Degenerative arthritis**, inflammation of joints

- P+** Mild or minimal symptoms, or seen only on xray; no prescription medications for this for the past 36 months, no prednisone or cortisone treatment at any time, no surgery done or recommended; no functional limitations, no joint injections.
  - P** Mild to moderate symptoms, regular use of non-prescription medications; no joint replacements, no functional limitations, no joint injections.
  - S** Moderate symptoms, regular use of prescription medications, no functional limitations; single non-weight-bearing joint replacement stable 6 months acceptable.
  - SI** Moderate symptoms, no physical limitations, no use of narcotics, treatment with injections acceptable after 6 months' stability, prescription medications acceptable; multiple non-weight-bearing joint replacements acceptable.
  - SII** Moderate symptoms, mild physical limitations, occasional use of narcotics; other prescription medications acceptable.
  - NI** With more than mild physical limitations; surgery anticipated, surgery completed within the past 6 months; regular narcotic use; need for assistive devices.
- 

**Dementia, all forms**, mental confusion, memory loss, cognitive impairment

- NI**
-

**Depression, mental disorder of altered mood**

**Preferred Plus**

- Stable for 24 months controlled with one medication.
- May be situational or chronic.
- No bipolar disorder.
- No functional impairment from any cause.
- No history of hospitalizations or ER visits for mental illness.
- No history of ECT (electro convulsive therapy, electric shock therapy).
- Does not interfere with daily activities or work.

**Preferred**

- Stable for 12 months, controlled with one medication.
- May be situational or chronic.
- No bipolar disorder.
- No functional impairment from any cause.
- No history of hospitalizations or ER visits for mental illness.
- No history of ECT (electro convulsive therapy, electric shock therapy).
- Does not interfere with daily activities or work.

**Standard/Select I/Select II:**

- May require multiple medications to manage.
- Well-controlled bipolar or manic depressive disease stable 48 months.
- No hospitalizations or ER visits in the past 72 months.
- No history of ECT.
- No cognitive or functional impairment.

**Not Insurable:**

- Severe disease.
- History of multiple hospitalizations.
- Multiple medication adjustments within the last 24 months.
- Any history of ECT.
- Any indication of functional or cognitive impairment.

---

**Dermatomyositis, chronic weakness and inflammation of muscles**

**NI**

---

**Diabetes mellitus, impaired sugar metabolism**

- P** Mild, including the isolated diagnosis “hyperglycemia” without diabetes; average Hgb A1C  $\leq$  7.0, controlled with diet only; otherwise good health, non-smoker for more than 5 years, none of the comorbid conditions listed under “NI.”
- S** Mild, average Hgb A1C  $<$  7.0, controlled with diet, otherwise good health, nonsmoker, none of the comorbid conditions listed under “NI.”
- SI** Mild, average Hgb A1C 7.1 – 8.0, none of the comorbid conditions listed under “NI;” controlled with oral medications for  $\leq$  10 years; with elevated blood pressure readings or taking blood pressure medications.
- SII** Mild to moderate, nonsmoker for 2 or more years, average A1C 8.1 – 9.0, use of oral anti-diabetic medications; with elevated blood pressure readings, or taking blood pressure medications.
- NI**
- Insulin use for 10 years or more.
  - Average Hgb A1C  $>$  9.0.
  - Coronary artery disease.
  - Cerebrovascular disease, CVA, TIA.
  - Hypertension (unless very mild, and well controlled).
  - Atrial fibrillation.
  - Current smoker.
  - Peripheral vascular disease (PVD).
  - Peripheral neuropathy.
  - Nephropathy, kidney damage.
  - Albuminuria.
  - Retinopathy, eye damage.

---

**Dialysis, kidney, or renal dialysis, process of mechanically removing metabolic wastes from the blood**

**NI**

---

**Disabled, collecting disability benefits, worker's compensation, or Social Security disability payments** except possibly for blindness  
**NI**

---

**Diverticulitis/diverticulosis**, pouching, or bulging of the intestines, may be infected

- P+** Incidental imaging diagnosis; or mild, recovered, no hospitalizations.
  - P, S** Mild to moderate symptoms, controlled, stable 6 months; or any brief hospitalizations within past 36 months with stable recovery.
  - SI, SII** Moderate, fully-controlled, stable; any hospitalizations in past 36 months, but no hospitalizations in past 12 months.
  - NI** Severe flare within past 24 months requiring more than brief hospitalization, but no surgery done; or 3 or more flares within past 24 months; or surgery anticipated, recommended, or scheduled.
- 

**Dizziness, vertigo**, sensation of spinning, lightheadedness, weakness, unsteadiness, loss of balance

- P+** 24 months' stability; episodic, fully investigated, serious condition ruled out, benign cause, no functional limitations, no related falls.
  - P** 3 months' stability; occasional insignificant dizziness only; no functional limitations; no related falls; serious condition ruled out.
  - P** Labyrinthitis or vestibulitis diagnosis firmly established; imaging scan negative for central nervous system disease; non-progressive; no functional limitations; no related falls; 24 months' stability.
  - S** Labyrinthitis or vestibulitis diagnosis firmly established; imaging scan negative for central nervous system disease; non-progressive; no functional limitations; no related falls; 6 months' stability.
  - SI** Meniere's disease as above, except no imaging studies done.
  - SII** 12 months' stability; associated single fall without injury; without coexisting neurological or vascular symptoms.
  - NI** Current dizziness or vertigo; cause of symptoms unknown; evaluation in progress.
- 

**Drug dependency or abuse**, chronic compulsive dependence on a substance that produces adverse physical and psychological consequences

- P** In recovery  $\geq$  60 months, good health, stable; no severe multi-drug or IV drug dependency.
  - S** In recovery  $\geq$  36 months, good health, stable; no severe multi-drug or IV drug dependency.
  - SI** In recovery  $\geq$  36 months, related health conditions well-controlled, stable.
  - NI** In recovery less than 36 months, or any relapses in recovery period, or continued use.
- 

## **E - G**

**Emphysema, COPD, chronic obstructive pulmonary disease**, chronic obstruction of airway passages in the lungs

- P** Mild disease, non-smoker; FEV1 greater than 65%.
  - S** Moderate disease, non-smoker; FEV1 50 – 65%.
  - IC** Mild disease, continued smoking with FEV1 greater than 65%.
  - NI** Severe, or FEV1 less than 50%.
- 

**Endarterectomy**, surgical treatment of carotid artery disease

- SI** 12 months' stability after surgery, no TIA, no stroke, nonsmoker, surgery on one side only.
  - SI** 36 months' stability after surgery on one side only, if TIA prior to surgery.
  - SII** 24 months' stability after surgery on one side only; nonsmoker, with any other health conditions that are well controlled and not listed under "NI."
  - NI** Bilateral endarterectomy; TIA or stroke; recurring or residual stenosis of vessel(s); symptomatic with any degree of stenosis; current smoker, or past smoker in most recent 24 months; with diabetes, with any type of atrial fibrillation; moderate or severe heart valve disease; history of heart attack; angina; arterial thrombosis; arterial embolism; peripheral vascular disease; claudication; unstable blood blood pressure.
- 

**Endocarditis**, inflammation of lining of the heart

- S** Recovered without complications, no residual heart damage, full exercise tolerance, 12 months' stability.
  - S** Recovered with only complication being stable mild residual valve disease, heart damage; 48 months' stability; full exercise tolerance.
  - SI** 12 months' stability with recovery and mild residual heart valve disease, full exercise tolerance.
  - SII** 36 months' stability, recovery with moderate residual heart valve disease, full exercise tolerance.
  - NI** Related to prosthetic device, multiple episodes, cardiac symptoms, or with residual moderate to severe heart damage.
- 

**Epilepsy, seizure disorder**, chronic disorder of brain wave activity that causes intermittent seizures

- P** 24 months' stability, well-controlled on medications, no associated cognitive or functional limitations.
  - S** 12 months' stability, well-controlled on medications, no cognitive or functional limitations.
  - NI** Seizure within past 12 months, poor control, seizure of unknown cause, and/or any residual associated cognitive or functional limitations.
-

**Epstein-Barr syndrome**, infectious mononucleosis, chronic viral infection

**P, S** Full recovery, 6 months' stability, no hospitalization, no residual splenomegaly known; no residual fatigue.

**SI, SII** Full recovery, hospitalization more than 6 months ago, spleen involvement resolved.

**NI** Recent infection within past 6 months, or ongoing symptoms or residual effects.

---

**Esophageal varices**, chronic obstruction of blood flow of the esophagus related to liver function

**NI**

---

**Esophagitis, GERD or gastro-esophageal reflux disease**, symptoms of heartburn

**P+** Symptoms controlled with diet and/or medication; no stricture of esophagus.

**P** Ongoing mild to moderate symptoms, no more than mild stricture of esophagus, stable 24 months.

---

**Falls**, reason for the fall(s) will be underwritten

**P+** Single fall, 24 months' stability, with minor or no injury; no fractures, not associated with dizziness; no gait disturbance; no need for assistive devices for ambulation; no TIA or stroke.

**P** Single fall in past 12 months, with no injury or fracture; not associated with dizziness, or gait disturbance, or TIA; no assistive devices.

**S** Two falls with minor or no injury; last one more than 24 months ago, cause identified, treated and resolved; no need for assistive devices.

**SI** 1 or 2 falls, minor injury, no fractures, cause of fall has been treated and resolved, stable 12 months; no assistive devices.

**SII** More than 2 falls without injury, last one more than 12 months ago, cause identified, treated, resolved; no need for assistive devices.

**NI** Multiple falls including within the past 12 months, with fractures, or need for assistive devices.

---

**Fibromyalgia**, chronic condition with fatigue and widespread muscle and joint pain

**P+** Fully recovered 48 months, no limitations, no treatment.

**P** Fully recovered, 24 months' stability.

**S** Mild symptoms treated with non-prescription medications; 36 months' stability.

**SI** Moderate symptoms, 36 months' stability, use of prescription medications, no functional limitations, no narcotic use.

**SII** 24 months' stability, moderate symptoms, use of prescription medications, no functional limitations.

**NI** Severe symptoms, or recent onset within past 24 months, or use of narcotics for this condition, or with any functional limitations.

---

**Fuch's corneal dystrophy**, congenital condition of the eye

**SI** One eye involved, with corneal transplant, no visual impairment, 24 months' stability.

**SII** One eye involved, with corneal transplant, no visual impairment, 12 months' stability.

**SII** One eye involved, without corneal transplant, 36 months' stability.

**NI** Both eyes involved; corneal transplant being considered within next 36 months; corrected visual acuity worse than 20/40 in best eye.

---

**Gastric bypass surgery**, surgical procedure for decreasing absorption of nutrients from the small intestine; used to treat obesity

**P** 48 months' stability, no complications of liver problems, vitamin deficiencies or malabsorption; weight stable; no diabetes, no cardiac disease, no joint disease of hips, knees, back.

**S** 24 months' stability, no complications of liver problems, vitamin deficiencies or malabsorption; weight stable; no vitamin deficiencies or malabsorption; no diabetes, no cardiac disease, no joint disease of hips, knees, back.

**SI** 24 months' stability, any complications have resolved and remained stable; weight stable, no diabetes, no cardiac disease; mild joint disease acceptable; any hypertension if well-controlled.

**SII** 24 months' stability, any complications have resolved and remained stable, no diabetes, minimal joint symptoms, well-controlled hypertension, build stable.

**SII** 36 months' stability after any complications have been resolved and remained stable; well-controlled diabetes with Hgb A1C  $\leq$  7.0; minimal joint symptoms, no hypertension; build stable.

**NI** Any complications including liver problems/abnormalities, vitamin deficiencies or malabsorption; dumping syndrome, anemia, vitamin deficiency, or liver problems; with arteriosclerotic heart disease or cardiomyopathy, moderate to severe joint disease of hips, knees, or back; poorly controlled blood pressure.

---

**Gallbladder, cholecystitis, cholelithiasis**, inflammation of, or stones in the gallbladder

**P+** Stones present, incidental finding, no symptoms; or after surgery with no complications, and 3 months' stability.

**P** 12 months' stability, stones present, single flare of symptoms, no surgery done;

**S** 24 months' stability, 1 or 2 past episodes of symptoms, or with mild cholecystitis, stable with no current symptoms.

**IC** All others.

---

**Gastro-intestinal (GI) polyps**, usually benign growths in the lining of the stomach and intestines

**P+** Surgically removed, no further disease, no active bleeding.

**IC** Malignant, see criteria for cancer.

---

**GERD, gastro-esophageal reflux disease, esophagitis**, symptoms of heartburn

**P+** Symptoms controlled with diet and/or medication; no stricture of esophagus.

**P** Ongoing mild to moderate symptoms, no more than mild stricture of esophagus, stable 24 months.

---

**Gilles de la Tourette syndrome, Tourette's syndrome**, inherited neurological disorder, characterized by unusual, repetitious, unintentional behaviors

**P** Controlled, fully functional, no added psychiatric diagnosis, stable 24 months.

**S, SI, SII** Controlled symptoms, additional neurological conditions.

**IC** Controlled, fully functional, with any additional diagnoses.

**NI** Poorly-controlled, untreated; or with functional or cognitive impairments.

---

**Glaucoma**, disorder of regulation of pressure within the eye; may cause loss of vision

**P+** Mild to moderate without visual impairment.

**NI** Visual impairment that affects ADLs.

---

**Goiter**, enlarged thyroid gland

**P+** Stable with treatment.

---

**Gout**, painful joint inflammation due to crystallization of uric acid in the joint

**P+** Mild disease, 6 months' stability with no acute flares of symptoms; medications of a preventive nature only.

**P** Mild disease, preventive medication, infrequent flares; 6 months' stability.

**S** Moderate disease with multiple joints involved, or with mild deformity.

**NI** Moderate to severe disease; or with regular narcotic use, or with functional limitation or assistive devices; or with kidney disease.

---

**Guillain-Barre syndrome, GBS, "French polio,"** inflammatory disorder of nerves outside the brain and spinal cord, with impairment of sensation and movement

**P+** Fully recovered, no residuals, stable 24 months.

**P** Fully recovered with no residuals, stable 12 months.

**S** 24 months' stability; recovered with mild residuals, no functional limitations.

**NI** Less recovery period than noted above; with relapses, or more than mild neurological residuals.

---

## H

**Hashimoto's thyroiditis**, inflammation of thyroid gland

**P+, P** Treated and controlled

**NI** Untreated, or poorly controlled

---

**Headaches, migraine**, moderate to severe throbbing pain in the head; may involve nausea and vomiting; may be worsened by light, odors, physical activity

**P+, P** Mild to moderate, preventive medication acceptable, 12 months' stability.

**S, SI, SII** Severe, occasional narcotic use acceptable ( $\leq 3$  x wk).

**NI** Regular narcotic use ( $> 3$  x wk, ongoing).

---

**Heart attack, myocardial infarction, MI**, sudden blockage of blood flow to the muscle of the heart

**P, S** Mild, stable 12 months, nonsmoker, no functional limitations, no stroke, TIA, atrial fibrillation; no recent angina; no known carotid stenosis or peripheral arterial disease; blood pressure under good control.

**S, SI** Moderate, stable 24 months; nonsmoker, any other conditions well controlled, no stroke, TIA, atrial fibrillation; no recent angina; blood pressure under good control; mild, non-insulin-dependent diabetes, onset within past 48 months with average Hgb A1C  $\leq 7.0$ .

**NI** With chronic angina, chronic chest pain, poorly controlled blood pressure, smoker, or with diabetes other than the above, or with stroke, TIA, or with atrial fibrillation.

---

**Heart murmur**, abnormal heart sound caused by partially impaired blood flow through the valves

**P+** No functional limitations, no symptoms, no treatment required; any arrhythmia must be under excellent control.

**P, S** Asymptomatic moderate murmur unevaluated; with arrhythmia not under good control.

**NI** Unevaluated grade IV/VI, without symptoms; or with symptoms other than arrhythmia.

---

**Heart valve disease**, dysfunction or malformation of the flow-regulators between the chambers of the heart

**P** 12 months' stability, well controlled, full recovery if surgically corrected, good exercise tolerance, single valve, no other heart disorders; no atrial fibrillation.

**S, SI, SII, IC** With other cardiac disorder, or multiple valve disease.

**NI** Surgery recommended or planned, or with chronic atrial fibrillation.

---

**Hemiplegia, hemiparesis**, paralysis of half of the body

**NI**

---

**Hemochromatosis**, blood disorder

- P** No known cirrhosis or other organ involvement; regular treatment with phlebotomies acceptable if labs normal after treatment; stable 24 months.
  - SII** No known cirrhosis or other organ involvement, regular treatment, normal lab results.
  - NI** Known or suspected cirrhosis; abnormal lab results after treatment; any organ involvement.
- 

**Hemophilia**, blood clotting disorder

- NI**
- 

**Hepatitis**, disorder involving inflammation of the liver

- P+** Hepatitis A or Hepatitis E: full recovery, no complications, stable 12 months, normal labs.
  - P** Hepatitis B: full recovery, no complications, normal labs, stable 12 months.
  - P** History of Hepatitis C, chronic, treated, recovered, normal labs, 24 months' stability.
  - S** Chronic carrier of hepatitis: history of Hepatitis B, chronic, normal labs, no fibrosis on recent biopsy; 24 months' stability.
  - NI** Any type that is current, or any described as alcoholic, auto-immune, or active Hepatitis C, Hepatitis D, or any type with cirrhosis or fibrosis of the liver.
  - IC** Others.
- 

**Herniated disc**, bulge or rupture of the disk(s) between the vertebrae of the spine

- P+** No symptoms or medications for the past 36 months; if symptoms diagnosed as only muscle strain, 6 months stability; no current physical therapy; no functional limitations.
  - P** Mild symptoms resolved, stable for 6 months, resolved by surgery; no functional limitations, disability, no assistive devices; regular use non-prescription medications.
  - S** Current symptoms, no functional limitations, regular use of prescription medication, no current regular narcotic use, physical therapy acceptable.
  - SI** Mild to moderate symptoms, no regular narcotic use, minimal functional limitations no osteoporosis.
  - SII** Mild to moderate symptoms, multiple medications, occasional narcotic use ( $\leq 3$  x wk), minimal functional limitations, no surgery recommended or planned; not receiving worker's compensation or disability payments.
  - NI** Severe symptoms, disabling symptoms, functional limitations, regular narcotic use, surgery recommended or planned, receiving worker's compensation or disability reimbursement.
- 

**Hiatal hernia**, protrusion of the stomach upward into the esophagus

- P+** Asymptomatic, or mild symptoms.
  - P** Mild to moderate with good control.
  - NI** Severe, uncontrolled symptoms, or surgery recommended or anticipated.
- 

**High blood pressure, hypertension**, abnormally high pressure in the arteries

- P+** Mild, controlled at no greater than 140/90 average reading, without heart disease; without diabetes; stable 24 months.
  - P** Mild, controlled with average readings no greater than 140/90, non-smoker, no heart disease, no diabetes; stable 12 months.
  - S** Mild, controlled, stable 12 months; without diabetes; with mild stable coronary disease, average readings no greater than 140/90.
  - S** Moderate, controlled without diabetes, without heart disease, stable 12 months, with average readings no greater than 145/95.
  - SI** Moderate, control with medication(s), average readings  $\leq 145/95$ , may be in combination with other cardiac conditions or diabetes if all conditions well-controlled; 6 months' stability.
  - SII** Moderate, controlled with medication(s), average readings  $\leq 160/90$ , with any other conditions well controlled, 6 months' stability.
  - NI** Poorly-controlled with average readings greater than 160/95, or together with poorly controlled diabetes, severe coronary artery disease, stroke, TIA, atrial fibrillation, heart valve disease.
- 

**Hip replacement**, the condition for which procedure was done will also be underwritten

- P+, P** Single hip joint replacement, fully recovered, no functional limitations, 6 months' stability following completion of rehabilitation, no other joints involved; no regular use of narcotics.
  - P, S** Single hip joint replacement, 6 months' stability from time of surgery, no complications, no functional limitations, mild arthritis other joints, no pain with walking.
  - S** Single hip replacement completed, 6 months' stability from time of surgery, moderate arthritis of one or more other joints, no functional limitations; no regular use of narcotics.
  - SI, SII** Single or both hip joint(s) replacement completed, 6 months' stability from time of surgery; moderate arthritis; or mild functional limitations.
  - NI** Hip replacement anticipated within next 24 months, or regular use of narcotics.
- 

**HIV positive**

- NI**
-

**Hodgkin's lymphoma, lymphoma**, cancer of lymphatic system

Stage I, successfully treated, no bone marrow transplant done.

**S** 36 months' stability.

**SI** 24 months' stability.

**SII** 12 months' stability.

Stage II, successfully treated, no bone marrow transplant done.

**SI** 36 months' stability, successfully treated; no bone marrow transplant done.

**SII** 24 months' stability, successfully treated; no bone marrow transplant done.

Stage III or IV; or any stage, or with bone marrow transplant done with full recovery, or if any relapse

**IC** 96 months' stability

---

**Home Health Care service**, within previous year

**NI**

---

**Huntington's chorea**, inherited disease of the nervous system

**NI**

---

**Hydrocephalus**, abnormal accumulation of fluid in the brain, with or without VP (ventriculo-peritoneal) shunt

**NI**

---

**Hyperparathyroidism**, over-production of hormones of the parathyroid gland

**P+** Surgically corrected, full function, 12 months' stability.

**P** Not surgically treated; no evidence of pending surgery; lab values for calcium < 11.5; 12 months' stability.

**S, I** Not surgically treated; no evidence of pending surgery; 36 months' stability; lab values for calcium always < 12.0.

**NI** Surgery pending; or calcium levels 12.0 or greater; or with severe or untreated osteoporosis.

---

**Hypertension, HTN, high blood pressure**, elevated pressure within the arteries

**P+** Mild, controlled at no greater than 140/90 average reading, without heart disease; without diabetes; stable 24 months.

**P** Mild, controlled with average readings no greater than 140/90, non-smoker, no heart disease, no diabetes; stable 12 months.

**S** Mild, controlled, stable 12 months; without diabetes; with mild stable coronary disease, average readings no greater than 140/90.

**S** Moderate, controlled without diabetes, without heart disease, stable 12 months, with average readings no greater than 145/95.

**SI** Moderate, control with medication(s), average readings ≤ 145/95, may be in combination with other cardiac conditions or diabetes if all conditions well controlled; 6 months' stability.

**SII** Moderate, controlled with medication(s), average readings ≤ 160/90, with any other conditions well controlled, 6 months' stability.

**NI** Poorly-controlled with average readings greater than 160/95, or together with poorly-controlled diabetes, severe coronary artery disease, stroke, TIA, atrial fibrillation, heart valve disease.

---

**Hyperthyroidism**, over-production of hormone from the thyroid gland

**P+, P** Without symptoms, controlled with medication, 6 months' stability, resolved with surgery or I-131 radiation.

**NI** Untreated, or poorly controlled, ongoing symptoms.

---

**Hypothyroidism**, under-production of hormone from the thyroid gland

**P+** Controlled with medications, 2 months' stability.

**IC** Others.

**NI** Untreated or poorly controlled.

---

**Hysterectomy**, surgical removal of uterus

**P+** For non-malignant reasons, 2 months' stability without complications.

All others will be underwritten for the condition for which the surgery was done.

---

**I**

**ICD, implantable cardioverter defibrillator**, device to control heart rhythm disorder

**NI**

---

**Ileostomy**, surgically created opening in which a part of the bowel is brought through the abdominal wall, where waste is expelled; reason for which surgery was done will be underwritten

**S** 24 months after surgery, stable without complications.

**SI, SII** 6 - 12 months post-surgery, without complications.

**NI** On-going complications from surgery, or from condition for which the surgery was done.

---

**Implantable cardioverter defibrillator, ICD**, device to control heart rhythm disorder

**NI**

---

**Incontinence, fecal**, leakage of bowel contents

- S** Stress or urge type, minimal leakage; easily managed independently; symptoms not getting worse; no medications required.
  - SI, SII** Stress or urge type, with occasional leakage; requires medications or devices to manage; non-progressive, fully independent in care.
  - NI** Others.
- 

**Incontinence, urinary**, leakage of urine

- P+** Urinary stress or urge type, minimal leakage, easily managed, symptoms not progressive, no medications required.
  - P** Urinary stress or urge type, with leakage, requires medications or devices to manage, non-progressive, completely independent in care.
  - S** Urinary stress of urge type, history of corrective surgery or history of skin breakdown due to incontinence, with 6 months' stability, use of medications or devices acceptable, independent in managing care.
  - SI, SII** Urinary incontinence any type, requires medications and/or devices to manage; history of hospitalization due to bladder dysfunction, fully resolved, stable 12 months; independent in managing care.
  - IC** 24 months' stability, with mild, stable neurogenic bladder; no in-dwelling catheter; very well managed incontinence; no functional limitations, nonprogressive symptoms.
  - NI** Catheter use, indwelling or intermittent more than twice weekly; poorly managed incontinence; limited functional abilities; progressive symptoms; or with any fecal incontinence.
- 

**Inner ear disorder**, abnormality of the structure and function of the ear

- P+, P** Mild, occasional medication use; rare vertigo; no falls.
  - S** Moderate, regular medication use, no associated neurological symptoms.
  - SI, SII** Moderate, with intermittent vertigo or dizziness, no falls.
  - NI** Severe, with any neurological disorders, or with multiple falls.
- 

**Intestinal angina**, abdominal pain caused by narrowed or blocked blood vessel(s) to the intestines

**NI**

---

**Intestinal obstruction**, partial or complete obstruction of the passageway in the small or large bowel

- P+** One episode only, surgically corrected, no malignancy, 12 months' stability, no ileostomy, no colostomy.
  - P** 2 or more episodes, surgically corrected, or one episode not surgically corrected, no malignancy, 24 months' stability; Standard rates if only 12 months' stability; an -ostomy will be rated separately.
  - SI, SII** More than 2 episodes, not surgically corrected; 24 months' stability.
  - NI** Surgery anticipated, or regular use of narcotics.
- 

**Irritable bowel syndrome (IBS)**, abnormal bowel function, alternating between constipation and diarrhea

- P+** Mild.
  - P** Moderate.
  - S, SI, SII** Occasionally severe symptoms, stable; no functional impairment, no associated comorbid conditions or chronic fatigue symptoms or fibromyalgia; 36 months' stability.
  - NI** Severe, or surgery anticipated, poorly controlled, or with fecal incontinence.
- 

**ITP, idiopathic thrombocytopenia purpura**, blood clotting disorder

- P+** Fully recovered without current therapy, without splenectomy, 24 months' stability.
  - P** Treated with splenectomy, fully recovered, no current therapy, 24 months' stability.
  - S** Chronic, asymptomatic ITP with or without a history of splenectomy, average platelet count over previous 24 months at > 90,000; on no treatment, no counts over previous 24 months greater than 90,000.
  - IC** Intermittent use of low dose steroid therapy.
  - NI** Need for chronic, continuous steroids, or with history of CVA, TIA, or with neurological deficits, hospitalization or complications due to ITP.
- 

**J – K**

**Kidney dialysis**, process of mechanically removing metabolic wastes from the blood

**NI**

---

**Kidney infection, pyelonephritis**, infection of the collecting portion of the kidney

- P+** Single episode, recovered, stable 24 months, normal kidney function.
  - P** Single episode, recovered, stable 12 months, normal kidney function.
  - S** Stable 36 months, 2 episodes; recovered, normal kidney function.
  - SI, SII** Chronic infection stable 36 months, normal kidney function; no more than mild proteinuria.
  - NI** Chronic, unstable, or abnormal kidney function; more than mild proteinuria.
-

**Kidney infection, glomerulonephritis**, infection involving the filtering portion of the kidney

- P+** Post-streptococcal, or other glomerulonephritis, completely resolved; normal renal function, 60 months' stability, normal renal function, normal urine testing.
  - P** 36 months' stability; post-streptococcal, or other glomerulonephritis, completely resolved; normal renal function, normal renal function, normal urine testing.
  - S** Post-streptococcal, normal renal function, 36 months' stability.
  - NI** Abnormal renal function, or any renal failure or insufficiency.
- 

**Kidney stones (calculi), nephrolithiasis**, an aggregation of mineral salts within the urinary system

- P+** Resolved, single episode, without current symptoms, stable 3 months.
  - P** More than 2 episodes, treated and resolved, without current symptoms, stable 3 months.
  - IC** All others.
- 

**Kidney transplant**, grafting of a living organ from one person to another

**NI**

---

**Knee replacement**, removal of diseased joint, and insertion of an artificial joint in its place

- P+, P** Total or partial single knee joint replacement, no post operative complications, 6 months' stability after rehabilitation complete, no functional limitations, no other joints involved.
- P, S** Total or partial or bilateral knee joint replacement(s), 6 months' stability from time of surgery, no complications, no functional limitations, mild arthritis other joints.
- SI, SII** Total or partial single knee replacement completed, 6 months' stability from time of surgery, moderate arthritis other joints, mild functional limitations.
- NI** If after 6 months from time of surgery, there are complications; or functional limitations or pain with ambulating, or if surgery recommended or pending, or current narcotic use.

## L – M

**Lacunar infarction**, lacunar infarct, a small vascular blockage deep within the brain

- P** Single infarct, no neurologic residuals, stable 60 months.
  - S** Single small infarct, no neurological residuals, stable 24 months.
  - SI** Asymptomatic, 2 small infarcts, no neurological residuals, stable 24 months
  - SII** Minor neurological residuals, minor functional limitations, no assistive devices; no cognitive impairment, blood pressure controlled  $\leq 140/80$ ; stable 24 months.
  - NI** Any history of stroke with ADL or other limitations, multiple strokes, or any CVA with high blood pressure, or with atrial fibrillation, or with diabetes, or smoking.
- 

**Lambert-Eaton syndrome**, myasthenia syndrome, a neurological disorder

**NI**

---

**Leukemia**, malignancy of white blood cells and bone marrow

CLL, chronic lymphocytic leukemia

- SI** Stage 0, or Stage I; 36 months' stability; asymptomatic; stable lab results.
- NI** Stage II, III, or IV; with unstable blood results.

CMLL, chronic myelogenous leukemia

**NI**

ALL, acute lymphocytic leukemia

- P** 96 months' stability; no bone marrow transplant.
- S** 96 months' stability, with successful bone marrow transplant done; no relapse.
- IC** Other.

AML, acute myelogenous leukemia

- P** 96 months' stability; no bone marrow transplant.
- S** 96 months' stability, with successful bone marrow transplant; no relapse.
- IC** Other.

Hairy cell leukemia

- SI** 120 months' stability after treatment completed; no current spleen or lymph node enlargement.
  - SII** 96 months' stability after treatment; no current spleen or lymph node Enlargement; bone marrow biopsy within past 36 months with normal results.
-

**Lung cancer**, malignancy of lung

- SI** 96 months' stability; surgical removal, no positive lymph nodes; no evidence of recurrence or spread of the disease; non smoker for at least 60 months, 90 day elimination period (EP).
  - IC** Others.
  - NI** Positive lymph nodes; continued smoking; spread of cancer; recurrence.
- 

**Lupus, discoid**, inflammatory skin disorder which can effect internal organs

- P** Limited to skin, no other lupus symptoms; no oral steroid use; 60 months' stability.
  - S** Limited to skin, no other lupus symptoms; no oral steroid use; 24 months' stability.
  - SI** Limited to skin, no other lupus symptoms, no oral steroid use; 12 months' stability.
  - NI** If diagnosed as lupus erythematosus, or systemic lupus erythematosus.
- 

**Lyme disease**, infectious disease spread by deer tick, may effect joints

- P+** 6 months' stability after full recovery.
  - P** 6 months' stability after recovery, with minimal residual effects that are well-controlled.
  - IC** ≤ 6 months' recovery, with current treatment, no ADL limitations.
  - NI** Symptoms poorly-controlled, with residual functional impairment, with or without current treatment.
- 

**Lymphoma, Hodgkin's lymphoma**, cancer of the lymphatic system

Stage I, successfully treated, no bone marrow transplant done

- S** 36 months' stability.
- SI** 24 months' stability.
- SII** 12 months' stability.

Stage II, successfully treated, no bone marrow transplant done

- SI** 36 months' stability, successfully treated; no bone marrow transplant done.
- SII** 24 months' stability, successfully treated; no bone marrow transplant done.

Stage III or IV; or any stage, or with bone marrow transplant done with full recovery, or if any relapse

- IC** 96 months' stability
- 

**Macular degeneration**, progressive degeneration of the retina of the eye

- P+** 12 months' stability, without vision impairment.
  - P** 60 months' stability, with mild vision impairment
  - NI** Progressive or moderate visual impairment or ADL dependency.
- 

**Malignant melanoma**, serious type of skin cancer

- P** Very early stage, completely removed, 48 months' stability.
  - S** Very early stage, completely removed, 24 months' stability.
  - S** With any recurrence; with any positive lymph node, 120 months' stability.
  - SI, SII** Early stage, completely removed, 48 months' stability.
  - NI, IC** With recurrence; with positive lymph nodes.
- 

**Manic depression, bipolar disorder**, a mental illness of extreme mood swings which can be disabling

- S** Well-controlled on medication; a single hospitalization more than 10 years ago acceptable; fully independent, no cognitive or functional limitations; 48 months' stability.
  - SI** 36 months' stability; well-controlled on medication; a single hospitalization more than 10 years ago acceptable; fully independent, no cognitive or functional limitations.
  - SII** 24 months' stability; well-controlled on medication; a single hospitalization more than 120 months ago acceptable; fully independent, no cognitive or functional limitations.
  - NI** Multiple psychiatric hospitalizations; any cognitive or functional impairment; multiple medication adjustments in past 48 months; hospitalization within past 120 months.
- 

**Medicaid recipient**, an individual receiving funding from a government agency for medical expenses

- NI**
- 

**Memory loss**, confusion, dementia, cognitive disorder

- NI**
- 

**Meniere's disease**, sudden severe attacks of dizziness or vertigo

- P** 24 months' stability, not progressive, no functional limitations, controlled with medications.
  - S** 24 months' stability, not progressive; rare falls; no functional limitations; controlled with medication.
  - NI** With evidence of coexisting neurological problems, vascular disorder, strokes, hospitalizations, or frequent falls.
  - IC** Other.
-

**Mental retardation**, disorder of below average mental functioning

NI

---

**Mitral valve prolapse**, ineffective closure of the valve between the left chambers of the heart

**P+, P** Mild to moderate, without symptoms, no other cardiac conditions.

**S** 24 months' stability with surgically replaced valve, no other significant cardiac conditions.

**IC** Others.

**NI** With other cardiac conditions including atrial fibrillation, CVA, stroke, TIA, or other valve disease.

---

**Multiple myeloma**, cancer of white blood cells

NI

---

**Multiple sclerosis, all types**, progressive disease of nerve fibers of brain and spinal cord

NI

---

**Muscular dystrophy**, genetic disease of progressive loss of muscle function

NI

---

**Myasthenia gravis**, neurological disorder with muscle weakness

**P+** 60 months' stability, resolved with thymectomy or other therapy; no symptoms, off all treatment for 36 months.

**SI, SII** 60 months' stability; ocular myasthenia only; well-controlled, stable on one medication.

---

**Myelodysplasia, myelodysplastic syndrome**, bone marrow disorder

NI

---

**Myocarditis, inflammation of heart muscle**

**P+** History of single episode, complete recovery, no underlying heart disease, no arrhythmia, no congestive heart failure, no heart-related symptoms, off all heart-related medication, 36 months' stability.

**P** History of single episode, complete recovery, no underlying heart disease, no arrhythmia, no congestive heart failure, no heart-related symptoms, off all heart-related medication, 24 months' stability.

**S** Complete recovery, no other heart disease, no arrhythmia; off all heart-related medications; 12 months' stability.

**NI** History of myocarditis with CHF; with serious arrhythmia; or with functional impairment.

---

**Myocardial infarction, MI, heart attack**, sudden blockage of blood flow to the muscle of the heart

**P, S** Mild, stable 12 months, nonsmoker, no functional limitations, no stroke, TIA, atrial fibrillation; no recent angina; no known carotid stenosis or peripheral arterial disease; blood pressure under good control.

**SI, SII** Moderate, stable 24 months; nonsmoker, any other conditions well controlled, no stroke, TIA, atrial fibrillation; no recent angina; blood pressure under good control; mild, non-insulin-dependent diabetes, onset within past 48 months with average Hgb A1C  $\leq 7.0$ .

**NI** With chronic angina, chronic chest pain, poorly controlled blood pressure, smoker, or with diabetes other than the above, or with stroke, TIA, or with atrial fibrillation.

---

## N – Q

**Narcolepsy**, disabling neurological disorder of sleep regulation

**P** 36 months' stability, well-controlled, independent in ADLs, no functional or cognitive impairment, no falls or accidents.

**S** 24 months' stability, well-controlled, independent in ADLs, no functional or cognitive impairment, no falls or accidents.

**NI** Poorly-controlled; with any functional or cognitive impairment.

---

**Narcotic use**, use of a category of drugs that depress the function of the central nervous system; the condition for which this is used will also be underwritten

**IC** Occasional use for any condition; "occasional" is  $\leq 3$  pills per week.

**NI** Regular use for any condition; "regular" is  $> 3$  pills per week.

---

**Nephrolithiasis, kidney stone**, an aggregation of mineral salts within the urinary system

**P+** Single episode, resolved, without current symptoms, stable 3 months.

**P+** Two episodes, treated and resolved, without current symptoms, stable 24 months

**P** More than 2 episodes, no current symptoms, stable 36 months

**NI** Current symptoms.

---

**Nephrosclerosis**, hardening of kidney tissue

NI

---

**Nephrotic syndrome**, progressive kidney damage

NI

---

**Neurogenic bladder** loss of normal urinary bladder function due to a disorder of the nerves that effect the bladder

**SII** 24 months' stability; mild condition; no incontinence; no catheterization needed.

**NI** Progressive disease, more than moderate symptoms; daily incontinence; daily catheterization needed.

---

**Neuropathy, peripheral neuropathy**, numbness, tingling of part of the body due to nerve disorder; most common in feet and hands

**P** Mild numbness of fingers or feet; fully functional; non-progressive or improved, 60 months' stability; no weakness, no diabetes, no narcotic use.

**S** Mild numbness of feet or fingers; fully functional; fully functional; non-progressive; no weakness, no diabetes, 12 months' stability.

**S** Peripheral nerve injury or entrapment; minimal or no residual functional impairment; no surgery recommended or planned; 24 months' stability; no more than mild stable, or improving weakness; no diabetes, no narcotic use.

**NI** Major symptoms, or use of narcotics, or with impaired function, or if due to diabetes; any symptoms that are progressive.

---

**Nursing home confinement, current or in past 12 months**

**NI**

---

**Organ transplant, except cornea**, grafting of living tissue from one person to another

**NI**

---

**Organic brain syndrome (OBS)** chronic disease or injury that interferes with brain function

**NI**

---

**Osteomyelitis**, infection involving bone tissue

**P+** Single bone involvement, fully resolved with no functional limitations, no diabetes; 24 months' stability.

**P** Single bone involvement; fully resolved and stable for 12 months; no diabetes; no functional limitations.

**P** Single bone involvement; recurrent episodes fully resolved; no diabetes; no functional limitations; 48 months' stability.

**S** Recurrent episodes, single bone involvement, no functional limitations, 12 months' stability; no diabetes.

**NI** Any active infection current; single or multiple episodes due to chronic illness, including diabetes; or with residual deficits.

---

**Osteoarthritis, OA, arthritis**, inflammation of joint(s)

**P+** Mild or minimal symptoms, or seen only on xray; no prescription medications for this for the past 36 months, no prednisone or cortisone treatment at any time, no surgery done or recommended; no functional limitations, no joint injections.

**P** Mild to moderate symptoms, regular use of non-prescription medications; no joint replacements, no functional limitations, no joint injections.

**S** Moderate symptoms, regular use of prescription medications, no functional limitations; single non-weight-bearing joint replacement stable 6 months acceptable.

**SI** Moderate symptoms, no physical limitations, no use of narcotics, treatment with injections acceptable after 6 months' stability, prescription medications acceptable; multiple non-weight-bearing joint replacements acceptable.

**SII** Moderate symptoms, mild physical limitations, occasional use of narcotics; other prescription medications acceptable.

**NI** With more than mild physical limitations; surgery anticipated, surgery completed within the past 6 months; regular narcotic use; need for assistive devices.

---

**Osteoporosis**, condition of decreased bone tissue

**P** Mild disease, stable 24 months, asymptomatic, no history of falls, no fractures, using at least one corrective medication or supplement, bone mineral density (BMD) results in T scores average better than -3.0, non smoker, no falls or fractures.

**S** Moderate disease, stable 24 months, asymptomatic, no history of falls, no fractures, treated with medication or supplements, average BMD scores better than -3.5; non smoker, no falls or fractures.

**SI** Mild to moderate disease, treated with medication or supplements, smoker, no falls or fractures, average BMD T scores better than -3.5.

**SII** Moderate disease, treated with medication or supplements, smoker, a single BMD T score of -4.5, with overall T score average better than -3.5.

**NI** Severe symptoms, with or without functional limitations; use of assistive devices; underweight; condition untreated; any history of falls or fractures; BMD T scores less favorable than -4.5.

---

**Ovarian cancer, cancer of the ovary**, malignancy of the ovaries

Negative lymph nodes, surgically treated, no recurrence:

**P** 60 months' stability.

**S** 36 months' stability.

Positive lymph nodes, surgically treated, no recurrence:

**P** 96 months' stability.

**S** 60 months' stability.

**SI, SII** 48 months' stability.

**NI** Others

---

**Oxygen use**, supplemental therapy to increase oxygen availability for the body

**NI**

---

**Pacemaker**, device implanted in the body to regulate heartbeat; the condition for which this device is needed will also be underwritten

**S** 36 months' stability; clinical conditions stable, asymptomatic; no ongoing cardiac arrhythmia after placement; no syncope or pre-syncope after placement.

**SI** 24 months' stability; asymptomatic clinical conditions; no ongoing serious cardiac arrhythmia after placement; no syncope or pre-syncope after placement.

**SII** 12 months' stability; asymptomatic clinical conditions; no ongoing serious cardiac arrhythmia after placement; no syncope or pre-syncope after placement.

**NI** Any ongoing cardiac arrhythmia, after placement or procedure, any symptoms of syncope (fainting) or pre-syncope (near-fainting).

---

**Paget's disease of bone**, bones become enlarged, weakened and deformed

**P** Localized, no symptoms, no bone pain, no fracture, no neurologic symptoms, no limitations, 12 months' stability.

**S** More than local skeletal involvement but not extensive; no associated symptoms or fractures; lab tests, i.e. alkaline phosphatase, stable; 24 months' stability.

**SI** More than local skeletal involvement but not extensive; no associated symptoms or fractures; lab tests stable; 12 months' stability.

**NI** Marked extensive bone involvement; progressively rising lab tests; greater than minimal bone discomfort; with bone deformity, or any associated pathological fracture; any neurological involvement; any associated functional limitation.

---

**Pancreatitis**, inflammation of pancreas

**P+** If due to gallstone disease; no history of excessive alcohol use; one or two episodes; completely resolved; 36 months' stability.

**P** One episode; idiopathic; no history of excessive alcohol use; stable 36 months.

**S** One episode; idiopathic; no history of excessive alcohol use; stable 24 months.

**SI** One episode, idiopathic; no history of excessive alcohol use, stable 12 months.

**SII** One or two episodes resulting from alcohol abuse, if no current alcohol use, 60 months' stability.

**NI** More than two episodes or chronic pancreatitis.

---

**Paralysis**, weakness, or lameness of part of the body

**SI** 48 months' stability; weakness or paralysis of one upper extremity due to trauma; active without functional impairment.

**SII** 48 months' stability; weakness or paralysis of one lower extremity due to trauma; active without functional impairment; single brace acceptable.

**NI** More than one extremity, and others.

---

**Parkinson's disease**, progressive condition affecting balance, coordination, ability to walk and ability to swallow

**NI**

---

**Pericarditis**, inflammation of the sac around the heart

**P+** 24 months' stability after single episode, no other heart disease, completely resolved; no underlying autoimmune disorder or tuberculosis suspected.

**P** 12 months' stability; after single episode, no other heart disease, completely resolved.

**IC** All others; rating will depend on extent and severity of episode.

---

**Peripheral neuropathy**, numbness, tingling of part of the body due to nerve disorder

**P** Mild numbness of fingers or feet; fully functional; non-progressive or improved, 60 months' stability; no weakness, no diabetes, no narcotic use.

**S** Mild numbness of feet or fingers; fully functional; non-progressive; no weakness, no diabetes, 12 months' stability.

**S** Peripheral nerve injury or entrapment; minimal or no residual functional impairment; no surgery recommended or planned; 24 months' stability; no more than mild stable, or improving weakness; no diabetes, no narcotic use.

**NI** Major symptoms, or use of narcotics, or with impaired function, or if due to diabetes; any symptoms that are progressive.

---

**Peripheral vascular disease, PVD**, disease of blood vessels of arms and legs

**P** 6 months' stability; mild, asymptomatic, not surgically treated; nonsmoker, no diabetes, no heart disease, no other vascular disease, no CVA, stroke, TIA, skin ulcers, no current or past gangrene or amputation.

**S** 6 months' stability; moderate disease, not surgically treated; no smoking, no heart disease, CVA, stroke, TIA, or additional vascular disease; no skin ulcers, no current or past gangrene; no amputation.

**NI** Current symptoms (claudication); or any surgical treatment; or with smoking, diabetes, heart disease, CVA, stroke, TIA, additional vascular disease, skin ulcers, or with current or past gangrene, or with amputations.

---

**Phlebitis, DVT deep vein thrombosis, venous stasis, venous stenosis**, blood clot, or stagnation of blood; the cause will be underwritten as well

- P+** Single episode, with precipitation identifiable cause such as trauma or surgery; successfully treated, complete recovery; 24 months' stability.
  - P** Single episode, with precipitation identifiable cause such as trauma or surgery; successfully treated, complete recovery; 6 months' stability.
  - S** More than one episode, cause known, successfully treated, complete recovery, 36 months' stability.
  - SI** More than one episode, cause known, successfully treated, complete recovery, 24 months' stability.
  - SII** Inferior vena cava filter or umbrella surgically placed; no subsequent clotting events; 60 months' stability.
- 

**Physical therapy**, a medically directed program of improving musculoskeletal movement

- P+** No functional impairment, no regular narcotic use, no assistive devices, no prescription medications other than NSAIDs [non-steroidal anti-inflammatory drugs], 6 months' stability.
  - P** No functional impairment, no regular narcotic use, no assistive devices, no prescription medications other than NSAIDs [non-steroidal anti-inflammatory drugs], < 6 months' stability.
  - S** Minimal functional impairment, no ADL limitations, no assistive devices, no regular narcotic use, no prescription medications (other than NSAIDs), no functional limitations.
  - SI, SII** Minimal functional impairment, no ADL limitations, no regular narcotic use, prescription medications acceptable; 3 months' stability.
  - NI** Moderate functional impairment, need for assistive devices, any ADL limitations; need for assistive devices.
- 

**Pick's disease**, a form of dementia with onset of symptoms usually prior to age 60

**NI**

---

**Polycystic kidney disease**, genetic disorder with progressive kidney failure

---

**Polycythemia vera, p.vera**, disorder of bone marrow

- IC** Hemoglobin controlled within normal range, asymptomatic, 120 months' stability.
  - NI** Others.
- 

**Polymyalgia rheumatica, PMR**, disorder of muscles of shoulders and hips

- P** Controlled without steroids, stable 12 months.
  - S** Controlled with low dose steroids ( $\leq 5$  mg prednisone per day); symptoms improving; no functional limitations; stable 12 months
  - NI** Any functional limitations, or complications from steroid use, or any ADL or IADL dependencies, or need for assistive devices.
- 

**Post-polio syndrome**, muscle weakness that occurs several years after acute paralytic poliomyelitis

- IC, usually NI** History of past poliomyelitis, post-polio symptoms, or recent increasing fatigue, or history of shortness of breath, 36 months' stability after resolution of symptoms.
- 

**Pregnancy**, gestational process of growth and development of a fetus

- P** If currently pregnant, or if within 30 days postpartum with apparent full and uncomplicated recovery.
- 

**Prostate cancer**, malignancy of the prostate gland

Gleason 2 – 5; tumor stage T1 or T2; no recurrence:

- P** 60 months' stability, 90 day elimination period (EP).
- S** 36 months' stability, 90 day EP.
- SI** 24 months' stability, 180 day EP.
- SII** 12 months' stability, 180 day EP.

Gleason 6; tumor stage T1 or T2; no recurrence:

- P** 60 months' stability, 90 day EP.
- S** 36 months' stability, 180 day EP.

Gleason 7; tumor stage T1 or T2; no recurrence:

- S** 60 months' stability, 90 day EP.
  - SI** 36 months' stability, if pre-treatment PSA less than 20, 180 day EP.
  - IC** Others, 48 months' stability, 180 day EP.
  - NI** High stage/grade, hormone treatment (for example: Lupron, Eulixin)
- 

**Prostate disorders, prostatism, benign prostatic hypertrophy, BPH**, enlarged prostate gland

- P+** BPH present, minimal symptoms, unoperated, or surgery with good results, normal PSA, 3 months' stability.
  - P** Mild to moderate symptoms, no surgery recommended or pending; normal PSA, 6 months' stability; past surgery with good results.
  - NI** BPH, severe symptoms, or surgery recommended or pending; abnormal prostate exam, not worked up, or work up in progress, pending results of exam. See guidelines for PSA readings in this guide.
-

**PSA**, elevated, a blood test that measures prostatic specific antigen, which is a marker of abnormal prostate function

- P+** PSA stable <6 or trending downward. Biopsy negative. 12 months' stability.
  - P** Abnormal PSA <6, no nodule on exam. No biopsy; 12 months' stability.
  - S** PSA 6-10. No biopsy. No prostate nodule on exam. 12 months' stability.
  - IC** PSA 11 – 20, without biopsy, no prostate nodule on exam; 36 months' stability.
  - NI** PSA 11 – 20; without biopsy; no prostate nodule on exam, > 36 months' stability; or any current PSA > 20.
- 

**Psychosis**, mental disorder that generally impairs behavior

- SII** 60 months' stability; single episode, fully recovered; may be on single medication; no other major mental health co-morbidities; no chronic schizophrenia.
  - NI** Other.
- 

**Pulmonary embolism**, blood clot to the lung(s)

- P+** Single episode, with precipitation identifiable cause such as trauma or surgery; successfully treated, complete recovery; 24 months' stability.
  - P** Single episode, with precipitation identifiable cause such as trauma or surgery; successfully treated, complete recovery; 6 months' stability.
  - S** One or two episodes, cause known, successfully treated, complete recovery, 36 months' stability.
  - SI** Two episodes, cause known, successfully treated, complete recovery, 24 months' stability.
  - SII** One or two episodes with inferior vena cava filter or umbrella surgically placed; no subsequent clotting events; 60 months' stability.
  - SII** Three or more episodes, treated with medication, stable 96 months without recurrence.
- 

**Pulmonary fibrosis**, scarring of lung tissue

- P** Incidental diagnosis on chest x-ray only, not described as diffuse.
  - S** Inactive disease, no treatment required, nonsmoker, never a smoker; not diffuse.
  - SI** Inactive disease, no treatment, current smoker, not diffuse.
  - NI** Others, or any described as idiopathic.
- 

## R – Z

**Restless legs syndrome**, movement disorder involving painful sensations in legs during periods of inactivity or rest

- P+** Mild symptoms, controlled on medication(s), no functional impairment; 12 months' stability.
  - P** Moderate symptoms, controlled on medication(s) with no functional impairment; 12 months' stability.
  - S** Moderate symptoms, controlled on medication(s) with no functional impairment; 6 months' stability.
  - NI** Severe symptoms; or with any functional limitations .
- 

**Retinitis pigmentosa** , progressive degeneration of the retina of the eye

**NI**

---

**Retinopathy**, disorder of the retina of the eye

- IC** Due to causes other than diabetes (cause will also be underwritten).
  - NI** Due to diabetes.
- 

**Rheumatoid arthritis**, chronic inflammatory autoimmune disease, primarily of joints but can involve internal organs and tissues

- P** Mild, controlled with mild anti-inflammatories, stable 12 months, no functional limitations, no assistive devices.
  - S** Moderate, controlled with one medication, no steroid use, stable 1 year; no functional limitations, no assistive devices.
  - SI, SII** Moderate, controlled with multiple medications, history of one joint replacement stable 12 months; no functional limitations, no assistive devices.
  - NI** Physical limitations, history of multiple joint replacements, or anticipated surgery, any functional limitations or assistive devices.
- 

**Sarcoidosis**, inflammatory disease that begins in lungs; may involve other organs

- P+** Full recovery presumed but without x-ray, no residual disease; 36 months' stability.
  - P** 6 months' stability; Full recovery presumed but without x-ray, no residual disease.
  - S** 12 months' stability; Stage I, no limitations, normal PFTs; active lifestyle.
  - SI** 36 months' stability; Stage II, no limitations; occasional use of inhaled steroids acceptable; active lifestyle, no abnormal PFTs.
  - NI** Stage III-IV disease; persistent diffuse disease; or progressive disease; or with multiple organ involvement; and/or involvement of heart or central nervous system; or with any hospitalization required; or current treatment with oral steroids required.
- 

**Schizophrenia**, disabling brain disorder

**NI**

---

**Scleroderma**, auto-immune disorder of connective tissue

**NI**

---

**Sclerosing cholangitis**, progressive disorder of gall bladder, liver, and bile ducts

**NI**

---

**Seizure disorder, epilepsy**, chronic disorder of brain wave activity that causes intermittent seizures

- P+** 60 months' stability, no associated cognitive or functional limitations.
  - P** 24 months' stability, well-controlled on medications, no associated cognitive or functional limitations.
  - S** 12 months' stability, well-controlled on medications, no cognitive or functional limitations.
  - NI** Seizure within past 12 months, poor control, seizure of unknown.
- 

**Shunts in brain, heart, or kidney**, an artificial passage to divert fluids within the body (not the same as a 'stent')

---

**Shy-Drager syndrome**, progressive disorder of nervous system

**NI**

---

**Sjogren's syndrome**, autoimmune disorder, may be associated with rheumatoid arthritis

- P** Mild symptoms of eyes and mouth, no steroid or immunosuppressive treatment, no functional limits, no organ involvement, 12 months' stability.
  - S** Moderate to severe symptoms of eyes and mouth, require regular attention; no functional limits, no organ involvement, no evidence of progression, 12 months' stability.
  - NI** Progressive disease, or any organ involvement.
- 

**Skin cancer**, basal cell or squamous cell cancers

- P+** Up to 4 (four) basal cell or squamous cell lesions removed, without complications.
  - P+** Other recurrences, or moderate stage, or recurrence, none for 48 months.
  - P** Other recurrences, or moderate stage, none for 24 months.
  - P** Single recurrence, early stage, within 12 months.
  - S** Frequent recurrence, but none for 24 months.
  - IC** Others (for malignant melanoma, see criteria in this guide)
- 

**Sleep apnea**, brief cessation of breathing during sleep

- P** Mild or moderate, controlled with medications or C-PAP; mild well controlled hypertension acceptable.
  - S** Mild or moderate, controlled with C-PAP. Associated with mild atherosclerotic heart disease; 12 months' stability.
  - NI** Severe, or poorly-controlled, or affects daytime functioning; mild to moderate disease associated with more than mild hypertension or more than mild heart disease.
- 

**Smoking cigarettes**, behavior of smoking tobacco rolled in paper

- P** Without medical problems
  - S** With chronic respiratory infections, chronic bronchitis, bronchiectasis, or with well-controlled atrial fibrillation.
  - SI, SII** With exercise intolerance; inactive pulmonary fibrosis; clinically significant COPD ruled out; FEV1 > 50%; or with well-controlled atrial fibrillation.
  - NI** With diabetes, coronary artery disease, heart attack, MI, stroke, CVA, TIA, COPD, emphysema, severe asthma, abnormal pulmonary function test results.
- 

**Social Security Disability Insurance recipient**, SSDI, an individual who is receiving funding from a government source to compensate for medical costs and lost wages

**NI**

---

**Spinal stenosis**, narrowing of the spinal canal

- P** Mild or by imaging only, stable 24 months, no functional impairments or neuropathy.
  - S** Successfully treated surgically, with full recovery, no residual deficits, no functional impairment, 12 months' stability.
  - SI** Mild to moderate symptoms, no functional impairment, no assistive devices for ambulation, no neuropathy.
  - SII** Moderate symptoms, mild neuropathy, no functional impairment, no surgery planned or recommended.
  - NI** Moderate to severe degree, functional limitations present, surgery recommended or planned.
  - IC** All others.
- 

**Stent**, cardiovascular, neural, or renal; material used to hold tissue in place, or support to maintain an open blood vessel or tube to accommodate urine flow; will underwrite the primary condition

**IC**

---

**Steroid use, chronic**, ongoing use of a type of drug used to control inflammation; will underwrite the condition for which the medication is used; the concern with chronic steroid use is the damage to bones, and to the heart. "Steroid" also known as cortisol, cortisone or Prednisone

- IC** < 7.5 mg/day orally, or ≥ 4 joint injections/yr, or ≥ 4 taper dose "bursts" orally/yr.
  - NI** ≥ 7.5 mg/day.
-

**Stroke, 'brain attack,'** sudden loss of neurological function, caused by vascular injury in the brain

- SI** 60 months' stability, cardioembolic stroke only [stroke caused by clot], single event, underlying cause resolved, no carotid stenosis, no diabetes, no neurologic residuals.
- NI** Any other type of stroke [hemorrhagic], any history of stroke with ADL or other residual limitations, multiple strokes, any stroke with high blood pressure, or with atrial fibrillation, or with diabetes, or with smoking.

\*If lacunar infarct, see 'lacunar infarct' in this impairment section.

---

**Subarachnoid hemorrhage,** bleeding between the membranes covering the brain

- SII** Successful surgical treatment, no residual effect, no cognitive deficit, no other vascular or neurological diseases, 12 months' stability.
  - IC** Present, unoperated.
  - NI** Within 12 months, or untreated, or with other cardiovascular or neurological disorders, or cognitive impairment.
- 

**Subclavian steal syndrome,** stenosis or obstruction of the blood vessel under the collarbone

- P+** If caused by bony compression and relieved, no functional impairment, 6 months' stability.
  - P** If caused by bony compression, relieved with minimal current symptoms; no functional impairment; 6 months' stability;
  - S** If due to bony compression, not resolved; mild symptoms, no functional impairment.
  - NI** Due to cardiovascular or neurological disorder(s), or with any functional impairment regardless of cause; surgery recommended or pending.
- 

**Subdural hematoma,** blood clot under the membranes of the brain

- P** 48 months' stability; result of identified single episode of trauma; no suspected alcohol abuse, successful surgical treatment, no residual effect, no cognitive deficit, no other vascular or neurological diseases.
  - S** 12 months' stability; result of identified single episode of trauma; no suspected alcohol abuse; successful surgical treatment, no residual effect, no cognitive deficit, no other vascular or neurological diseases.
  - SII** 12 months' stability; other cause; successful surgical treatment, no residual effect, no cognitive impairment; no other vascular or neurological diseases.
  - IC** 36 months' stability; present, unoperated, stable; cause other than trauma; minimal residual symptoms; fully functional; no other cardiovascular or neurological disorders, no cognitive impairment.
- 

**Surgery planned,** a surgical procedure that is to be done in the future; will be underwritten for condition for which procedure will be done.

- P+** 6 months' stability from time of full recovery and being released from surgeon's care.
  - NI** Major surgery recommended or being contemplated within 2 years, not elsewhere specified.
- 

**Syncope,** fainting, temporary loss of consciousness

- P+** 18 months' stability after a single incident of syncope, work up demonstrates no significant clinical cause, condition stable.
  - P** 48 months' stability; result of identified single episode of trauma; no suspected alcohol abuse, successful surgical treatment, no residual effect, no cognitive deficit, no other vascular or neurological diseases.
  - S** 12 months' stability after an incident of syncope, workup demonstrates no significant clinical cause.
  - S** 6 months' stability, after an incident of vasovagal syncope, work up demonstrates no significant clinical cause, condition stable.
  - SII** Syncope due to cardiac arrhythmia, successfully treated with pacemaker, stable 6 months; or syncope due to non-cardiac clinical condition, successfully treated, and resolved; 6 months' stability.
  - IC** More than one episode of syncope and all others.
- 

**Temporal arteritis, giant cell arteritis,** inflammation of arteries of brain and head

- P** Resolved, no symptoms, off steroid treatment, no visual effects, 12 months' stability.
  - S** Resolved, no symptoms, off steroids, no visual effects, 6 months' stability.
  - SI** Improved symptoms, no visual effects, steroids tapered to low dose < 5 mg. daily, 12 months' stability.
  - IC** Other
  - NI** Currently on > 5 mg prednisone per day; any visual symptoms; more than mild musculoskeletal symptoms.
- 

**Thromboangiitis obliterans, Buerger's disease,** inflammation of blood vessels with clotting

**NI**

---

**Thrombocythemia,** blood clotting disorder

**NI**

---

**Thrombocytopenia, idiopathic thrombocytopenia purpura, ITP,** blood clotting disorder

- P+** Fully recovered without current therapy, without splenectomy, 24 months' stability.
  - P** Treated with splenectomy, fully recovered, no current therapy, 24 months' stability.
  - S** Chronic, asymptomatic ITP with or without a history of splenectomy, average platelet count over previous 24 months at > 90,000, currently receiving no treatment; no platelet counts ever less than 50,000.
  - IC** Intermittent or chronic use of low dose steroid therapy; no platelet counts below 50,000.
  - NI** Need for chronic, continuous steroids, or with history of CVA, TIA, or with neurological deficits, hospitalization or complications due to ITP.
-

**TIA, trans-ischemic attack, 'mini-stroke'** -- see below, "trans-ischemic attack."

---

**Tourette's syndrome, Gilles de la Tourette syndrome**, an inherited neurological disorder characterized by unusual, unintentional behaviors

**P** Controlled, fully functional, no added psychiatric diagnosis, stable 24 months.

**S,SI,SII** Controlled symptoms, additional neurological conditions.

**IC** Controlled, fully functional, with any additional diagnoses.

**NI** Poorly-controlled, untreated; or with functional or cognitive impairment.

---

**Transient ischemic attack, TIA, 'mini stroke'**, temporary blockage of blood flow in brain

**P** Symptoms atypical for TIA, such as isolated dizziness or visual blurring. Diagnosis questionable. Workup negative for embolus or atherosclerotic disease.

**P** Migraine or vasospasm related to birth control pills or other causative agent strongly suspected. Workup negative for embolus or atherosclerotic disease.

**S** Single episode of TIA, mild symptoms, without stroke, nonsmoker, no carotid stenosis, no co-morbid conditions as listed below in NI.

**NI** Multiple TIAs, carotid stenosis  $\geq$  50%, any that are due to vertebral-basilar artery disease, or that result from vascular surgery; any TIA with history of stroke, smoker, diabetes, atrial fibrillation, disease of heart valve(s), coronary artery disease, heart attack, angina, thrombosis, embolism, peripheral vascular disease, claudication, or poorly controlled blood pressure.

---

**Transplants, organ transplants**, grafting of an organ from one person to another

**NI** Organ transplants, except cornea (see criteria this guide for corneal transplants).

---

**Tremor, familial, benign essential tremor, benign tic disorder, "habit spasms,"** uncontrolled shaking of any part of the body, most often hands or head

**P+** Any of above conditions, fully investigated with no underlying disorder found, no impairment of function; 36 months' stability.

**P+** Cause of tremor fully investigated with no underlying disorder diagnosed; mild impairment, fully independent; 36 months' stability.

**S** Cause of tremor fully investigated with no underlying disorder diagnosed; mild impairment of function, fully independent; 12 months' stability.

**IC**, usually **NI**...Other tremor disorders.

---

**Ulcer, gastric, peptic or duodenal**, lesions in lining of stomach or intestines; if with anemia, the anemia will also be underwritten.

**P+** Resolved without residual affects, on medications; no bleeding episodes.

**P** Recurrent or chronic, treated with medications; no bleeding episodes.

**S** Acute episode associated with bleeding, or anemia, 24 months' stability.

**SI, SII** Chronic, associated with bleeding, or with anemia, 12 months stability; treated with medication.

**NI** Severe, chronic symptoms untreated, or surgery anticipated.

---

**Urinary incontinence, leakage of urine**

**P+** Urinary stress or urge type, minimal leakage, easily managed, symptoms not progressive, no medications required.

**P** Urinary stress or urge type, with leakage, requires medications or devices to manage, non-progressive, completely independent in care.

**S** Urinary stress of urge type, history of corrective surgery, 6 months' stability.

**SI, SII** Urinary incontinence any type, requires medications and/or devices to manage; history of hospitalization due to bladder dysfunction if fully resolved; independent in managing care; 12 months' stability.

**IC** With neurogenic bladder.

**NI** Catheter use, indwelling or intermittent; poorly managed incontinence; impacts functional abilities; progressive symptoms; fecal (bowel) incontinence.

---

**Varicose veins**, enlarged blood vessels, usually of the legs

**P+** Uncomplicated, without medications or treatment, no skin ulcers, no significant edema, no functional limitations.

**P** Chronic venous insufficiency, successfully treated with surgery, 18 months' stability, no known peripheral vascular disease, minimal edema, no functional limitations, no ulcerations or skin breakdown after surgery.

**S** Chronic venous insufficiency, 18 months' stability, no surgical treatment, no functional limitations; no more than 2+ edema, no known peripheral arterial vascular disease.

**SI** Chronic venous insufficiency, no surgical treatment, no functional limitations, 36 months' stability; 3+ edema; no known peripheral arterial vascular disease.

**NI** Skin ulcers present; or severe 4+ edema; or with cellulitis, or symptomatic peripheral arterial vascular disease or claudication.

---

**Vertigo, dizziness** sensation of spinning, lightheadedness, weakness, unsteadiness, loss of balance

**P+** 24 months' stability; episodic, fully investigated, serious condition ruled out, benign cause, no functional limitations, no related falls.

**P** 3 months' stability; occasional insignificant dizziness only; no functional limitations; no related falls; serious condition ruled out.

**P** Labyrinthitis or vestibulitis diagnosis firmly established; imaging scan negative for central nervous system disease; non-progressive; no functional limitations; no related falls; 24 months' stability.

**S** labyrinthitis, vestibulitis diagnosis firmly established; imaging scan negative for central nervous system disease; non-progressive; no functional limitations; no related falls; 6 months' stability.

**SI** Meniere's disease, except no imaging studies done.

**SII** 12 months' stability; associated single fall without injury; without coexisting neurological or vascular symptoms.

**NI** Current dizziness or vertigo; cause of symptoms unknown; evaluation in progress.

---

**Von Willebrand's disease**, blood clotting disorder

**P+** 60 months' stability; no serious bleeding episodes.

**P** 12 months' stability; no serious bleeding episodes.

**IC** All others.

---

**Waldenstrom's disease**, bone marrow and blood disease

**NI**

---

**Walker use**, use of a device to assist in walking

**NI**

---

**Wegener's granulomatosis**, inflammation of blood vessels

**P+** 60 months' stability; clinically cured; no limitations; no significant residual lung or kidney disease.

**P** 36 months' stability; clinically cured; no limitations; no significant residual lung or kidney disease.

**IC** All others.

**NI** Currently under treatment with prednisone or Cytoxan.

---

**Wheelchair use**

**NI**

---

**Wilson's disease**, disorder of mineral metabolism

**SI, SII** Stable 12 months with treatment, and normal lab results

**NI** Untreated, or with any liver or neurologic complications

---

Policies are issued by Allianz Life Insurance Company  
of North America, Minneapolis, MN.



Policies are issued by Allianz Life Insurance Company  
of North America, Minneapolis, MN.

Allianz Life Insurance Company  
of North America

PO Box 1292  
Minneapolis, MN 55440-1292

800.950.7372  
[www.allianzlife.com](http://www.allianzlife.com)

For agent use only  
Product availability and features may vary by state.