

Producer's Guide to Medical Underwriting

Version 2.0



HealthAmericaOne



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PRODUCER'S GUIDE TO MEDICAL UNDERWRITING

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To the extent that any provision in this guide is inconsistent with any current HealthAmericaOne medical underwriting practices, the current HealthAmericaOne medical underwriting practices will prevail. Only HealthAmericaOne Medical Underwriting may make a final decision to accept or decline an applicant and determine the rate level or effective date. Agents have no authority to bind or guarantee coverage.

HealthAmericaOne is a non-employer, group PPO product underwritten by HealthAmerica Pennsylvania, Inc. It is offered to participants in the HealthAmerica Ohio Insurance Trust, for which HealthAmerica Pennsylvania, Inc. is the designated trustee. HealthAmerica Pennsylvania, Inc. is a wholly-owned subsidiary of Coventry Health Care.

The following are only guidelines, comprising a statement of Coventry's general approach to the underwriting of individual health business. This information is not considered to be a binding contract, but, rather, is provided for informational purposes only.

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INTRODUCTION

Welcome! We are pleased you have selected to offer HealthAmericaOne as one of your health care coverage options.

This Producer's Guide to Medical Underwriting contains helpful answers and probable underwriting outcomes with regard to prior or existing health conditions in order to aid you in placing business with HealthAmericaOne. **It is intended only as a guide.** Additional information may be available to medical underwriting that may result in a decision that is different than that presented in this guide. Therefore, **this Agent's Guide to Medical Underwriting should not be construed as a guarantee of underwriting action on any specific case.** The medical underwriters' experience and discretion is the ultimate determining factor of underwriting action toward issuance of an offer for coverage.

TIPS FOR AGENTS

When submitting an application with medical conditions, it is very important for the applicant to offer as much detail as possible. The more complete health information provided on an application, the more efficiently it can be underwritten. When completing the application always be sure to: document *what* the condition is, *who* the treating physician/health care professional is, *when* the condition was treated and *how* the condition is / was treated.

The writing agent should advise the applicant that their health history can result in a variety of underwriting outcomes up to and including a declination of coverage. Coventry has the right to void, cancel, reform, or rescind coverage after issue if there has been non-disclosure of material health history. Therefore, it is imperative that the applicant fully disclose all medical history at the time of application.

General rule: More is better!

“The more complete health information provided on an application, the more efficiently it can be underwritten.”

HEALTHAMERICAONE APPLICATIONS

The following information is intended to highlight details of the application process most relevant to medical underwriting procedures, and should not be interpreted as a comprehensive explanation of the application process.

- The preferred method for application submission is electronic, through the Agent Portal. Electronic submission procedures are discussed more in-depth in other Coventry publications.

- The applicant (or custodial parent/guardian if under age 18) and all dependents 18 years and older, must attest by signature that all statements and disclosures provided on the application are true and factual. Coventry does not accept applications that are not signed by the applicant(s) and agent, or those which are submitted by an unlicensed or non-appointed, non-contracted agent.
- Applications are valid for **60 days** from the date of the applicant(s) signature. All applicable sections must be completed, signed and dated. After 60 days from the application signature date, the application will be closed as incomplete. A new application will be required after this 60 day period has expired. **Coventry does not accept re-submission of the original application with updates to the signature dates.**
- Use of black or blue ink is required when completing a non-electronic application. **Pencil is not acceptable.**
- Changes / corrections made to a paper application must be dated and initialed by the applicant. Any use of correction fluid or correction tape will render the application unacceptable.
- **The underwriting department will not accept incomplete applications. The agent will be informed that an incomplete application was received and that it must be properly completed and re-submitted before it can be processed.**
- Information on the application is considered to have been disclosed / provided by the applicant. The medical underwriters accept that the given answers are full, complete and have not been edited by the agent.
- In the case of electronic applications, applications initiated by the agent must be sent to the client by email for electronic completion. E-signing on behalf of an applicant is illegal; if a client does not have access to email, a paper application should be used.
- **Lifestyle and Health Histories:** ALL medical questions MUST be answered for each applicant. Please provide detailed explanatory information for each "Yes" answer indicating to whom the response refers, treating physician, detailed diagnosis, onset and recovery date and treatment, including medications. Full provider information, including full name, address, and phone number is necessary. In most cases, answers to health-related questions are not to be obtained from a third party (except in the case of applicants under the age of 18), where a custodial parent or guardian is expected to provide the information on their behalf.

E-signing on behalf of an applicant is illegal; if a client does not have access to email, a paper application should be used.

- **Conditions of Enrollment**

- The applicant must read this section. If the applicant agrees, he or she must sign and date.
- **The requested effective date may not precede the signature date of the application.**
- **The applicant must understand that if his/her health condition changes prior to the effective date of coverage offered by Coventry, the applicant has a responsibility to notify Coventry of such change(s) and realize that such notification may result in a re-rate of premium or a declination of coverage. Failure to do so could result in rescission or reformation of coverage back to the original effective date.**

THE UNDERWRITING PROCESS

During the underwriting process, each applicant's medical history is evaluated individually and action is taken based on the severity and prognosis of the disclosed condition(s).

Complete and accurate information is required. When reporting on a condition, applicants should consider the detailed questions that are part of the Health Condition Considerations portion of this guide that begins on page 10. Further, medical disclosures should include:

- Specific diagnoses
- Onset and recovery date(s)
- Medications taken or prescribed and their start/end date(s)
- Details and results of all testing or treatment
- Any recommended (pending) testing, procedures, or follow-up visits.

Final rates may be based on information, including, but not limited to, that which is submitted or obtained via:

- The application
- Telephone interviews
- Medical records
- Medical questionnaires
- Prescription database searches, and / or
- Other requests for medical information not limited to the above.

Co-Morbidity

Multiple conditions or impairments can occur together which indicate a more significant morbidity risk. Co-morbidity is a factor in final underwriting decisions. Some common co-morbid combinations are:

- Respiratory conditions and tobacco usage
- Height/Weight and Hypertension
- Height/Weight and back/knee/foot problems
- Hypertension and high cholesterol
- Hypertension and kidney (renal) disorders

Further, health history that includes three (3) or more of the following risk factors will likely be declined:

- Overweight Build
- Hyperlipidemia
- Hypertension
- Tobacco use
- Other cardiac condition

Additional Information: Medical Underwriting Telephone Interviews

When underwriting identifies the need for additional information or clarification of information disclosed on the application, the applicant may be contacted directly. Please note that telephone interviews may be recorded and retained for our records.

The process is as follows:

- Calls are made directly to the applicant.
- If the applicant cannot be reached, a voice message is left for the applicant (if a recording device is available) with the following information:
 - Name of applicant;
 - Name of Coventry employee or representative the applicant is to contact; and
 - Instructions describing how and when the applicant is to return the call.

No mention of the requested medical information and/or condition in question is disclosed in the voice message. Medical Underwriting will not proceed with the application process until the telephone interview is completed.

If no response is received after 60 days from the application signature date, the application will be closed as incomplete.

Coventry Health Care will bear the burden of any costs associated with medical record gathering up to a maximum of \$75 per record request.

Medical Records Request

HealthAmericaOne has a contracted relationship with a medical records retrieval service in order to collect necessary medical record information for selected applicants. This partnership enables HealthAmericaOne to gather medical records in a consistent and timely manner. The vendor will act on behalf of HealthAmericaOne by obtaining medical records from the appropriate provider(s).

Medical records are required by HealthAmericaOne for the following situations:

1. Any applicant age 55 and older (must have seen physician for complete physical exam within the past two (2) years).
2. Any applicant age 50 or older who is not replacing other coverage (must have seen physician for complete physical exam within the past two (2) years).
3. Individual medical conditions, as deemed necessary, based upon sound underwriting judgment and established underwriting practices.
4. Any time medical history is unclear or inadequate to make a precise determination of the risk.
5. Discovery of claims history as a previously covered member under a Coventry Health Plan.
6. Children age 0 to 2 years.

Medical records requests will be limited to five (5) years of medical history unless otherwise specified. Coventry Health Care will bear the burden of any costs associated with medical record gathering up to a maximum of \$75 per record request. If a provider charges an amount higher than our pre-determined maximum, the difference in cost will be the burden of the applicant. Coventry reserves the right to require individuals to be responsible for medical records retrieval costs that fall outside of accepted business practices. Coventry will not request medical records from providers or facilities residing out of the United States. Coventry reserves the right to refuse records submitted directly from an applicant or agent.

Physical Examinations of Applicant(s)

Under certain circumstances, the medical underwriter may require a complete physical examination of the applicant(s). The physical examination must be performed by a physician or certified physician's assistant. A complete physical examination is considered to be a complete review of systems, which includes a blood profile and urinalysis. Other requirements may be included as deemed appropriate and necessary by an applicant's personal physician.

Costs associated with obtaining physical examinations and submitting results is at the expense of the applicant(s), unless otherwise specified by law. Coventry will not reimburse any

physical examination or reporting expenses regardless of whether an offer of coverage is rendered or accepted. If the requested physical examination results are not received by medical underwriting within 60 days from the application signature date, the application will be closed as incomplete.

Tobacco Use

'Tobacco use' is defined as the use of tobacco or tobacco cessation products within twelve (12) months prior to the application signature date. Each eligible person must attest on the application that he/she has or has not used tobacco or tobacco cessation products *in any form* during the past consecutive twelve (12) month period. A tobacco load will be added for those persons not able to attest to non-tobacco use.

Residency Requirements

To be eligible for HealthAmericaOne coverage, a person must be a legal resident of the United States or reside in the United States with a long term legal Visa and have established medical care within the United States.

General Rules

As a general rule, More is Better. The more complete health information provided on an application, the more efficiently it can be underwritten. Incomplete or partially answered medical questions can, and often do, result in delays while the underwriter performs a telephone interview or obtains medical records.

We highly recommend that you refer to this guide while screening your applicants. Please pay special attention to the AUTO DECLINE listings for medical conditions and medications. If a condition or medication is NOT on this list, then refer to the following tables to determine what the probable action may be and any underwriting considerations that may be required before a final decision can be made.

The following probable underwriting actions are to be used as a general guide for quoting purposes and should not be considered as a guarantee of coverage or final rates. Final rates will be determined based on all pertinent details obtained during the underwriting process and are at the discretion of the underwriter. ***These guidelines outline the probable rating action for the listed condition only and do not include separate loads for prescriptions used within 12 months of the application signature date.***

BUILD CHARTS

Adult MALE Build Chart				
Height	Under Weight	Standard	Over Weight	Exceeds Weight
Ft' In"	Rate-up	No Rate-up	Rate-up	Decline
5' 0"	≤ 105	106 - 165	166 - 210	211
5' 1"	≤ 105	106 - 165	166 - 210	211
5' 2"	≤ 105	106 - 180	181 - 225	226
5' 3"	≤ 105	106 - 180	181 - 225	226
5' 4"	≤ 120	121 - 180	181 - 225	226
5' 5"	≤ 120	121 - 195	196 - 240	241
5' 6"	≤ 120	121 - 195	196 - 240	241
5' 7"	≤ 120	121 - 195	196 - 240	241
5' 8"	≤ 135	136 - 210	211 - 255	256
5' 9"	≤ 135	136 - 210	211 - 255	256
5' 10"	≤ 135	136 - 225	226 - 270	271
5' 11"	≤ 135	136 - 225	226 - 270	271
6' 0"	≤ 150	151 - 225	226 - 285	286
6' 1"	≤ 150	151 - 240	241 - 285	286
6' 2"	≤ 150	151 - 240	241 - 300	301
6' 3"	≤ 150	151 - 255	256 - 300	301
6' 4"	≤ 150	151 - 255	256 - 315	316
6' 5"	≤ 165	166 - 270	271 - 315	316
6' 6"	≤ 165	166 - 270	271 - 330	331
6' 7"	≤ 180	181 - 285	286 - 330	331
6' 8"	≤ 180	181 - 285	286 - 345	346

Adult FEMALE Build Chart				
Height	Under Weight	Standard	Over Weight	Exceeds Weight
Ft' In"	Rate-up	No Rate-up	Rate-up	Decline
4' 8"	≤ 90	91 - 149	150 - 180	181
4' 9"	≤ 90	91 - 149	150 - 195	196
4' 10"	≤ 90	91 - 164	165 - 195	196
4' 11"	≤ 90	91 - 164	165 - 195	196
5' 0"	≤ 90	91 - 164	165 - 210	211
5' 1"	≤ 90	91 - 164	165 - 210	211
5' 2"	≤ 105	106 - 179	180 - 210	211
5' 3"	≤ 105	106 - 179	180 - 225	226
5' 4"	≤ 105	106 - 179	180 - 225	226
5' 5"	≤ 105	106 - 179	180 - 225	226
5' 6"	≤ 105	106 - 194	195 - 240	241
5' 7"	≤ 105	106 - 194	195 - 240	241
5' 8"	≤ 120	121 - 194	195 - 240	241
5' 9"	≤ 120	121 - 209	210 - 255	256
5' 10"	≤ 120	121 - 209	210 - 255	256
5' 11"	≤ 120	121 - 224	225 - 270	271
6' 0"	≤ 135	136 - 224	225 - 270	271
6' 1"	≤ 135	136 - 239	240 - 285	286
6' 2"	≤ 135	136 - 239	240 - 300	301

JUVENILE Build Chart									
Height Up To	Age 0 - 2		Age 3 - 9		Age 10 - 13		Age 14 - 17		Height Up To
	No Rate-up	Possible Decline	No Rate-up	Possible Decline	No Rate-up	Possible Decline	No Rate-up	Possible Decline	
2' 0"	13 - 15	20							2' 0"
2' 2"	15 - 18	23							2' 2"
2' 4"	17 - 21	27	17 - 20	29					2' 4"
2' 6"	20 - 24	31							2' 6"
2' 8"	23 - 27	35	21 - 27	38					2' 8"
2' 10"	25 - 30	39							2' 10"
3' 0"	29 - 34	44	26 - 34	48					3' 0"
3' 2"	32 - 38	49							3' 2"
3' 4"	35 - 42	55	32 - 42	59					3' 4"
3' 8"			38 - 51	72					3' 8"
4' 0"			46 - 60	85	49 - 74	88			4' 0"
4' 2"			49 - 66	92	53 - 80	96			4' 2"
4' 4"			53 - 71	100	58 - 87	104			4' 4"
4' 6"			58 - 77	108	62 - 93	112	69 - 115	125	4' 6"
4' 8"			63 - 83	116	67 - 100	120	75 - 124	135	4' 8"
4' 10"			67 - 89	124	72 - 108	129	81 - 135	146	4' 10"
5' 0"			72 - 95	133	77 - 115	138	87 - 145	158	5' 0"
5' 2"					82 - 123	148	94 - 156	170	5' 2"
5' 4"					87 - 131	157	100 - 167	182	5' 4"
5' 6"					93 - 139	167	108 - 179	195	5' 6"
5' 8"					99 - 148	178	115 - 191	208	5' 8"
5' 10"					105 - 157	188	122 - 204	221	5' 10"
6' 0"					111 - 166	199	130 - 217	235	6' 0"
6' 2"							138 - 230	250	6' 2"
6' 4"							146 - 244	265	6' 4"

HEALTH CONDITION CONSIDERATIONS

The following probable underwriting actions are to be used as a general guide for quoting purposes and should not be considered as a guarantee of coverage or final rates. Final rates will be determined based on all pertinent details obtained through the signed application, telephone interview, medical records, physical exams or prescription use history and the discretion of the Underwriter. **These guidelines outline the probable rating action for the condition only and do not include separate loads for prescriptions used within twelve (12) months of the application signature date.**

STANDARD= NO RATE UP		UD= UNDERWRITER DISCRETION	DECLINE= COVERAGE DECLINED	TI= TELEPHONE INTERVIEW	
Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
A					
Abnormal Pap Smear/Cervical Dysplasia	May be an indication of dysplasia, precancerous cells on the cervix.	Date(s) of test(s) and results +ASCUS (Atypical Squamous Cell(s) of Undetermined Significance) - mild cellular changes of an unknown cause +LGSIL (Low Grade Squamous Intraepithelial Lesion) - mild cervical dysplasia commonly caused by HPV (Human Papilloma Virus) +HGSIL (High Grade Squamous Intraepithelial Lesion) - moderate to severe cervical dysplasia	None/TI	Last pap normal - ASCUS ONLY	Standard
			None/TI	LGSIL, normal pap for more than 2 years	Standard
			TI/Medical records	HGSIL, normal pap for the past 2 years	UD
			N/A	Last occurrence abnormal	Decline
Acne	A skin disorder. Cystic form may require steroids or facial planing.	Date(s) and type(s) of treatment, name of medication(s)	N/A	All other cases, use of prescription cream, gels or oral medications(not Accutane)	UD
			None/TI	Severe or Current use of Accutane	Decline
Alcoholism (including AA)	The recurrent use of alcohol in a way that causes significant adverse consequences, both medically and personally. Alcoholism is the common term for two disorders - alcohol abuse and alcohol dependence	Date(s), treatment(s), arrest(s) & DUIs	TI/Medical records	No evidence of medical problems due to alcohol, normal liver function, total abstinence \geq 5 years	Standard
			N/A	Evidence of medical problems due to alcohol or current use of alcohol or < 5 years from total abstinence	Decline
Alcohol use		Frequency of alcohol consumptions, number of drinks per occasion	N/A	Over age 21, irregular use or 3 or less drinks per use	Standard
			TI/Medical records/current labs	Over age 21, used greater than weekly and > 3 drinks per use	UD
			TI/Medical records/current labs	Ever advised to seek treatment for alcohol use or been advised that use interferes with work or family life or combination of drug and alcohol use	Decline
			N/A	Under age 21, any level of admitted use	Decline
Allergies / Allergic Rhinitis	Seasonal respiratory allergy most often called Hay Fever	Season(s), severity, medication(s) used, time parameters, respiratory complications (asthma / bronchitis), if receiving shots, ask frequency	None/TI	Seasonal and use only of over-the-counter medications or if deductible is \$5,000 or higher	Standard
			None/TI	Seasonal and use or have used prescription medications	UD
			None/TI	Immunotherapy shots	UD
			None/TI	Severe or with Asthmatic component or use of inhaler	UD

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
Anal Fissure / Fistula	An ulcer or tear in the anal canal.	Date(s) and type(s) of treatment, hospitalizations, medication(s)	N/A	Treated and recovered > 6 months	Standard
			TI	Treated and recovered < 6 months	UD
			N/A	Present or associated with Ulcerative Colitis or Crohn's Disease	Decline
Anemia	When blood is deficient in red blood cells, in hemoglobin, or in total volume.	Date(s) and type(s) of treatment, medication(s), GI symptoms or findings	TI	Iron deficiency - mild	Standard
			TI/Medical records	All others	UD
			N/A	Aplastic, hemolytic, sickle cell or pernicious	Decline
Anorexia	An eating disorder that can cause severe physical impairment	Date(s) and type(s) of treatment, medication(s), current height/weight and any related physical or emotional impairments	TI/Medical records	> 5 years since last treatment / episode, no complications / adverse effects, normal height and weight	Standard
				≤ 5 years since last treatment / episode	Decline
Anxiety	A painful or apprehensive uneasiness of mind usually over an impending or anticipated ill	Specific diagnosis, Date(s), treatment(s), medication(s), hospitalizations, counseling, any time lost from work	TI/Medical records	Single event, recovered	Standard
			TI/MedUDal records	Use of medication and/or counseling/therapy	UD
Appendicitis	Inflammation of the Appendix	Date(s), treatment(s), surgery	None	Operated, recovered, > 3 months.	Standard
			N/A	Unoperated or Operated, recovered, < 3 months	Decline
Arrhythmia, Cardiac	Abnormal heart rhythm	Date(s) and type	Medical records	Previous episode, > 1 year	UD
			N/A	Present	Decline
Arthritis	Inflammation and "wear and tear" of the joints	Type (Osteoarthritis or Rheumatoid), joints involved, any deformities, date diagnosed, type(s) of treatments, medication(s), any limitations or work related disabilities.	TI/Medical records	Osteoarthritis	UD
			N/A	Rheumatoid	Decline
Asthma	An inflammatory disease of the airways	Date diagnosed, treatment(s), medications & frequency of use, hospitalizations or ER visits (when), frequency of attacks.	None/TI	Mild, minimal use of medication, \$2,500 deductible or higher	Standard
			TI/Medical records	Moderate, > 2 years since last ER visit	UD
			TI/Medical records	Moderate, ≤ 2 years since last ER visit	UD
			N/A	Severe or ER visit within the past 12 months or more than 2 ER visits/hospitalizations within last 2 years	Decline
Atrial Fibrillation	Very rapid uncoordinated contractions of the atria of the heart resulting in a lack of synchronism between heartbeat and pulse beat	Date(s) and type(s) of treatment, hospitalizations, medication(s), ablation or other.	TI/Medical records	Single episode, no evidence of heart disease, > 2 years ago	UD
			N/A	Multiple episodes or Paroxysmal	Decline
Atrial Septal Defect	Unnatural opening in inner wall of upper chambers of heart	Date diagnosed, treatment(s), medication(s), surgery	None/TI	Closed (surgery not needed or surgically closed)	Standard
			TI/Medical records	Surgery > 1 year ago	Standard
			N/A	Not Surgically corrected or surgically corrected ≤ 1 year ago	Decline
Attention Deficit/Hyperactivity Disorder (ADD or ADHD)	A developmental disorder characterized by distractibility, impulsive behaviors, and hyperactivity with an inability to remain focused.	Date(s), treatment(s), medication(s), counseling	None/TI	Present or diagnosed within 2 years, stable, with or without medication	UD
			N/A	Unstable, or in combination with other psychiatric disorder	Decline
Autism(Asperger's)	A pervasive developmental disorder characterized by severe deficits in social interaction and communication	Date diagnosed, treatment(s), medications, counseling, therapies	Medical records	High functioning, attending school/employed, no other psych or physical issues.	UD
			N/A	All others, current psychological or physical issues	Decline

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
B					
Backaches, Back Strain, Back Sprain		Date(s), medication(s), chiropractic or physical therapy (number visits & weeks), surgery discussed or recommended?	None	< 3 episodes in last 2 years, no medications within last 6 months	Standard
			TI	No treatment within 6 months, no disc involvement, no medications or < 12 spinal manipulations in last 12 months	UD
			TI/Medical records	≥ 3 episodes in last 2 years, current medications, disc involvement or ≥ 12 spinal manipulations within last 12 months	Decline
Basal Cell Carcinoma	A form of skin cancer	Date(s), treatment(s), excision(s)	None/TI	Low risk lesion removed	Standard
			TI/Medical records	High risk lesion removed or with 2 occurrences	UD
			N/A	Present, Metastasis or > 3 occurrences	Decline
Bell's Palsy	Paralysis of the facial nerve producing distortion on one side of the face	Date diagnosed, treatment(s), medication(s), cause	None	Single episode, complete recovery, no residuals	Standard
			TI	Multiple episodes	UD
			N/A	Present / surgery anticipated	Decline
Bladder Infection/Cystitis	Infection and inflammation of the urinary bladder	Date(s), treatment(s), medication(s), hospitalization(s)	None	Single episode, fully recovered, no residuals	Standard
			TI	Multiple episodes	UD
			N/A	Chronic/Interstitial	Decline
Bladder Stones	Calcium or uric acid deposit in the urinary bladder	Date diagnosed, treatment(s), medication(s), surgery	TI	History of attacks, no current stones	UD
			N/A	Stones present	Decline
Blindness	Loss of sight	Date diagnosed, treatment(s), medication(s)	TI	Traumatic or idiopathic, either or both eyes, well adjusted, self-sufficient, no active or progressive disease process, no surgery anticipated	UD
Bradycardia	Slowness of the heart rate	Date diagnosed, treatment(s), medication(s), hospitalization(s), heart rate in BPMs, any central nervous system symptoms?	TI/Medical records	Resolved, no evidence of cardiac disease, normal EKG	UD
			N/A	Current, or due to complete heart block	Decline
Breast Implants	Silicone or saline surgically inserted to augment the breasts	Date(s), Type(s), treatment(s), medication(s), surgery(s)	None	Saline, no complications, > 1 year OR silicone implants, removed, > 1 year, no complications	UD
			N/A	Silicone implants, present	Decline
			N/A	Silicone implants, removed, ≤ 1 year	Decline
Bronchitis	Acute or chronic inflammation of the bronchial tubes	Date(s), treatment(s), medication(s), hospitalization(s), any other respiratory condition(s)	None	Acute, duration < 2 weeks, non-tobacco user	Standard
			N/A	Presence of emphysema or COPD	Decline
Bulimia	An eating disorder that can cause severe physical impairment	Date(s) and type(s) of treatment, medication(s), current height/weight and any related physical or emotional impairments	TI/Medical records	≥ 5 years since last treatment/episode, no complications/adverse effects, normal height and weight	Standard
				< 5 years since last treatment/episode	Decline

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
Bundle Branch Block	Heart block due to a lesion in one of the bundle branches	Age at onset, right/left?, complete/incomplete?, EKG, pulmonary disease?	Medical records	Right, incomplete, pacemaker inserted, > 1 year	UD
			Medical records	Right, complete, diagnosis under age 40, pacemaker inserted, > 1 year	UD
			N/A	Right, complete, diagnosis age 40 or older	Decline
			N/A	Left, complete or incomplete	Decline
Bunions	An inflamed swelling of the small sac on the first joint of the big toe	Date(s), treatment(s), currently present	None/TI	Surgery completed > 6 months, no symptoms	Standard
			TI	Unoperated, > 1 year	UD
			N/A	Surgery completed ≤ 6 months	Decline
			N/A	Unoperated, ≤ 1 year	Decline
Burns	An injury to tissues caused by heat, friction, electricity, radiation, or chemicals	Date(s), Type(s), treatment(s), medication(s), surgery(s)	TI/Medical records	1st degree, depending on recency, extent and recovery	UD
			N/A	2nd degree or greater, or surgery pending	Decline
Bursitis	Inflammation of a bursa especially of the shoulder or elbow	Date(s), medication(s), location	None/TI	Acute, recovered, >1 year	Standard
				Recurrent/chronic	UD
C					
Caesarean section	Surgical intervention required to complete the birthing process	Date(s), number of c-sections, reason for c-section	None/TI	Handle for cause	
Cancers		Date(s), type(s), treatment(s) (surgery, radiation, chemotherapy, etc.), specific location of tumor, pathology results and any recurrences or metastasis, medication(s)	Medical records, pathology reports	Cervical > 1 year surgically resolved	Standard
				Internal, > 5 years	UD
				Breast, > 5 years	UD
				Cervix, Ovaries, or Uterus, > 5 years	UD
				Bone	Decline
				Brain and nervous system	Decline
				Breast, ≤ 5 years	Decline
				Cervical ≤ 1 year	Decline
				Cervix, Ovaries, or Uterus, ≤ 5 years	Decline
				Colon / Rectum	Decline
				Esophagus	Decline
				Hodgkin's or Non-Hodgkin's Lymphoma	Decline
				Leukemia	Decline
				Prostate / Testicular	Decline
Skin, Melanoma(Clark level 2-5) or over one excision ≤ 5 years	Decline				

STANDARD= NO RATE UP

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
Carpal Tunnel Syndrome	A disorder caused by compression at the wrist of the median nerve causing numbness and tingling.	Date(s), treatment(s), medication(s)	None/TI	Surgically corrected, no residuals or braces, > 1 year	Standard
			None/TI	Surgically corrected, no residuals or braces, ≤ 1 year	UD
			N/A	Unoperated or two or more episodes	Decline
			N/A	Present or surgery anticipated	Decline
Cataracts	Clouding of the lens of the eye or its surrounding transparent membrane that obstructs the passage of light	Date(s), treatment(s), medication(s)	None/TI	Surgically corrected, > 12 months	Standard
				Surgically Corrected 6-12 months	UD
				Present, or surgery ≤ 6 months	Decline
Cellulitis	Diffuse and especially subcutaneous inflammation of connective tissue	Date(s), treatment(s), medication(s), diabetes?, circulation disorders?	TI	Single episode, fully recovered, no residuals, > 1 year	UD
			N/A	Multiple episodes or diabetes present	Decline
Cervical Polyps	Usually not cancerous (benign) and can occur alone or in groups. All polyps should be removed and examined for signs of cancer.	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	Single episode, surgery, pathology report benign, > 1 year ago	Standard
				Single episode, surgery, pathology report benign, no recurrence > 5 years ago	Standard
				Present, > 5 years	Decline
Cervicitis or Cervical Erosion	An inflammation and irritation of the cervix caused by STD's or infection	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	Single episode, no residuals, > 1 year ago	Standard
				No treatment or recurrence, > 2 years ago	Standard
				Present	UD
Cholesterol (Elevated)	Levels of cholesterol in the blood that are higher than normal	Date(s), treatment(s), medication(s) and three (3) recent readings	None/TI	Diet and exercise controlled, no weight factors or hypertension, non tobacco user	Standard
			TI/Medical records	Medication controlled	UD
			N/A	With any other cardiac concerns or with 2 combinations of tobacco use, hypertension / high blood pressure or rateable height / weight	Decline
Chondromalacia / Chondromalacia Patella	Cartilage inside a joint softens and breaks down, most commonly in the knees	Date diagnosed, treatment(s), medication(s), hospitalization(s), surgery(s)	None/TI	Operated, > 1 year	UD
				Unoperated, asymptomatic	UD
				Operated, ≤ 1 year	UD
				Unoperated, symptomatic	Decline
Cleft Lip / Nose / Palate	A congenital fissure in the roof of the mouth that occurs when the tissues of the lip and/or palate of the fetus do not fuse.	Date(s), treatment(s), surgeries	None/TI	Fully corrected, > 2 years, no further treatment or surgery anticipated	Standard
			None/TI	Unoperated, > age 19	Decline
			N/A	Unoperated, ≤ age 19	Decline
Clubfoot	Congenital deformity of a foot	Date(s), treatment(s), surgeries	None/TI	Fully corrected	Standard
				Untreated (no pending surgery)	UD
				Untreated (surgery pending / possible)	Decline
Coarctation of the Aorta	Deformity of the aorta causing narrowing	Date(s), treatment(s), surgeries	TI/Medical records	Surgically corrected, no residuals, > 2 years	Standard
				All others	Decline
Concussion	A trauma induced change in the mental status, with confusion and amnesia, and with or without a brief loss of consciousness	Date diagnosed, treatment, medication, hospitalization, residual symptoms	None	> 1 year, no residuals	Standard
			TI	No surgery, no residuals, fully recovered, 4-12 months	UD
			N/A	≤ 3 months, severe or with residuals	Decline

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
Condyloma Accuminata	Genital warts; caused by Human Papilloma virus or Syphilis	Date(s), treatment(s), medication(s)	None/TI	No recurrence or complications, > 2 years	Standard
			N/A	No diagnostic PAP smear available (female only) or indication of any other sexually transmitted disease	Decline
Corneal Ulcer	Corneal ulcers may lead to scarring and loss of sight, and are a common cause of blindness.	Date(s), treatment(s), medication(s), surgery(s)	None/TI	Operated or acute, full recovery	Standard
			N/A	Unoperated	Decline
Cystitis	As known as UTI (Urinary Tract Infection) and Bladder infection	Date(s), treatment(s), medication(s), hospitalization(s), complication(s)	None/TI	Acute, infrequent, < 4 per year and > 1 year since last	Standard
				All others	UD
				Chronic or interstitial	Decline
Cystocele	Hernia of the urinary bladder into the vagina or rectum	Date(s), treatment(s), medication(s), surgery(s)	None/TI	Surgically corrected, fully recovered, no residuals	Standard
			N/A	Present	Decline
Cysts	A sac containing fluid or semisolid material	Date(s), treatment(s), medication(s), surgery(s), pathology determination(s), location(s)	TI/Medical records	1 episode, surgically removed, recovered	Standard
				Unoperated or multiple episodes	UD
D					
Depression	A mental state of depressed mood characterized by feelings of sadness, hopelessness and despair.	Onset, treatment, any counseling/therapy, any ER/hospitalization, date of recovery, any further treatment needed	None/TI	Single event, recovered	Standard
			TI/Medical records	Use of medication and/or counseling/therapy	UD
			N/A	Major / Manic Depression / Bipolar	Decline
Detached Retina	Retinal separation due to trauma or disease	Onset, underlying cause, treatment, date of recovery, any residuals, any further treatment needed	None/TI	Operated, normal vision > 2 years	UD
			N/A	All others	Decline
Deviated Nasal Septum	Deviation of the bridge of the nose	Onset, any symptoms, treatment, date of recovery/last symptoms	None/TI	No surgery anticipated, asymptomatic > 1 year	Standard
			None/TI	Surgery Completed	UD
			N/A	Surgery anticipated or asymptomatic ≤ 1 year	Decline
Diabetes	Common disorder in which the body cannot properly use the carbohydrates (starches and simple sugars), fats and proteins in foods. All of these nutrients can be processed by the liver into one type of simple sugar, glucose, which enters the bloodstream.	Onset, treatment, date and results of last HbA1c results	TI/Medical records	Gestational, no current evidence, no other co-morbidities, normal tolerance test after delivery	UD
			TI/Medical records	Type II, Glucose & HbA1c within normal range for > 1year	UD
			N/A	Gestational, present	Decline
			N/A	Type I, insulin dependent, or uncontrolled Type II (HbA1c > 7%)	Decline
Disk Disorder(s), Slipped, Herniated, or Ruptured	Disorder of the disk(s) of the spinal column causing pain or limited range of motion. Surgery may be indicated depending on severity of symptoms.	Onset, treatment, date of recovery	TI/Medical records	Operated, asymptomatic, no treatment, > 2 years	UD
			TI/Medical records	Unoperated, asymptomatic or symptomatic with conservative treatment, > 2 years	UD
			N/A	All others	Decline
Dislocations (joint)	The displacement of a bone.	Onset, location, number of episodes, date of last episode, treatment, date of recovery	None/TI	Hip (congenital), surgically corrected without residual deformity	Standard
			None/TI	Other joints, traumatic, > 1 year	Standard
			N/A	Hip (congenital), not surgically corrected	Decline
			N/A	Other joints, recurrent / chronic, ≤ 5 years	Decline

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Diverticulitis	Inflamed or infected small pouches that develop and bulge out through weak spots in the walls of the colon.	Onset, number of episodes, date of last episode, treatment, date of recovery	None/TI	Operated, > 3 years without recurrence	Standard
			None/TI	Treated, one attack, > 1 year	Standard
			None/TI	Treated, multiple attacks, > 2 years	UD
			N/A	Unsatisfactory responses to treatment	Decline
			N/A	Present, no surgery, treated or un-treated	Decline
Driving While Intoxicated (DUI, DWI)	Driving while under the influence of alcohol. Maximum acceptable levels of intoxication or impairment vary from state to state.	How many infractions, sentencing (jail vs. probation), any treatment recommended and/or completed and current use of alcohol or substance.	None/TI	Single episode, ≥ 25 years of age and ≥ 2 years since conviction	Standard
			TI/Medical records	Single episode and 1-2 years since conviction	UD
			TI	Multiple episodes, or currently under age 21	Decline
Drug Abuse, Drug Addiction		Type of drug(s), treatment, date of recovery/last use	TI/Medical records	Marijuana, > 1 year, since last use, no other alcohol or drug abuse history. No Felony conviction.	Standard
			TI/Medical records	Drug free > 7 years	UD
			N/A	Drug free ≤ 7 years	Decline
Dysfunctional Uterine Bleeding	Any bleeding from the vagina that varies from a woman's normal menstrual cycle.	Onset, underlying cause, treatment, date of recovery, any residuals, any further treatment needed	TI/Medical records	Unoperated pre- or post menopausal, no recurrence, > 2 years	UD
			N/A	Recurrent or surgery pending	Decline
Dysmenorrhea	Painful menstruation	Onset, underlying cause, treatment, date of recovery, any residuals, any further treatment needed	None/TI	Stable or > 1 year after recovery	UD
			N/A	Unstable or chronic	Decline
E					
Ear Infections		Number of episodes, frequency of episodes, date of last episode, treatment	None/TI	Acute, recovered single episode	Standard
			None/TI	Surgically corrected or ear tubes present	Standard
			TI/Medical records	2-4 episodes or single with fluid or hearing loss	UD
			N/A	≥ 5 episodes, no surgical correction	Decline
Eclampsia/Pre-eclampsia	Toxic result of pregnancy that can include but is not limited to Seizures, Elevated Blood Pressure and excess protein in the urine	Number of occurrences, date of recovery, residuals	TI/Medical records	1 episode, subsequent normal delivery or tubal ligation/hysterectomy, no residual kidney or hypertensive issues	Standard
				All others	Decline
Eczema	Eczema is a general term used to describe a variety of conditions that cause an itchy, inflamed skin rash.	location, treatment	None/TI	Mild, medication only	Standard
			N/A	Moderate to severe	Decline
Edema	Abnormally large amounts of fluid in the body tissue	onset, underlying cause, treatment, date of recovery, any residuals, any further treatment needed	None/TI	> 3 years	UD
			N/A	≤ 3 years	Decline
Embolism	A clot in a blood vessel; also Phlebitis or Thrombophlebitis	Onset, location, cause, treatment, date of recovery, any residuals, any further treatment needed	None/TI	No treatment or symptoms > 3 years	UD
			N/A	Present, recurrent or on anticoagulation treatment	Decline

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Encephalitis	Infectious or inflammatory disease of the brain	onset, underlying cause, treatment, date of recovery, any residuals, any further treatment needed	None/TI	Post infectious or viral, duration under 3 weeks, recovered, no residuals, > 1 year	UD
			N/A	Post infectious or viral, duration under 3 weeks, recovered, no residuals, ≤ 1 year	Decline
			N/A	Presence of Lyme Disease, Herpes Simplex virus or West Nile virus	Decline
Endometriosis	A condition in which endometrial tissue grows outside of the inner lining of the uterus	Onset, severity of symptoms (mild/moderate/severe), treatment, date of recovery or last symptoms	None/TI	Complete hysterectomy or post menopausal(no use of Lupron), > 6 months	Standard
			TI/Medical records	Myomectomy or ablation, no further symptoms > 5 years	Standard
			TI/Medical records	Myomectomy or ablation, surgery or symptoms < 5 years	UD
			TI/Medical records	No surgery, mild and no medications or surgical intervention required	UD
				Complete hysterectomy or post menopausal, ≤ 6 months	Decline
			N/A	Moderate to severe or operated with residuals	Decline
Epididymitis	Inflammation of the epididymis	Number of episodes, date of last episode	None/TI	Acute, single episode, full recovery, > 6 months ago	Standard
			TI/Medical records	Multiple episodes in last 5 years	UD
Epilepsy	Condition of the nervous system that causes repeated, sudden, brief changes in the normal electrical activity of the brain	Onset, type, number of episodes, date of last episode, treatment, date of recovery	TI/Medical records	Grand Mal or Jacksonian, > 5 years since last seizure	Standard
			TI/Medical records	Petit Mal, > 5 years since last seizure	Standard
			TI/Medical records	Petit Mal, 1-5 years since last seizure	UD
			TI/Medical records	Grand Mal or Jacksonian, 2-5 years since last seizure	UD
			N/A	Grand Mal or Jacksonian, ≤ 2 years since last seizure or under age 16	Decline
			N/A	Petit Mal, ≤ 1 year since last seizure	Decline
Esophageal Stricture	Abnormal narrowing of the esophagus	Underlying cause, treatment	None/TI	Cause known	UD
			N/A	Cause unknown	Decline
Esophagitis	Inflammation of the esophagus	Any hiatal hernia, ulcer, or esophageal hemorrhage, Treatment, date of recovery	None/TI	No attacks or medication > 3 years	Standard
			None/TI	Mild attacks treated by non-prescription medication	Standard
			None/TI	Hiatal Hernia operated, fully recovered, no further attacks or GERD, > 1 year	UD
			TI/Medical records	Frequent or chronic attacks or treated with prescription medication	UD
			N/A	Presence of Barrett's, Cancer, Hemorrhage, Hiatal Hernia or Stricture	Decline

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F					
Fibrocystic Disease of the Breast	An overgrowth of fibrous tissue and cystic spaces in the breast	An overgrowth of fibrous tissue and cystic spaces in the breast	None/TI	Asymptomatic, no treatment	Standard
			TI/Medical records	Current or surgical removal of cyst(s)	UD
Fibroid Uterus	Benign fibrous tumor(s) of the uterus	Onset, any symptoms, any change in size, treatment	None/TI	Total hysterectomy, > 6 months, fully recovered, no residuals	Standard
			None/TI	Myomectomy/Ablation, no further symptoms 1-5 years	UD
			N/A	Any treatment or symptoms within the past year	Decline
Fibromyalgia	Widespread pain, aches and stiffness in muscles and joints throughout the body along with unusual tiredness; also known as Fibrositis & Fibromyositis	Widespread pain, aches and stiffness in muscles and joints throughout the body along with unusual tiredness; also known as Fibrositis & Fibromyositis	N/A	Mild, one medication only	UD
			N/A	On-going treatment, medication	Decline
Fractures, Traumatic		Onset, location, treatment, any internal fixations, still present, date removed, date of recovery, any residuals, any further treatment needed	None/TI	Ankle, clavicle, finger(s), foot, hand, radius, ribs, ulna, wrist, > 6 months	Standard
				Femur or scapula, > 2 years	Standard
				Humerus or pelvis, > 1 year	Standard
				Spine, > 5 years	Standard
				Ankle, clavicle, finger(s), foot, hand, radius, ribs, ulna, wrist, ≤ 6 months	UD
				Femur or scapula, ≤ 2 years	UD
				Humerus or pelvis, ≤ 1 year	UD
				Spine, ≤ 5 years	UD
G					
Gall Bladder Disease	Cholecystitis (inflammation of the gall bladder) and/or gall stones	Treatment, date of recovery	None/TI	Surgery completed	Standard
			N/A	All others	Decline
Gastritis	Inflammation of the stomach, ulcer ruled out	Number of episodes, Frequency of episodes, any hemorrhage, date of last episode, treatment	None/TI	Single attack, not on medication, > 6 months	Standard
			N/A	Frequent or chronic attacks	Decline
Gastroesophageal Reflux Disease (GERD)	Digestive disorder in which the stomach's juices (acid and digestive enzymes) flow backward, or reflux, into the esophagus	Digestive disorder in which the stomach's juices (acid and digestive enzymes) flow backward, or reflux, into the esophagus	None/TI	No attacks or medication > 3 years	Standard
			None/TI	Mild attacks treated by non-prescription medication	Standard
			None/TI	Hiatal Hernia operated, fully recovered, no further attacks or GERD, > 1 year	UD
			None/TI	Frequent or chronic attacks or treated with prescription medication	UD
			N/A	Presence of Hiatal Hernia or esophageal hemorrhage or ulcer or surgical correction ≤ 1 year ago	Decline
Genital Herpes	STD with lesions often appearing orally and genitally	Onset, frequency of episodes, date of last episode, treatment	None/TI	All cases	UD
Glaucoma	Ocular hypertension leading to gradual loss of vision	Onset, treatment, any surgery or laser treatment anticipated	None/TI	Operated, > 1 year, full recovery, no medication	Standard
			N/A	Present	Decline

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
Goiter	An enlargement of the thyroid gland.	Onset, treatment, any hyperthyroidism or Graves' disease, date of recovery	TI/Medical records	Surgically corrected, > 1 year normal thyroid function	UD
			N/A	Unoperated or operated, ≤ 1 year, hyperthyroidism or Grave's Disease present	Decline
			N/A	Any recurring symptoms or instability of thyroid	Decline
Gout	Elevation of uric acid which can result in arthritis and kidney disorders, including kidney stones	Onset, frequency of episodes, date of last episode, treatment	None/TI	Normal build, no history of kidney stones, with or without medications	UD
			N/A	All others	Decline
H					
Headaches	Pain in the head	Onset, number of episodes last 12 months, severity of episodes (mild/moderate/severe) treatment, any hospitalization or ER, date of last episode	None/TI	Non migraine, ≤ 3 per mo, no ER visit w/in 1 yr, rate for medication	Standard
			N/A	> 3 per mo, ER Visit w/in 1 yr or MRI recommended	Decline
Heart Murmur	Abnormal sound made by turbulent blood flow within the heart. A heart murmur may indicate a structural abnormality of a heart valve or heart chamber, or it may be due to an abnormal connection between two parts of the heart.	Onset, type, any symptoms, treatment	Medical records	Functional murmur, no underlying heart disease	Standard
			Medical records	Unspecified, > 1 year since diagnosis	UD
			N/A	Unspecified, ≤ 1 year since diagnosis	Decline
Hemorrhoids	Varicose veins of the anus	Onset, number of episodes, treatment, date of recovery	None/TI	Operated, full recovery or with \$5,000 deductible or higher	Standard
			N/A	Not operated or fully recovered, below \$5,000 deductible	Decline
Hepatitis	Inflammation of the liver	Type, onset, treatment, number of episodes, date of recovery	TI/Medical records	Hepatitis A, recovered, no residuals	UD
			TI/Medical records	Hepatitis B, Acute, normal ALT, no underlying disease or liver damage	UD
			N/A	Hepatitis B, Chronic or Acute with no normal ALT tests	Decline
			N/A	Hepatitis C	Decline
			N/A	All others	Decline
Hernia	A protrusion of tissue through an abdominal opening.	Type, onset, treatment, date of recovery (date of last symptom)	None/TI	Surgery completed or full recovery > 1 year with no surgery recommended	Standard
				All others	Decline
Human Papillomavirus	HPV causes genital warts, carries increased risk of malignancy	Onset, number of episodes, treatment, recovery date(s)	None/TI	No recurrence or complications, normal PAP smears (female only) > 2 years since diagnosis	Standard
			N/A	Abnormal or no PAP smear available (female only), further treatment recommended	Decline
Hydronephrosis	Cystic distension of the kidney caused by the accumulation of urine in the renal pelvis as a result of obstruction to outflow and accompanied by atrophy of the kidney structure and cyst formation	Onset, treatment, date of recovery	None/TI	Successful treatment, > 1 year	UD
			N/A	Present or Bilateral	Decline

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Hyperlipidemia	Elevated triglycerides	Onset, treatment, date and results of last readings (total cholesterol/HDL/LDL/Trigs)	None/TI	Diet and exercise controlled, no weight factors or hypertension	Standard
			TI/Medical records	Medication controlled	UD
			N/A	With any other cardiac concerns or with 2 combinations of tobacco use, hypertension/high blood pressure or ratable height / weight	Decline
Hypertension (High Blood Pressure)	Abnormally elevated blood pressure.	Onset, treatment, dates and results of last 3 blood pressure readings	None/TI	Height / weight appropriate, no issues with cholesterol or diabetes and non-tobacco user, no meds, stable readings, > 1 year	Standard
			None/TI	Height / weight appropriate, no issues with cholesterol or diabetes and non-tobacco user use of 3 or fewer medications	UD
			N/A	On more than 3 blood pressure medications, malignant hypertension or with cardiac involvement	Decline
			N/A	Diagnosed age 25 or younger OR < 6mo since diagnosis or controlled readings	Decline
			N/A	With any two of the following conditions: overweight build, elevated cholesterol, diabetes or tobacco use	Decline
Hyperthyroidism	Excessive production of thyroid hormone	onset, any goiter, treatment, date of recovery	None/TI	> 1 yr, well controlled, no medication changes	UD
			N/A	Goiter/Hashimotos, unoperated <1 yr	Decline
Hypothyroidism	Inadequate production of thyroid hormone	Treatment	None/TI	Adequate medical control	Standard
				Myxedema or cretinism	Decline
I					
Impotence	(ED) a sexual dysfunction characterized by the inability to develop or maintain an erection of the penis sufficient for satisfactory sexual performance	Reason, underlying cause (prostate issues, hypertension, etc)	TI/Medical records	No underlying cause	Standard
Infertility	Inability to conceive through natural means	Underlying cause, number of episodes	TI/Medical records	> 2 years since last attempt, single episode, no future attempts planned	Standard
				≤ 2 years since last attempt, multiple episodes	Decline
Iritis	Inflammation of the membrane behind the cornea	Underlying cause, number of episodes, onset and recovery date(s)	None/TI	Fully recovered, no residuals, > 6 months	Standard
				Fully recovered, no residuals, ≤ 6 months	Decline
Irritable Bowel Syndrome	An intestinal condition which causes abdominal pain and cramps, changes in bowel habits, gassiness, bloating, nausea, and other symptoms.	Severity of symptoms (mild/moderate/severe), frequency of episode, treatment	None/TI	Mild to moderate infrequent attacks, only occasional meds	UD
				All others	Decline

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K					
Kidney Stones	Deposits of uric acid or calcium in the kidneys	Number of episodes, treatment, onset and recovery dates for all episodes	None/TI	1 episode, stone passed	UD
			None/TI	Surgical intervention or multiple episodes, fully recovered > 1 year	UD
			N/A	All others including history of Gout/Hyperuricemia	Decline
Knee, Sprain or Strain	A sprain refers to damage of ligaments or a joint capsule. A strain refers to damage of a muscle.	Onset, number of episodes, treatment, recovery date(s) (date of last symptom)	None/TI	Recovered, > 1 year ago	UD
			TI/Medical records	Recovered, 6 months- 1 year ago	UD
			N/A	Present or recovered ≤ 6 months	Decline
Knee, Tears (Cartilage or Ligament)	Significant damage or injury to the knee causing an actual tear of a ligament or cartilage	Onset, number of episodes, treatment, recovery date(s) (date of last symptom)	None/TI	Complete recovery (no ongoing cartilage or ligament damage), > 1 year ago	UD
			N/A	Multiple surgeries, still symptomatic, unoperated, or fully recovered/ released from care < 1 year	Decline
L					
Lipoma	A benign tumor of the subcutaneous fat	Location, treatment, date of recovery	None/TI	Operated, fully recovered, benign	Standard
			N/A	All others	Decline
M					
Meningitis	Inflammation of brain/spinal membranes	Type (viral/bacterial/fungal) onset and recovery dates	None/TI	Recovered, > 1 year	UD
			N/A	Recovered, ≤ 1 year	Decline
			N/A	Present	Decline
Menopause	Normal cessation of ovarian function and menses due to age.	Onset, treatment	None/TI	Symptoms controlled with oral hormone replacement	Standard
				Symptoms not controlled	UD
Migraine Headaches	Throbbing or pulsating, and often is associated with nausea and changes in vision (aura)	Onset, number of episodes last 12 months, severity of episodes (mild/moderate/severe) treatment, any hospitalization or ER, date of last episode	TI/Medical records	Controlled with OTC medications, no ER visits within last 2 years	Standard
			TI/Medical records	Migraine diagnosed, meds taken	UD
			N/A	Uncontrolled with meds, diagnostic treatment not done or pending	Decline
			N/A	2 or more ER visits for migraine in last 2 years	Decline
Mitral Valve Prolapse	Deformed heart valve that fails to close properly	Onset, any symptoms, treatment	TI/Medical records	No medications other than antibiotics as needed prior to dental procedures, asymptomatic	UD
			TI/Medical records	Medication controlled, no symptoms with medication use	UD
			N/A	Moderate to severe, symptomatic	Decline
N					
Narcolepsy	Sudden onset of an uncontrollable desire to sleep; a condition characterized by brief attacks of deep sleep often occurring with cataplexy and hypnagogic hallucinations	Treatment	TI/Medical records	All cases	UD

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Nephritis	Inflammation of kidney	Number of episodes, onset and recovery dates for all episodes	None/TI	Single episode, fully recovered, urinalysis/blood pressure normal, > 1 year ago	Standard
			None/TI	Single episode, fully recovered, urinalysis/blood pressure normal no residuals, ≤ 1 year	UD
			N/A	Multiple attacks / chronic	Decline
O					
Orchitis	Viral infection of the testicle	Number of episodes, onset and recovery dates for all episodes	None/TI	Acute episode full recovery	Standard
			None/TI	Present	UD
			N/A	With complications, chronic or progressive	Decline
Osteoarthritis	Occurs when the cartilage of a joint erodes (breaks down). Bones begin to rub against each other, causing pain and difficulty moving the joint	Onset, joints involved, severity (mild/moderate/severe) of each joint affected, treatment	None/TI	Mild	UD
			None/TI	Moderate	UD
			N/A	Severe	Decline
Osteochondritis	Inflammation of bone and cartilage	Onset, location, date of recovery	None/TI	Full recovery, no deformity, > 2 years ago	Standard
			N/A	Present or with residual deformity or crippling	Decline
Osteoporosis	Decrease in bone mass with decreased density and enlargement of bone spaces producing porosity and brittleness	Onset date, Severity (mild/moderate/severe), treatment	None/TI	Mild, preventive treatment only with medication, no symptoms	UD
			None/TI	Moderate, no pathological fractures	UD
			N/A	Severe, history of fractures	Decline
Osteopenia	Decrease in bone mineral density that can be a precursor condition to osteoporosis	Treatment	TI/Medical records	All cases will rate for medication only	UD
Ovarian Cyst (Benign)	A sac containing fluid or semisolid material that develop in or on the surface of an ovary.	Treatment, date of recovery	None/TI	History of, operated or resolved, complete recovery, no residuals > 1 year	Standard
				Present > 1 year, stable on OCP's no growth/changes	UD
				Operated, benign, with oophorectomy or removal of cyst only ≤ 1 year	UD
P					
Pancreatic Cyst or Pseudocyst	Abnormal collection of fluid in/on pancreas	Date(s), treatment(s), hospitalization(s), surgery(s), history of alcohol abuse?	TI/Medical records	Single Cyst/pseudocyst, one episode, surgery, fully recovered, > 1 year	Standard
			N/A	Present	Decline
			N/A	Single Cyst/pseudocyst, one episode, surgery, fully recovered, < 1 year	Decline
			N/A	More than one cyst/pseudocyst	Decline
Pancreatitis	Inflammation of the pancreas	Date(s), treatment(s), medication(s)	TI/Medical records	Acute, single attack-> 1 yr	Standard
			N/A	All others	Decline
Parkinson's Disease	Neurological disorder marked by tremors	Date(s), treatment(s), hospitalization(s), surgery(s)	N/A	Non-progressive or controlled	Decline
				ALL	Decline

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
Pelvic Inflammatory Disease	Most commonly, salpingitis or Salpingo-oophoritis, infection of fallopian tubes and/or ovaries	Date(s), treatment(s), medication(s)	TI/Medical records	Operated, > 1 year	UD
			TI/Medical records	Resolved, single attack > 1 year	UD
			N/A	Resolved, single attack ≤ 1 year	Decline
			N/A	Multiple attacks, ≤ 2 years since last	Decline
			N/A	Present	Decline
Peptic Ulcer Disease (Stomach/Gastric or Duodenal Ulcer)	An ulcer of an area of the gastrointestinal tract that is usually acidic	Date(s), treatment(s), medication(s), surgeries, bleeding episodes?	TI/Medical records	Unoperated, asymptomatic, > 5 years, no medications	Standard
			TI/Medical records	Unoperated, asymptomatic, 2-5 years	UD
			N/A	Unoperated, asymptomatic, ≤ 2 years	Decline
Phlebitis	Inflammation of a vein	Date(s), treatment(s)	TI/Medical records	Superficial, one attack, recovered > 1 year	Standard
			TI/Medical records	Superficial, one attack, recovered ≤ 1 year or superficial, multiple attacks over 1 year	UD
			N/A	Superficial-present or Deep-within 2 years	Decline
Plantar Fasciitis	Inflammation of fibrous tissue in the sole of the foot	Date(s), treatment(s), surgery(s)	TI/Medical records	All cases	UD
Pleurisy	Inflammation of the pleura, the membrane that covers the lungs and lines the inside of the chest cavity	Date(s), treatment(s), medication(s), cause, infections?, embolism?	TI/Medical records	Acute, full recovery, no residuals, no positive TB test, > 6 months ago	Standard
			TI/Medical records	Acute, full recovery, no residuals, no positive TB test, ≤ 6 months ago	UD
			N/A	All others	Decline
Pneumonia	An infection of the lungs	Date(s), treatment(s), medication(s), hospitalizations, days lost from work, how many prior episodes, tobacco use	None/TI	No hospitalization, full recovery, > 3 months ago	Standard
			None/TI	Hospitalization, full recovery, > 6 months ago	Standard
			TI/Medical records	History of more than one occurrence	UD
Pneumothorax	Presence of air in the pleural cavity - impairs the vacuum needed and may cause a collapsed lung	Date(s), treatment(s), medication(s)	TI	Traumatic or spontaneous, fully recovered, > 1 year ago	Standard
				Otherwise	UD
Polyps, Papilloma (Colon, Larynx, Rectal, Nasal, Stomach, Urethra, Urinary, Bladder)	A disorganized tumor-like growth of cells protruding from a mucous membrane	Date(s), treatment(s), surgeries, pathology results	TI/Medical records	Operated or resolved, depending upon the site	UD
			N/A	Unoperated	Decline
Pre-Menstrual Syndrome (PMS)	A collection of physical, psychological, and emotional symptoms related to a woman's menstrual cycle	Date(s), treatment(s), medication(s)	TI/Medical records	On medication	UD
Proctitis	Inflammation of the rectum	Date(s), treatment(s), medication(s)	TI/Medical records	Fully recovered, no residuals, > 3 months	Standard
			TI/Medical records	Multiple or recurrent, last attack > 3 years	Standard
			N/A	All Others	Decline
Prolapsed Uterus	Downward displacement of the uterus	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	Operated, fully recovered > 1 year	Standard
			TI/Medical records	Operated, fully recovered ≤ 1 year	UD
			N/A	Present or unoperated	Decline

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
Prostate, Enlarged (Benign, BPH)	A non malignant enlargement of the prostate gland due to excessive cellular growth	Date(s), treatment(s), medication(s), surgery(s), PSA level	TI/Medical records	Normal PSA, unoperated, no symptoms or medications > 2 years or operated > 1 year	Standard
			TI/Medical records	Normal PSA, unoperated, asymptomatic < 2 years or operated < 1 year	UD
			TI/Medical records	Elevated PSA, negative biopsy 2-3 years	UD
			TI/Medical records	Elevated PSA, negative biopsy < 2 years	Decline
			N/A	Unoperated, urinary symptoms, elevated PSA	Decline
Prostatitis	An inflammation of the Prostate Gland	Date(s), treatment(s), medication(s), PSA level	TI/Medical records	Resolved, > 1 year	Standard
				Present or asymptomatic < 1 year	UD
Psoriasis	Chronic skin disorder that causes scaling and inflammation	Date diagnosed, treatment(s), medication(s)	TI/Medical records	Mild, no medication prescribed	UD
			N/A	Severe, systemic or evidence of psoriatic arthritis	Decline
R					
Raynaud's Disease	Raynaud's disease refers to a disorder in which the fingers or toes suddenly experience decreased blood circulation.	Date(s), treatment(s), medication(s)	TI/Medical records	Unoperated, mild/not progressing > 2 years	Standard
				Operated and asymptomatic > 1 year	Standard
				Unoperated, mild/not progressing < 2 years	UD
				Raynaud's Phenomenon	UD
Rectal Prolapse	Protrusion of rectum through the anus	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	Surgery, fully recovered, no residuals, > 1 year	Standard
			TI/Medical records	Surgery, fully recovered, no residuals, < 1 year	UD
			N/A	Present	Decline
Rectal Stricture	Narrowing of the rectum	Date(s), treatment(s), medication(s), surgery(s)	TI	Surgery, fully recovered, no residuals, > 1 year	Standard
			TI	Surgery, fully recovered, no residuals, < 1 year	UD
			N/A	Present or within 1 year of the finding	Decline
Rectocele	Protrusion of the bladder into the rectum	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	Operated and recovered	Standard
			TI/Medical records	Asymptomatic, no treatment pending, > 1 year	UD
			N/A	Present	Decline
Renal Cyst	Solitary cyst of the kidney	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	Surgery, fully recovered, no residuals, > 1 year	Standard
			N/A	Present	Decline
Renal Failure	Loss of kidney function	Date(s), treatment(s), medication(s)	TI/Medical records	Acute, fully recovered, no residuals, > 1 year	UD
			N/A	Present	Decline
			N/A	Chronic	Decline
Respiratory Distress Syndrome	Respiratory disorder that occurs in infants and young children	Date(s) and type(s) of treatment, ER or hospitalizations	TI/Medical records	Recovered > 2 years	UD
			N/A	Recovered ≤ 2 years	Decline
Restless Leg Syndrome	Restless legs syndrome (RLS) is characterized by unpleasant sensations in the limbs, usually the legs, that occur at rest or before sleep.	Date(s), treatment(s), medication(s)	TI/Medical records	No medication	UD
				Medication	UD
Rotator Cuff Injury	A tear or inflammation of the rotator cuff tendons in the shoulder.	Date(s), treatment(s), medication(s), location, surgeries	TI/Medical records	Operated/asymptomatic > 1 yr	Standard
			N/A	Treatment within 2 years (unoperated)	Decline
			N/A	Current symptoms	Decline

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
S					
Scoliosis	Lateral curvature of the spine	Date(s), treatment(s), medication(s), location, surgeries	TI/Medical records	Under age 15, Mild curvature, < 20%, no treatment	Standard
			TI/Medical records	Over age 15, asymptomatic > 2 years	Standard
			N/A	Under age 15, operated or Unoperated, requiring brace or therapy	Decline
			N/A	Over age 15, asymptomatic ≤ 2 years	Decline
Seizures, febrile	Acute onset of seizures specifically attributed to acute fever	Dates, treatment and medications	None/TI	Resolved, full recovery	Standard
Shingles	See Herpes Zoster	Date(s), treatments, medications, affected area	None/TI	Resolved > 3 months	Standard
Sinusitis	Sinusitis refers to an inflammation of the sinuses, airspaces within the bones of the face.	Date(s), treatment(s), medication(s), surgeries	TI	1-3 episodes treated with over-the-counter medications	Standard
				More than 3 episodes, treated with prescription medication	UD
				Operated, full recovery, no residuals	UD
				Chronic, more than 2 episodes in last year	Decline
				Surgery recommended	Decline
Spina Bifida	Congenital deformation of the spinal canal	Date(s), treatment(s), surgery(s)	N/A	Asymptomatic, over age 20	Standard
				≤ 20 years old, symptomatic or with myelocoele, meningocele, meningomyelocoele or syringomyelocoele	Decline
Spinal Fusion	Stiffness or fixation of a joint by disease or surgery	Date(s), treatment(s), surgery(s)	TI/Medical records	Asymptomatic > 2 years	UD
				Asymptomatic ≤ 2 years	Decline
				Symptomatic, therapy/medication required	Decline
Spondylolisthesis	Displacement of 4th & 5th vertebrae	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	Asymptomatic > 1 year since diagnosed	UD
				Asymptomatic ≤ 1 year since diagnosed or symptomatic	Decline
Strabismus	A misalignment of the eyes, cross-eyes	Date(s), treatment(s), medication(s), surgery(s)	TI	Successful correction and recovery, > 2 years ago	Standard
				Successful correction and recovery, < 2 years ago	UD
				Without correction and under age 21	Decline
Subdural Hematoma	Rupture of blood vessel between brain and skull; requires craniotomy to correct	Date diagnosed, treatment(s), medication(s), surgery(s)	TI/Medical records	Surgery, fully recovered, no residuals, > 3 years	Standard
			N/A	Present, untreated	Decline
			N/A	Surgery, ≤ 1 year	Decline
			N/A	Involution or atrophy of brain tissue causing mental deterioration	Decline
Subluxation	Spinal misalignment	Date(s), treatment(s), frequency (visits over what period)	TI/Medical records	> 1 year since diagnosis, maintenance therapy only	Standard
			N/A	Occasional treatment or no treatment in more than 1 year	UD
Syncope	Fainting spells	Date(s), treatment(s), medication(s)	TI/Medical records	1 episode, adequate workup, > 1 year	Standard
			N/A	Multiple episodes, indefinite diagnostic studies, or more than 3 episodes in 2 years	Decline

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
Temporomandibular Joint Syndrome (TMJ)	A disorder caused by faulty articulation of the temporomandibular joint and characterized by facial pain, headache, ringing ears, dizziness, and stiffness of the neck.	Date(s), treatment(s), medication(s), surgery(s)	TI	Asymptomatic or operated and fully recovered	Standard
			N/A	Symptomatic, ≤ 2 years coverage under contract for benefit (if no benefit for TMJ on contract, see above)	Decline
Tendonitis / Tenosynovitis / Synovitis	Inflammation of tendons	Date(s), treatment(s), medication(s), support devices, surgery(s)	TI	Single occurrence, full recovery	Standard
			TI	Single occurrence, not recovered	UD
			N/A	Multiple occurrences	UD
Thoracic Outlet Syndrome	Nerve compression in the chest	Date(s), treatment(s), medication(s)	TI/Medical records	Present, no nerve involvement	UD
			N/A	Present with nerve involvement	Decline
Thrombophlebitis	A clot in a blood vessel	Date(s), treatment(s), protein C and / or S deficiencies, Factor V Leiden?	TI/Medical records	Superficial, one attack, recovered > 1 year	Standard
			TI/Medical records	Superficial, one attack, recovered ≤ 1 year or superficial, multiple attacks 1-3 years	UD
			N/A	Superficial, present, chronic or Deep ≤ 4 years	Decline
Tonsillitis	Inflammation of the tonsils	Date(s), treatment(s), medication(s), surgeries	TI	Acute attack or surgically corrected	Standard
				All others	UD
				> 5 attacks per year or surgery pending or recommended	Decline
Tourette's Syndrome	Tourette syndrome (TS) is an inherited disorder of the nervous system, characterized by a variable expression of unwanted movements and noises (tics).		TI/Medical records	Tics only, non-disabling, responsive to treatment	UD
				All others	UD
Transplants(non-corneal)		Date(s), treatment(s), medication(s), organ(s), surgery(s)	TI/Medical records	Donor	UD
			N/A	Recipient	Decline
Transplants, Corneal	Corneal transplant recipient	Date(s), treatment(s), medication(s), surgery(s), eye(s)	TI	> 1 year since surgery	Standard
			N/A	≤ 1 year since surgery	Decline
Trigeminal Neuralgia	Tic Douloureux; inflammation of facial nerve	Date(s), treatment(s), medication(s), surgeries	TI	Operated or unoperated, > 2 years	UD
			N/A	All others	Decline
			N/A	Present, untreated	Decline
Tubal Pregnancy	Ectopic pregnancy where embryo develops in the fallopian tube	Date(s), treatment(s), medication(s), surgeries	TI	If cause known	UD
			None	> 2 years	Standard
			N/A	≤ 2 years or multiple	Decline
Urethritis	Inflammation of the urethra	Date(s), treatment(s), medication(s), STD's?	None	Full recovery > 1 year	Standard
			None/TI	Full recovery ≤ 1 year	UD
			N/A	All others	Decline
V					
Vaginitis - Candidiasis, Moniliasis, Trichomoniasis	A condition characterized by inflammation of the vagina and vulva, most often caused by a bacterial, fungal, or parasitic infection.	Date(s), treatment(s), medication(s)	TI	Not caused by venereal disease, resolved, > 6 months	Standard
			TI/Medical records	All others	UD

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Medical Condition	Description	You should ask	UW requirement	Underwriting Considerations	Probable Action
Varicose Veins	Varicose veins are dilated, tortuous, elongated superficial veins that are usually seen in the legs.	Date diagnosed, treatment(s), surgeries	TI/Medical records	Present, no edema or ulcer, asymptomatic	Standard
			None/TI	Surgery completed, resolved, > 1 year	Standard
			N/A	History of edema or ulcer, recovery, < 2 years	Decline
			N/A	Surgery pending	Decline
Ventricular Septal Defect	Unnatural opening in the heart wall	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	Operated or spontaneous closure > 3 years	Standard
			TI/Medical records	Operated or spontaneous closure, 1-3 years	UD
			N/A	Unoperated or within 1 year of operation	Decline
Vertigo	Dizziness	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	If cause known	UD
			n/a	If cause unknown	Decline
W					
Whiplash Injury	Injury to the cervical area of the spine	Date(s), treatment(s), medication(s), therapies (how many, over what period)	None/TI	Fully recovered, no residuals, > 3 years	Standard
			TI/Medical records	Fully recovered, no residuals, ≤ 3 years	UD
			N/A	Present	Decline
Wolff-Parkinson-White Syndrome (WPW)	Congenital cardiac irregularity	Date(s), treatment(s), medication(s), surgery(s)	TI/Medical records	With Cardiac Ablation > 1 year	Standard
			N/A	With Cardiac Ablation ≤ 1 year	Decline
			N/A	All others	Decline

AUTO DECLINE MEDICAL CONDITIONS LIST

The following is a list of automatic decline medical conditions. This is not a comprehensive list. The ultimate decision about an offer for coverage will be made by medical underwriting.

A	C	D	H (con't)
Acromegaly	Cardiac Decompensation	Demyelinating Diseases	Huntington's Chorea
Addison's Disease	Cardiac Defibrillator	Diabetes (most cases)	Hydrocephalus
Adrenal Gland Disorders	Cardiac Hypertrophy		Hyperparathyroidism
Adrenal Insufficiency	Cardiac Pacemaker	E	Hyperpituitarism
AIDS	Cardiomegaly	Emphysema	Hypersplenism
Alzheimer's Disease	Cardiomyopathy	Enlarged Liver	Hypertensive Nephropathy
Amputation(s), Due to Disease	Carotid Artery Disease	Esophageal Varices	Hypoparathyroidism
Amyotrophic Lateral Sclerosis (ALS)	Cerebral Hemorrhage / Embolism / Thrombosis	Esophageal Cancer	Hypoplastic anemia
Angioplasty	Cerebral Palsy	F	Hypoplastic Left Ventricle Syndrome
Anticoagulant Therapy	Cerebrovascular Accident	Factor Deficiencies	I
Aortic Arch Arteritis	Cerebrovascular Disease	Familial Polyposis	Idiopathic
Aortic Insufficiency / Stenosis / Regurgitation	Chronic	Fragile X Syndrome	Thrombocytopenic
Aplastic Anemia	Chronic Glomerulonephritis	G	Purpura
Arnold-Chiari Malformation	Chronic Granulomatous Disease	Galactorrhea	Immune Deficiency Disorder(s)
Arterial Embolism (clot)	Chronic Interstitial Cystitis	Gastric Banding	Intestinal Bypass
Arterial Occlusion	Chronic Obstructive Pulmonary Disease (COPD)	Gastric Stapling	Ischemic Heart Disease
Arteriosclerotic Heart Disease	Chronic Renal Failure	General Paresis	K
Arteritis	Cirrhosis	Generalized Scleroderma	Kahler's Disease
Artificial Heart Valve	Collagen Vascular Disease	Glomerulonephritis, Chronic	Karposi's Sarcoma
Atherosclerosis	Colon / Rectal Cancer	H	Kidney Cancer
B	Congenital Heart Anomalies	Heart / Lung Transplants	Klinefelter Syndrome / Achalasia
Banti's Disease	Congenital Lymphedema	Heart Attack	Knee Replacement
Barrett's Esophagus	Congestive Heart Failure	Heart Block	L
Behcet's Syndrome	Coronary Artery Bypass Surgery	Heart Bypass Surgery	Larynx Cancer
Biliary Cirrhosis	Coronary Artery Disease	Heart Disease	Left Ventricular Hypertrophy
Bipolar Disorder	Coronary Heart Disease	Heart Enlargement	Legg-Calve' Perthes Disease
Bladder Cancer	Coronary Insufficiency	Heart Failure	Leiomyosarcoma
Bone Cancer	Coronary Ischemia	Heart Pacemaker	Leukemia
Brain Aneurysm	Coronary Stent	Heart Valve Replacement	Leukoencephalopathy
Brain Cancer	CREST Syndrome	Hemophilia	Liver Cancer
Brain Hemorrhage	Crohn's Disease	Hepatitis C	Liver Enlargement
Breast Cancer (within 5 years or intraductal)	Cushing's Disease	Hepatomegaly	Lou Gehrig's Disease
Bright's Disease	Cyclothymic Disorder	HIV	Lung Cancer
	Cystic Fibrosis	Hip replacement	
		Hodgkin's Disease	
		Human T-Cell Leukemia / Virus	

AUTO DECLINE MEDICATION LIST

The following is a list of prescription drugs. Any Applicant currently taking one or more of these medications is ineligible for coverage. This is not a comprehensive list. The ultimate decision about an offer for coverage will be made by medical underwriting.

A

Abilify
Accutane
Actigall
Actos
Agrylin
Amaryl
Amevive
Amnesteem
Antibuse
Apokyn
Arava
Aricept
Arimidex
Aromasin
Avandia
Avinza
Avonex
AZT

B

Baraclude
Betaseron

C

Cellcept
Combivir
Copaxone
Coumadin
Crixivan
Cytovene

D

Dostines
Duragesic

E

Enbrel
Epivir

F

Famvir
Faslodex
Femara
Fentanyl
Flolan
Forteo
Fuzeon

G

Gabipentin
Gleevec
Glipizide
Glucophage

G (con't)

Glucotrol
Glucovance
Glyburide
Glyburide/Metformin

H

Heparin
Hepsera
Herceptin
Humalog
Humira
Humulin
Hyalgin
Human Growth Hormone

I

Insulin
Insulin pump
IVIG

J

Januvia

K

Kadian
Kaletra
Kineret

L

Lamictal
Lantus
Leukeran
Lithium
Lovenox
Lupron

M

Marinol
Metformin
Methadone
Methotrexate
Methylprednisolone
MS Contin
Methadone

N

Neoral
Neurontin
Nitro-Bid
Nitroglycerin
Nitroquick
Novantrone

O

Oxsoralen-Ultra
Oxycontin

P

Plaquenil
Plavix
Prednisone
Prograf
Prolastin
Protopoc

R

Rapamune
Raptiva
Rebif
Regranex
Remicade
Remodulin
Retrovir
Rilutek
Risperdal
Rythmol

S

Sandimmune
Seroquel
Soriatane
Suboxone
Symbyax
Synagis
Synarel
Synvisc

T

Tamoxifen
Targretin
Tracleer
Tranxene SD
Tysabri

U

Urso
Ursodiol

V

Viread

W

Warfarin

X

Xolair

Z

Zelnorm
Ziagen

COMMON ABBREVIATIONS

ADD/ADHD:	Attention Deficit (Hyperactivity) Disorder
AF:	Atrial Fibrillation
App:	Application
ASD:	Atrial Septal Defect
ASHD:	Arteriosclerotic Heart Disease
BID:	Twice daily
BP:	Blood Pressure
BPH:	Benign Prostatic Hypertrophy
C/O:	Complaint Of
CA:	Cancer
CAD:	Coronary Artery Disease
CBC:	Complete Blood Count
CC:	Chief Complaint
COPD:	Chronic Obstructive Pulmonary Disease
CX or CXR:	Chest X-ray
D and C:	Dilatation and curettage
DM:	Diabetes Mellitus or Diastolic Murmur
DX:	Diagnosis
ENT:	Ear, Nose and Throat
ETOH:	Ethanol - alcohol
EXG / ECG:	Electrocardiogram
F/H:	Family History
FBS:	Fasting Blood Sugar
F/U:	Follow Up
FX:	Fracture
GERD / GER:	Gastro Esophageal Reflux Disease (acid indigestion).
GSW:	Gun Shot Wound
HPV:	Human Papilloma Virus
HSV:	Herpes Simplex Virus

HT / WT:	Height and Weight
HTN:	Hypertension
HX or H/X:	History
LBP:	Low Blood Pressure (Hypotension)
LVH:	Left Ventricular Hypertrophy
MI:	Myocardial Infarction
MVA:	Motor Vehicle Accident
NSAID:	Non-Steroidal Anti-Inflammatory Drug
OM:	Otitis Media
OTC:	Over The Counter
PRN:	Whenever Necessary – As Needed
PSA:	Prostate Specific Antigen
PT:	Physical Therapy
PTA/PTCA:	Percutaneous Transluminal (Coronary) Angioplasty
R/O:	Rule Out
RX:	Prescription
SOB:	Shortness of Breath
SX:	Symptom
TAH:	Total Abdominal Hysterectomy
TI:	Telephone Interview
TID:	Three times daily
TVH:	Total Vaginal Hysterectomy
TX:	Treatment
U/A:	Urinalysis
UD:	Underwriter (ing) Decision / Underwriter (ing) Discretion
UTI:	Urinary Tract Infection
WNL:	Within Normal Limits
W/O:	Without