

Juvenile Life Insurance Guidelines*

For life insurance purposes, applicants are considered to be juveniles between the ages of 15 days through 17 years old.

Life Insurance Face Amounts

- Generally, the maximum Face Amount is \$100,000. The Face Amount should not exceed 50% of the coverage carried on the parent with the least amount of life insurance in-force. Any amount exceeding 50% of the lesser insured parent must include a cover letter with an explanation of the need for Underwriting consideration of the higher amount.

Ownership/Beneficiary

- Owner and Beneficiary must be a parent or grandparent. Other relatives and friends are considered to have no insurable interest. If a grandparent applies as owner and the child does not reside in the same household as the grandparent, a parent must sign the application on the "signature of parent" line authorizing the purchase and attesting to answers to the application questions.
- A legal guardian can be considered as owner and/or beneficiary. Details should be provided in a cover letter along with copies of guardianship documentation.

Household life insurance coverage

- All children should be equally insured, include a cover memo advising coverage amount on all family members
- The parent(s) must be insured

Risk class

- The Proposed Insured must be a Standard Risk (No Impaired Risk)

Face amounts greater than \$100,000

While we do not normally offer coverage over \$100,000 to juveniles, we will consider if the following criteria are met in addition to the above guidelines:

- APs is required in ALL cases
- A Cover Letter explaining the rationale of the need for \$100,000 or higher face amounts
- Maximum Face Amount \$250,000

Underwriting Limits on Juvenile Life Applications written in New York

- Minors between age 4 years 6 months and 14 years 6 months old
Coverage is limited to the greater of \$50,000 or 1/2 (50%) of the amount carried by the Applicant.
- Minors less than age 4 years 6 months old
Coverage is limited to the greater of \$50,000 or 1/4 (25%) of the amount carried by the Applicant.



Mutual of Omaha

*Not available in Washington.

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Underwriting Requirements – Express Only

Age	Term Life Express GUL Express	Term Life Express Only
	Amount being Underwritten:	
	\$50,000 – \$250,000	\$250,001 – \$400,000
18-60	Simplified Underwriting – Standard through Table 4 Pharmaceutical Random Interview	Simplified Underwriting – Standard through Table 4 Pharmaceutical Phone Interview Oral Fluids
61-65	Simplified Underwriting – Standard through Table 4 Pharmaceutical Phone Interview APS (Mandatory)	Simplified Underwriting – Standard through Table 4 Pharmaceutical Phone Interview Oral Fluids APS (Mandatory)

Please Provide Name and Address of Personal Physician with all applications

Note:

Oral Fluid Kits can be obtained on SPA

Agent mails Oral Fluid Kit to Lab
Kit is processed through Clinical Reference Lab (CRL)

NOTE:	
	1. Random interviews will be conducted for quality control
	2. Medical questionnaires and/or an occasional APS may be requested at the underwriter's discretion to clarify information developed from other sources.

Fit Guidelines

- Term 10, 15, 20, 30
- Term Life Complete
- AccumUL Plus
- GUL Complete
- GUL Survivor

Here's where the program fits:

- Ages: 18 – 75
- Minimum face amount: \$250,000
- Maximum face amount: \$1,000,000* (total coverage in force and applied for with United of Omaha and Companion Life Insurance Companies)
*(Maximum face amount \$2,000,000 GULS)
- Nontobacco users
- Base rating *after* normal credits of table 4 or less
- Does not apply to "flat extra" ratings

Here's where the credit ratings fit in

If your clients have several of the following characteristics, they may qualify for up to an *additional two table credits* from the base rating.**

Medical

- Great family history – no deaths from any disease prior to age 70

Express Build Chart

Height	Maximum Weight
4 Feet	
8"	197
9"	202
10"	208
11"	214
5 Feet	220
1"	226
2"	232
3"	238
4"	245
5"	251
6"	258
7"	265
8"	274
9"	282
10"	289
11"	298
6 Feet	305
1"	313
2"	321
3"	329
4"	338
5"	347
6"	358
7"	367
8"	376
9"	385
10"	395

- Cholesterol/HDL ratio <5.0
- Negative cardiac testing: GXT, non-imaged or imaged (stress echo, perfusion study), echocardiogram, EBCT or angiography
- GXT exercise performance >10 METS
- Optimal blood pressure control-treated or untreated of 130/80
- Preferred or better build, ages 18 – 60. Standard Plus or better build, ages 61 – 75

Lifestyle

- Regular preventative medical care and compliant follow-up
- Minimal alcohol use. No more than 2 drinks per day (no history of substance abuse)
- Lifetime nonsmoker
- Income >\$100,000, or net worth >\$1,000,000, or a college degree
- Preferred or better driving record

Any **three** of the above characteristics equals 1 table credit.

Any **five** of the above characteristics equals 2 tables credit.

**Best case final assessment available is standard.

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Financial Underwriting Guidelines

Income Replacement

Ages	\$25,000 or higher annual earned income
20 to 40	25X
41 to 50	20X
51 to 55	15X
56 to 65	10X
66 up	7x*

Larger amounts may be considered on an individual case basis for special needs situations with supporting documentation of financial need. A spouse working full or part time to supplement their household income can qualify for a similar amount as a non-working spouse depending on the circumstances.

*Income replacement is generally not considered for those over age 66 unless an individual is actively at work.

Estate Conservation

The personal net worth of an individual or family is used as the basis for a calculation of an approximate estate tax liability and related expenses. Generally the net worth can be expected to increase over a period of years, so it is common practice to project that growth over a period of years at a selected rate of interest. A growth rate of 6% is most commonly recommended although different rates can occasionally be used if appropriate. At older ages or impaired risks, a lower rate is usually used. The appropriate amount of coverage is typically 50% of the projected estate.

Ages	Years
Up to 55	20
56-70	15
71 Up	1x Estate Value*

*Standard or better risk classes, otherwise individual consideration

Non-Working Spouse

Will generally consider for an amount equal to the amount in force and applied for on the breadwinner depending on the circumstances of the case up to a maximum of \$1,000,000 unless there is also an estate tax need. Additional insurance can be considered with cover memo or other documentation outlining any special needs.

Business Insurance

A business insurance questionnaire (BIQ) should be submitted on all business cases, and a well constructed cover letter explaining the purpose of coverage and how the face amount was determined is very helpful. Copies of company financial statements and buy/sell agreements may be necessary to help value a business to determine the appropriate amounts of coverage on each owner for business continuation cases.

Key Person

Generally 5-10X earned income plus bonuses if paid regularly as part of a company bonus plan. If key person has an ownership interest in the company, the appropriate percentage of company net income can be added to his income. Some states such as New York have specific requirements to qualify as a key person.

Creditor Insurance

Generally up to a maximum of 75% of a secured loan unless agreement has a loan provision calling the loan due upon the death of owner/key person.

Buy/Sell

Coverage should usually be applied for or in force on all major active partners. A business insurance questionnaire should be fully completed in all cases unless a detailed cover letter and company financial statements are submitted with the application. Each partner's ownership percentage should be included and coverage should be proportional to the ownership interest.

Company financial statements and copies of a buy/sell agreement are sometimes necessary to help establish a reasonable market valuation for the company and may be ordered at the underwriter's discretion.

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UNITED OF OMAHA LIFE INSURANCE COMPANY COMPANION LIFE INSURANCE COMPANY

MUTUAL of OMAHA AFFILIATES

Life Insurance Underwriting Guidelines



As of: Sept. 2009

*Ask your underwriter about the
Fit underwriting credit program!*

1-800-775-7896

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Initial Underwriting Requirements – Fully Underwritten

Age:	Amount Being Underwritten: Effective 2-1-09							
	\$50,000 \$99,999	\$100,000 \$249,999	\$250,000 \$499,999	\$500,000 \$750,000	\$750,001 \$1,000,000	\$1,000,001 \$5,000,000	\$5,000,001 \$10,000,000	Over \$10,000,000
Under 18	Nonmedical	Nonmedical*	N/A	N/A	N/A	N/A	N/A	N/A
18-30	Nonmedical	Nonmedical Blood & HOS MVR Phy Data	Nonmedical Blood & HOS MVR Phy Data	Paramed Blood & HOS MVR	Paramed Blood & HOS MVR	Paramed Blood & HOS PHI MVR	Paramed Blood & HOS IR MVR	Paramed Blood & HOS IR MVR
31-35	Nonmedical	Nonmedical Blood & HOS MVR Phy Data	Nonmedical Blood & HOS MVR Phy Data	Paramed Blood & HOS MVR	Paramed Blood & HOS MVR	Paramed Blood & HOS PHI MVR	Paramed Blood & HOS IR MVR	Paramed Blood & HOS IR MVR
36-45	Nonmedical	Nonmedical Blood & HOS MVR Phy Data	Nonmedical Blood & HOS MVR Phy Data	Paramed Blood & HOS MVR	Paramed Blood & HOS MVR	Paramed Blood & HOS EKG PHI MVR	Paramed Blood & HOS EKG IR MVR	Paramed Blood & HOS EKG IR MVR
46-55	Nonmedical	Paramed Blood & HOS	Paramed Blood & HOS	Paramed Blood & HOS	Paramed Blood & HOS EKG	Paramed Blood & HOS EKG PHI MVR	Paramed Blood & HOS EKG IR MVR	MD Exam Blood & HOS TEKG IR MVR
56-60	Nonmedical APS	Paramed Blood & HOS	Paramed Blood & HOS	Paramed Blood & HOS EKG	Paramed Blood & HOS EKG	Paramed Blood & HOS EKG PHI MVR	Paramed Blood & HOS EKG IR MVR	MD Exam Blood & HOS TEKG IR MVR
61-65	Nonmedical APS	Paramed Blood & HOS	Paramed Blood & HOS EKG	Paramed Blood & HOS EKG	Paramed Blood & HOS EKG	Paramed Blood & HOS EKG PHI MVR	MD Exam Blood & HOS EKG IR MVR	MD Exam Blood & HOS TEKG IR MVR
66-70	Nonmedical APS	Paramed Blood & HOS	Paramed Blood & HOS EKG	Paramed Blood & HOS EKG	Paramed Blood & HOS EKG	MD Exam Blood & HOS EKG PHI MVR	MD Exam Blood & HOS EKG IR MVR	MD Exam Blood & HOS TEKG IR MVR
71 and Over	Nonmedical APS	Paramed Blood & HOS	MD Exam Blood & HOS EKG PHI	MD Exam Blood & HOS EKG PHI MVR	MD Exam Blood & HOS EKG PHI MVR	MD Exam Blood & HOS EKG PHI MVR	MD Exam Blood & HOS EKG IR MVR	MD Exam Blood & HOS TEKG IR MVR

Key:
APS – Attending Physician's Statement
Blood & HOS – Blood & Urine collection
EKG – Electrocardiogram
IR – Inspection Report
MD Exam – Blood & HOS w/M.D. Exam (Specializing in Internal Medicine)
MVR – Motor Vehicle Report (Ordered from H.O.)
Nonmedical – A Fully Completed Application
Paramed – Long Form Exam (form MLU21727)
PHI – Personal History Interview taken over telephone (Ordered from H.O.)
Phy Data – Physical Data by Paramed, Blood Pressure and HT/WT
TEKG – Treadmill Electrocardiogram

Paramedical Vendors:
(800) 635-1677 American Para Professional Systems, Inc. (APPS)
(877) 933-9261 ExamOne
(800) 872-3674 Examination Management Services, Inc. (EMSI)
(800) 765-1010 Hooper Holmes (Portamedic)
(800) 898-3926 Superior Mobile Medics

Minimum Underwriting Requirements Effective February 1, 2009

*APS required on juveniles over \$100,000

UNITED OF OMAHA LIFE INSURANCE COMPANY

Omaha, NE 68175

COMPANION LIFE INSURANCE COMPANY

Home Office: Lynbrook, NY 11563

mutualofomaha.com

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panels 1 & 2

Preferred Underwriting Criteria

	Preferred Plus	Preferred	Standard Plus
NICOTINE Tobacco	No nicotine x 60 months Occasional cigar, nontobacco available with negative HOS ¹ 12 cigars per year	No nicotine x 36 months Occasional cigar, nontobacco available with negative HOS ¹ 12 cigars per year	No nicotine x 12 months Occasional cigar, nontobacco available with negative HOS ¹ (Note: std plus tobacco is an available class)
FAMILY HISTORY (Does not apply if age 65 and older.)	No death of a parent or sibling prior to age 65 due to Cancer, Heart Disease or Diabetes	No death of parent or sibling prior to age 60 due to Heart Disease or Diabetes	No death of parent or sibling prior to age 60 due to Heart Disease
BLOOD PRESSURE	Treatment allowed with good control No reading in past year >135/85	Treatment allowed with good control Avg BP <145/90	Treatment allowed with good control Avg BP <152/90
CHOLESTEROL Averaged 3 cholesterol levels over past 12 months. If available	Cholesterol Level ≤250 and Cholesterol Ratio ≤5.0 Treatment allowed	Cholesterol Level ≤275 and Cholesterol Ratio ≤6.0 Treatment allowed	Cholesterol Level ≤300 and Cholesterol Ratio ≤7.0 Treatment allowed
ALCOHOL & DRUG	Allowed after 15 years	Allowed after 10 years	Allowed after 5 years
MEDICAL HISTORY	No history of CAD, DM or Cancer (Basal Cell skin cancer and superficial squamous cell allowed)	No history of CAD, DM or Cancer (Basal Cell skin cancer and superficial squamous cell allowed)	No history of CAD, DM or Cancer (Basal Cell skin cancer and superficial squamous cell allowed)
DRIVING RECORD	No convictions for DWI, DUI or reckless driving within the last five (5) years and no more than two (2) moving violations within the last five (5) years	No convictions for DWI, DUI or reckless driving within the last five (5) years and no more than two (2) moving violations within the last three (3) years	No convictions for DWI, DUI or reckless driving within the last five (5) years and no more than two (2) moving violations within the last three (3) years
AVOCATION²	No participation ever in any hazardous occupation, avocation or sport	No hazardous activities within the past 2 years	Flat extras are allowed
AVIATION³	No flying as a private pilot or crewmember unless aviation exclusion	No flying as a private pilot or crewmember unless aviation exclusion	No flying as a private pilot or crewmember unless aviation exclusion (IFR private pilots allowed if standard)
CRIMINAL RECORD	No felony convictions in the past 10 years	No felony convictions in the past 10 years	No felony convictions in the past 10 years
BUILD	No exception	No exception	If Male, up to 5 pounds allowed if all other criteria are met
PROFILE AND HOS	10% allowed in any one test if determined to be of no medical significance	10% allowed in any one test if determined to be of no medical significance	If all Standard Plus criteria are met and the laboratory values do not warrant any debits, Standard Plus is allowed

¹An occasional cigar is no more than 12 cigars per year

²Limited scuba diving as a part of vacation or other occasional occurrence is acceptable if depth of dive does not exceed 100 feet

³Some types of commercial aviation may be acceptable based on manual

In addition to the criteria above, there must not be any other significant health problems. Final risk determination will be made by the United of Omaha Life Insurance Company or Companion Life Insurance Company home office underwriter.

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Build Chart – Fully Underwritten

	Preferred Plus	Preferred	Standard Plus	Standard	+25	+50	+75	+100	+125	+150	+200	+250	+300
Height	Weight												
4 Feet													
8"	125	134	143	152	170	184	190	197	204	212	221	230	240
9"	131	140	150	157	176	189	195	202	209	216	225	234	244
10"	135	145	155	162	182	194	201	208	214	222	231	240	249
11"	141	150	160	168	187	199	207	214	220	228	237	245	254
5 Feet	146	156	167	174	193	205	213	220	226	235	244	253	262
1"	152	163	175	180	199	211	218	226	233	242	250	259	269
2"	158	169	180	186	205	215	223	232	239	248	257	266	277
3"	164	174	185	191	213	220	228	238	246	255	264	275	284
4"	169	179	190	197	221	225	235	245	252	261	270	281	292
5"	174	184	195	204	226	231	242	251	259	268	277	286	299
6"	180	190	200	210	232	239	248	258	268	276	285	293	308
7"	185	195	205	217	239	245	254	265	275	284	293	303	316
8"	189	199	210	223	246	251	262	274	283	291	300	312	324
9"	195	205	215	230	254	258	270	282	291	299	309	319	331
10"	200	211	222	236	262	266	278	289	300	307	316	327	340
11"	206	217	227	243	269	274	287	298	307	315	325	339	349
6 Feet	211	222	234	250	275	281	292	305	315	322	333	348	356
1"	217	229	242	257	282	289	300	313	322	330	340	355	365
2"	222	234	247	264	289	296	308	321	331	339	349	366	374
3"	228	240	252	272	296	303	317	329	339	348	358	376	383
4"	233	245	258	279	301	311	325	338	348	357	367	385	394
5"	239	251	264	287	307	319	334	347	357	366	376	393	402
6"	246	258	270	298	313	328	345	358	366	375	385	405	413
7"	252	264	276	302	320	336	354	367	375	384	394	413	422
8"	–	–	–	310	327	345	363	376	385	395	405	422	431
9"	–	–	–	317	335	352	372	385	395	406	415	435	444
10"	–	–	–	325	343	359	382	395	407	418	427	444	462

APS Guidelines

- An APS will be ordered for cause (significant medical history) in all cases
- For ages 56 and up and face amounts of \$500,000 and up, an APS will be obtained for routine physicals, lab work, EKG's, etc. if MD seen within 1 year
- At any age, an APS will be requested when MD seen within 3 months of application unless the office visit was for a minor impairment
- An APS should be available for anyone 65 and over

An APS may not be needed for health history of treated hypertension or treated cholesterol *if*

- Applying for standard risk classes through Preferred; Note: Preferred Plus is not available without an APS
- Under age 56
- Face amount of \$500,000 or less
- Amount in force and applied for does not exceed company retention

Note: This is a guide.

Specifics of an individual case may warrant an APS to determine the appropriate risk classification

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