

- EXISTING ABR: ABR's that are currently on the policy.
- UPDATED ABR: input the existing ABR's along with any new ABR's being added. This field is 4 bytes long. The system will automatically sort this field (numbers followed by letters).
  - To delete all ABR's, input “#” in the first byte.
- Press Enter to transmit.
- Edits will only be performed for the new ABR's being added.
- Edits with PF5 TO OVERRIDE could generate multiple times if the edit is applicable to more than one of the ABR's being added. Edits without PF5 cannot be overridden.

- If you need to change what you input in the UPDATED ABR field, the program will restart the editing process.
- If you get a CK INDX error, you need to manually check for other inforce policies with ABR on the insured to be sure the maximum limit is not exceeded. If the maximum will not be exceeded, input a “Y” in this field to override the CK INDX error. If the maximum is exceeded, do not add ABR. Details regarding the maximum limits are included in the sections they are applicable to.
- For situations where ABR cannot be added via ABRC due to a hard edit, ASFN can be used if you have the ok to add the ABR. Refer to the document “ASFN FOR ABR Fields”. It is important to follow the document since we have more fields than just the ABR Version field that need to be updated.

## System Results

- The ABRC trx reads the Plan Structure file for state approval. The field used for this depends on whether it is a pension or non-pension policy:
  - Pension = State of Execution
  - Non-pension = Residence state.

**NOTE:** The on-line edit for state approval can be overridden starting 04/20/2015. **Do not override unless you know there is a valid reason.** For example, NL ABR 2 for all states is marked not approved because we no longer do new issue with ABR 2. If you need to add ABR 2 to an older NL product that is eligible, you can override the state approval edit as long as the state is not CT, MA, MD, OR, PA, TX, VA (these states never approved ABR 2).
- Automatically updates the ABR Version field, Generation fields, ABR State fields and ABR Issue Date fields.
- Generates a letter which is routed to the who code of the person doing the trx.
- Generates data pages for most situations. Effective 4/20/2015, the ABR rider name will be in words versus numbers as follows:
  - ABR-Terminal Illness (PA state has special wording for NL data pages not through xPression)
  - ABR-Chronic Illness
  - ABR-Critical Illness
  - ABR-Critical Injury
- The rider name for NL ABR 2 will display on the data page if it is LA or UT state. NL ABR 1 does not display on the data page.
- Generates rider pages based on the ABR state field which populates as follows:
 

Pension = State of Execution  
 Non-pension = Residence state.

Compuset output: Rider pages for all ABR’s on the policy.  
 xPression output (2018 term and future products): Rider pages only for the ABR’s added.

## Trad Life Online Edits

Edits with ABR # are applicable to multiple ABR's. The # will be replaced with the ABR # or letter.

- ABR # CK INDX / TOTDB W/ABR<=1,000,000 IF OK USE CHECK DB=Y – this applies to ABR 8, B, C. Refer to the applicable section of this document for further details on the manual face amount checking required. If the maximum is not exceeded, put a “Y” in the CHECK DB field.
- ABR # INVALID FOR PRODUCT – the ABR # or letter is not available for the product. Refer to the product eligibility chart.
- ABR # NOT ALLOWED DOI < 2004 – not allowed because the date of issue is prior to 2004. ABR's that can generate this edit are 3,8,9,A,B,C.
- ABR # NOT ALLOWED IN NY FOR THIS PRODUCT – there are product restrictions for NY for adding after issue. ABR's that can generate this edit are ABR 3,9,A.
- ABR # NOT ALLOWED ON GI – not allowed on guaranteed issue (medical code is G or T). ABR's that can generate this edit are NL 4,5 and LSW 1,2.
- ABR # NOT ALLOWED ON GI OR SI – not allowed on guaranteed issue or simplified issue (medical codes G,T,U). ABR's that can generate this edit are 3,7,8,9,A,B,C.
- ABR # NOT ALLOWED ON REINSURED POLICY – for NL & LSW term, if the Reinsurance company is not % or blank, you will get this edit for ABR 3,8,9,A,B,C.
- ABR # NOT ALLOWED ON SUBSTANDARD POLICY – check the rating rules in the section titled “Restrictions for ABR 3, 7, 8, 9, A, B, C”.
- ABR # NOT STATE APPROVED; CHECK VRSN; IF OK PF5 TO OVERRIDE – make sure you are adding the correct ABR for the state. This edit will generate if the Plan Structure File is marked not approved. If the state is VA, ABR 9 & A are no longer approved. Effective 02/27/2017, VA is approved for the compact versions ABR B and C.
- ABR # TERM POLICY – NOT ALLOWED DUE TO DOI – both NL and LSW term policies have date restrictions for ABR's 3, 8, 9, A, B, C as stated below:
  - NL term policies, if date of issue is prior to 09/24/2012 – not allowed.
  - LSW term policies, if Part A/B date is prior to 01/01/2012 – not allowed.
- ABR 3 NOT ALLOWED FOR NJ.
- ABR 7 NOT ALLOWED AFTER ISSUE; PF5 TO OVERRIDE – this should not be overridden unless an exception has been made.
- ABR A CHECK OIR TRUE AGE MAX 64 FOR CA; PF5 TO OVERRIDE – policy has OIR, state is CA. You must manually calculate the age of the other insured. If over age 64 as of their last birthday, Critical Injury cannot be added. If they are not over age 64, it is ok to override this edit.
- ABR A NOT ALLOWED MAX AGE 64 FOR CA – primary insured or surviving joint insured is over age 64 so Critical Injury cannot be added. This is for the state of CA.
- ABR N/A WITH THE REINSURANCE COMPANY – this is an old edit which generates if the Reinsurance Company is 8.
- CANNOT ADD SAME ABR OPTION MULTIPLE TIMES – the same ABR number or letter has been repeated in the Updated ABR field.
- CHECK ABR AVAILABILITY FOR PRODUCT - if adding the old NL ABR 1 or 2 and the product is not eligible. See page 4 for eligible products.
- CK INDX / TOTDB W/ABR<=1,500,000 IF OK USE CHECK DB=Y – this is applicable to the 7 special states (combination terminal/chronic) and also NJ for NL ABR

4&5. Refer to the applicable section of this document for further details on the manual face amount checking required. If the maximum is not exceeded, put a “Y” in the CHECK DB field.

- DELETE ABR 1 REQUIRED IF ABR B OR C ADDED IN CT – for CT, stand alone Terminal must be terminated/removed if either ABR B or C is being added.
- DELETE ABR 3 REQUIRED IF ABR 9 OR B ADDED – when adding ABR 9 or B, the old critical ABR 3 has to be terminated/removed from the policy.
- DELETE ABR 4 REQUIRED IF ABR B OR C ADDED IN CT – for CT, stand alone Terminal must be terminated/removed if either ABR B or C is being added.
- DELETE ABR 8 REQUIRED IF ABR B ADDED - when adding ABR B, the old terminal/critical ABR 8 has to be terminated/removed from the policy.
- DELETE ABR 9 REQUIRED IF ABR B ADDED - when adding ABR B, the non-compact version of Critical Illness (ABR 9) has to be terminated/removed from the policy.
- DELETE ABR A REQUIRED IF ABR C ADDED - when adding ABR C, the non-compact version of Critical Injury (ABR A) has to be terminated/removed from the policy.
- ETI – ABR NOT ALLOWED – policy is in ETI, ABR cannot be added.
- FACE AMT < 25,000; PF5 TO OVERRIDE – this edit exists for ABR 1,2,4, 5 if non-pension and the base face amount is below 25,000. This can be overridden for scenarios where riders or internal paid up brings the total face amount over 25,000.
- GUARANTEED ISS POL – ABR NOT ALLOWED – this is an old edit and is based on kind code (for older products).
- INVALID STATE CODE – if the state code in the record is not a valid #, you will need to correct it. The state code is needed for state approval checking. Non-pension uses Residence State. Pension uses Execution State.
- JOINT 2<sup>ND</sup> TO DIE – ABR NOT ALLOWED
- MINIMUM TOTAL FACE AMOUNT IS 100,000 – face amount is below the 100,000 minimum. See rules for ABR 7 in this document.
- NJ IL USE ABR 8 IF UNDERWRITING APPROVED CRITICAL: PF5 TO OVERRIDE – old edit that will no longer generate because we have a new edit for ABR B & C.
- NJ MUST HAVE EITHER 1 OR B OR C WITH 2 – if adding LSW ABR 2 (chronic) in NJ, policy must have either ABR 1, B or C that covers terminal illness.
- NJ MUST HAVE EITHER 4 OR B OR C WITH 5 – if adding NL ABR 5 (chronic) in NJ, policy must have either ABR 4, B or C that covers terminal illness.
- NJ TERMINATE OLD ABR 4 – when adding ABR 5 (chronic) in NJ and the policy has the pre 2006 terminal (ABR 4) and they also have terminal coverage under either ABR 8, B or C, the ABR 4 must be removed.
- NJ TERMINATE OLD ABR 4; NEXT DAY ADD 4&5 – when adding ABR 5 (chronic) in NJ and the policy has the pre 2006 terminal (ABR 4) and no other terminal coverage, the ABR 4 must be terminated on day 1. On day 2, add both 4&5. See section on NJ Special Rules.
- NO CHANGE ENTERED – Updated ABR field is the same as the Existing ABR field which means you haven’t made any change.

- NO PLAN IN PLAN STRUCTURE FILE – a Plan Structure File record does not exist. For example, you could get this if you attempted ABR 7 on an LSW policy.
- NOT ALLOWED IF BOTH INSUREDS ALIVE – one insured must be in a dead status before adding ABR to a joint policy.
- NY – HAS MAILING FOR ABR # BEEN DONE? PF5 TO OVERRIDE – this edit pertains to ABR 3, 9, A and the state is NY. Before we can add these riders after issue in the state of NY, we are required to do a mailing to all eligible NY policyholders to notify them of the availability of these riders. As of 4/20/2015, the mailing has NOT been done, therefore, you should not be adding these riders after issue in NY.
- NY MUST HAVE 4 IF 3/7/9 OR A IS PRESENT – NY requires that the policy have terminal illness (ABR 4) if Chronic (7), Critical Illness (3 or 9) or Critical Injury (A) is being added.
- USE ABR 2 IF KS LA MD MN UT WA OR – generates if you attempt to add ABR 1 (terminal) for the 7 special states for LSW products.
- USE ABR 5 IF KS LA MD MN UT WA OR – generates if you attempt to add ABR 4 (terminal) for the 7 special states for NL products.
- USE ABR B/C IF UNDRWRITING APPRVD CRIT ILLNESS OR INJURY;PF5 TO OVERRIDE – generates if you are adding stand alone Terminal in a state that has a combination terminal/critical illness or terminal/critical injury rider. If critical illness and injury were denied, it is ok to override this edit and add the stand alone Terminal.
- WARNING – PENSION FACE AMT < 25000 – this is an old edit that goes back to the first ABR for NL. Should be rare to get this one.
- WARNING – SIGNATURE CODE = A OR D OR M; PF5 TO OVERRIDE – check to be sure ABR can be added and you have the proper signatures. Do not override until you have determined all is ok.
- WARNING:CHECK AVAILABILITY FOR PENSION-PF5 TO OVERRIDE – check the rules for pension availability before proceeding. Current rules do not allow adding ABR after issue for pension policies.

## **Adding ABR in Vantage**

COMMAND		ACCELERATED BENEFIT ADD			
CO NL	ORIG SPH	POL NO	LS0349427	SEC ID	PROD U1 STAT REQ N
*** ABR PLAN INFORMATION (GA-1)					
ABR RIDER TYPE	abr9	QUALIFIED ID Y			PR = primary AD = additional insured or joint. If AD, Directory ID field is required.
COV INS	pr	DIRECTORY ID			IND CODE
PLAN CODE		NO OF UNITS			
PROD GRP		REINS N	NON STD		
COV EFF DATE	08082015	PREM EFF DATE	08082015		
COV TERM DATE		PREM TERM DATE		RATE EFF DATE	
UND EFF DT		EXCLUSION IND	N	UND BASIS CODE	ADV IND N
APP DATE		** OVERRIDES **			SP CASE N
GUIDELINE LVL PREM		GUIDELINE SGL PREM			
MINIMUM TARGET		Surr TARGET			
PYMT TARGET		COMM TARGET			
RISK LOAD DUR ADJ		RISK COMM DUR ADJ			
** ABR USER AREA **					
(01)		(02)			
(03)		(04)			
(05)		(06)			
(07)		(08)			
(09)		(10)			
NXT TRX GA	VER	PROD U1 CL/POL	LS0349427	SEC ID	CO NL OVRD N

## Explanation of Fields

- ABR RIDER TYPE – input the code that matches with the ABR being added. This is a complete list and includes ABR's that are no longer used.  
blank = NL ABR2 (1997 ABR)
- ABR3 = NL Critical Illness
- ABR4 = NL Terminal Illness
- ABR5 = NL Chronic (for the 7 special states this is Terminal/Chronic)
- ABR7 = NY Covered Chronic Illness (NL only)
- ABR8 = Terminal/Critical for NJ (NL/LSW) and IL (NL only)
- ABR9 = Enhanced Critical Illness (NL/LSW). **Input last if multiple ABR's added on same day.**
- ABRA = Critical Injury (NL/LSW)
- ABRB = Terminal/Critical Illness (NL/LSW) **Input last if multiple ABR's added on same day.**
- ABRC = Terminal/Critical Injury (NL/LSW)
- ABR1 = LSW Terminal Illness
- ABR2 = LSW Chronic (for the 7 special states this is Terminal/Chronic)
- ABR3 = LSW Critical Illness
- COV INS:
  - PR if adding ABR to the primary insured.
  - AD if adding ABR to an additional insured (OIR rider). This is done when an ABR claim is received for the other insured.
  - AD if adding ABR to a joint insured. One insured has to be in a dead status before you can add ABR on a joint policy.
- DIRECTORY ID – only input this if the COV INS field is AD.  
The directory id for the additional insured or the joint insured can be found on the NI screen.

- COV EFF DATE and PREM EFF DATE - must be a monthiversary. Do not future date.
- F1 to transmit.

If the Residence State is not the state you need for the ABR you are adding and there are valid reasons for changing it, refer to the section below “Changing the Residence State”.

## Other Transactions

- EM trx needs to be done to generate the data pages and rider pages. The system generates all of the policy pages. You can throw away what isn’t needed.
- Rider pages are based on the Rider Issue State on the ABR segment.

### Changing the Residence State

If the Residence State is not the state you need for the ABR you are adding and there are valid reasons for changing it, follow the steps below:

1. **Day 1:** Change the RES ST field on CI3 and input the TRANS EFF DT field on CI3A with **1 day prior to the effective date on the GA1 screen.**  
NOTE: Start on CI1, press F4 on CI1 through CI3A to get the trx accepted.
2. **Day 1:** In the same cycle, do the trx to add ABR. When the two trxs process in batch, the CI change goes through first and the ABR add trx will pick up the new Residence State.
3. **Day 2 (if needed):** If you have a scenario where the Residence State needs to be changed back to what it was, do the change the next day and use an **effective date 1 day after the rider add effective date.**

## System Results

- Vantage state approval table is checked to determine if the rider has been approved. The Residence State field is used for state approval. Exception: if the base policy Issue State is MT, then state approval has to use MT.
- Rider Issue State field is automatically populated with the state from the Residence State field (unless MT). This field is on the ABR segment which can be accessed through the NI hierarchy. If the Residence State needs to be changed, refer to the section below “Changing the Residence State”.
- Data pages – both NL and LSW list ABR riders on the cover page under Additional Benefits. Starting 4/20/2015 the names will be as follows:  
ABR - Terminal Illness (PA state has special wording for NL data pages not through xPression)  
ABR - Chronic Illness  
ABR - Critical Illness  
ABR - Critical Injury

- NL has separate ABR data pages for ABR 9, A, B, C (insured and additional insureds). Other NL ABR's do not have separate ABR data pages, however, see additional information for data pages through xPression.
- LSW has separate ABR data pages for all ABR's (insured and additional insureds).
- xPression Data Pages are programmed differently. Multiple Terminal Illness data pages will generate if the policy has multiple Terminal Illness coverages. Also for NL, for the 7 special states that have the combination Terminal/Chronic rider, data pages will generate for Terminal Illness and Chronic Illness.

## **Vantage Online Edits**

- A089 INVALID PLAN CODE – plan code did not get populated by the system. Recheck your ABR TYPE and make sure it is correct for the company and product.
- D257 ABR ALREADY EXSTS ON POLICY
- H431 NAME INSURED STATUS INVALID – applicable to joint. One insured must be in a dead status before ABR can be added.
- R197 RIDER ALREADY DEFINED ON POLICY – make sure the COV INS field is correct for the person you are attempting to add ABR for.
- R425 DIR FILE ID NOT ON FILE – the directory id you input is not correct. You can find the directory id on the NI screen. On a joint policy, this edit is in batch only.
- W02U R/B NOT APPROVED IN STATE – has the state approved the ABR you are adding? If it has not approved, your trx will error in batch with X315.
- W15U ACTIVE ABR IS PRESENT
- W48U POLICY MISSING LTC OR ABR – if you are adding ABR to an additional insured and the primary does not have that ABR Type, you will get this edit. Do not override. Base policy must have the ABR before it can be added to an additional insured.
- W70U RATED BASE/OIR ABR NOT AVAILABLE – check the ratings on the insured and other insureds (if any). ABR 2, 3, 5, 7, 8, 9, A, B, C have rating restrictions. Refer to applicable section in this document for full details.
- W72U NJ CHECK RULES FOR CHRONIC – NJ policy does not have terminal coverage and Chronic is being added. Some type of terminal coverage must be added if Chronic is added. Refer to NJ Special Rules section in this document for full details.
- W73U CHECK INDX-DB W/ABR =< 1,500,000 – applicable to KS, LA, MD, MN, UT, WA and OR for both NL and LSW products. Also applies to NJ for NL ABR 4 & 5. Check Index to find out if the insured or other insureds have other policies that are in force and have ABR. If multiple policies with ABR, add up total coverage to be sure they are not exceeding the maximum limit of 1,500,000. Refer to the applicable section in this document for full details.
- W74U NJ CHECK RULES FOR ABR4 – for NJ on NL products. The pre 2006 Terminal ABR 4 needs to be terminated and a current terminal added. See NJ Special Rules section of this document for full details.
- W75U CHECK REINSURANCE – this edit has been turned off. It used to generate if there was a reinsurance segment (any kind of reinsurance).
- W80U REINS ABR3/8 N/A – this edit exists for ABR 3 & 8, but it has been turned off for now since it is the underwriter that will determine if ABR can be allowed on a reinsured policy. The more commonly used reinsurance does allow ABR.



- W585 PEN/NON PEN IND EQLS P – alerts you that the policy is under a pension plan. Check pension plan rules for availability. Current rule is do not add ABR after issue to pension policies.
- W888 USE ABR5 IF KS LA MD MN UT WA OR – generates if you attempt to add ABR 4 (terminal) for the 7 states for NL products. The only scenario where it is ok to add ABR 4 in these 7 states is if you are adding ABR to an OIR at claim time and the primary insured has ABR 4.
- W889 USE ABR2 IF KS LA MD MN UT WA OR – generates if you attempt to add ABR 1 (terminal) for the 7 states for LSW products. The only scenario where it is ok to add ABR 1 in these 7 states is if you are adding ABR to an OIR at claim time and the primary insured has ABR 1.
- W892 ONLY USE BLANK RDR TYPE IF ABR 97 – warning in case you left ABR TYPE blank by mistake. Ok to override if you need to add the 1997 ABR (plan code 970297) to Uniflex, old Ultra, old Paragon. These are the early UL products.
- W991 NJ IL USE ABR8 IF UNDRWRITING OK – this will no longer generate because ABR B and C are approved so we will no longer be adding ABR 8.
- W992 CHECK INDX-DB W/ABR <= 1,000,000 – this is applicable to ABR 8, B, C. These ABR's require manual checking of the total face amount for inforce policies with ABR's to be sure the maximum is not exceeded for the primary or any other insureds. Refer to the applicable section in this document for full details.
- W993 NOT ALLOWED ON GI OR SI – ABR 3, 7, 8, 9, A are not allowed on guaranteed issue or simplified issue. Do not override this unless an exception has been made.
- W994 MINIMUM FACE 250,000 REQUIRED – applicable to ABR 7 for AssurePlus, Ultra Select and LifeCycle Solution. Do not override this unless an exception has been made.
- W995 MINIMUM FACE 100,000 REQUIRED – applicable to ABR 7 for FlexLife. Do not override this unless an exception has been made.
- W996 MAX FACE EXCEEDED ABR 7 N/A – this edit has been removed effective 02/27/2017 since we are no longer imposing this restriction for ABR 7.
- W997 NOT ALLOWED ON GI – ABR is not allowed on guaranteed issue. Do not override unless an exception has been made.
- W998 NY ABR 4 REQD WITH 3, 7, 9 OR A – NY requires that the policy have terminal illness (ABR 4) if Chronic (7), Critical Illness (3 or 9) or Critical Injury (A) is being added. Ok to override if you have also input your add trx for ABR4.
- WA02 USE ABR9 STATE HAS APPROVED - check that you are adding the correct ABR. ABR 9 is approved for the state.
- WA03 USE ABRB STATE HAS APPROVED – check that you are adding the correct ABR. ABR B is approved for the state.
- WA04 USE ABRB/C IF UNDRWR OK CRITICAL – this edit will generate if stand alone Terminal (ABR 1 or ABR 4) is added for a state that has the combination terminal/critical illness or terminal/critical injury. If the underwriter denied both critical illness and injury, you can override the edit and add the stand alone terminal.
- WA05 NY – HAS ABR MAILING BEEN DONE? - this edit pertains to ABR 3, 9, A and the state is NY. Before we can add these riders after issue in the state of NY, we are required to do a mailing to all eligible NY policyholders to notify them of the availability

of these riders. As of 4/20/2015, the mailing has NOT been done, therefore, you should not be adding these riders after issue in NY.

- X01A NOT ALLOWED POLICY HAS OIR – ABR 7 is not allowed if the policy has OIR's (Other Insured Rider).
- X213 INVALID ABR TYPE – make sure you are using the correct ABR TYPE for the company and product that you have. You can also get this edit if the system was not able to populate the RATE EFF DATE field because you are attempting to add ABR to an additional insured and the primary insured does not have that ABR TYPE.
- X315 RIDER/BEN NOT APP FOR RES STATE – If the state is MD or VA and ABR 9 or ABR A is added, this error will generate. ABR 9 and A are no longer available for MD and VA. MD and VA now use the compact versions ABR B and C.
- X561 NOT ALLOWED MAX AGE 64 FOR CA - primary insured, surviving joint insured, or other insured is over age 64 so Critical Injury cannot be added. This is for the state of CA.
- XA07 RIDER N/A DUE TO PREMIUM CLASS – if the premium class is Z, this edit generates if adding ABR 2, 3, 5, 9, A, B, or C. This is because premium class Z has a built in rating that is greater than 200%.

## **Batch Edits**

Some of these edits are warnings, but the business area wants them to generate in batch which means they will show on the A02 Update Error report. This is a double check to be sure the processor did not override by mistake.

- R197 RIDER ALREADY DEFINED ON POLICY – make sure the COV INS field is correct for the person you are attempting to add ABR for.
- R425 DIR FILE ID NOT ON FILE – the directory id you input is not correct. You can find the directory id on the NI screen. On a joint policy, this edit is in batch only.
- W70U RATED BASE/OIR ABR NOT AVAILABLE – check the ratings on the insured and other insureds (if any). ABR 3, 7, 8, 9, A, B, C have rating restrictions. Refer to the applicable section in this document for full details.
- W80U REINS ABR3/8 N/A – this has been turned off in on-line and batch.
- W888 USE ABR5 IF KS LA MD MN UT WA OR – this edit should not be overridden unless you are adding ABR to an OIR at claim time and you have to match the ABR that the primary insured has.
- W889 USE ABR2 IF KS LA MD MN UT WA OR – this edit should not be overridden unless you are adding ABR to an OIR at claim time and you have to match the ABR that the primary insured has.
- W991 NJ IL USE ABR8 IF UNDRWRITING OK – this will no longer generate because ABR B and C are approved so we will no longer be adding ABR 8. If the underwriter denied Critical coverage, it is ok to get this in batch. If they did approve Critical, the wrong ABR was added and the policy needs to be corrected.
- W993 NOT ALLOWED ON GI OR SI – ABR 3, 7, 8 are not allowed on guaranteed issue or simplified issue. Do not override unless an exception has been made.
- W997 NOT ALLOWED ON GI – ABR is not allowed on guaranteed issue. Do not override unless an exception has been made.

- WA02 USE ABR9 STATE HAS APPROVED - the state has approved ABR 9 so you should not be adding ABR 3 unless there is a valid reason.
- WA03 USE ABRB STATE HAS APPROVED - the state has approved ABR B so you should not be adding ABR 3 or 8 unless there is a valid reason
- WA04 USE ABRB/C IF UNDRWR OK CRITICAL – stand alone Terminal was added for a state that has approved ABR B (terminal/critical illness) and ABR C (terminal/critical injury). If the underwriter denied critical illness and critical injury, it is ok to get this warning in batch.  
If they did approve critical illness or critical injury, the stand alone Terminal should not have been added. Instead ABR B and/or ABR C should have been added depending on what the underwriter approved them for.
- X315 RIDER/BEN NOT APP FOR RES STATE – this is a batch edit for state approval. If you overrode W02U on-line and the state has not approved the rider, the trx will error with X315.

## Related Resources

[ABR Rules and Eligibility](#)

## Article Details

<b>Last Reviewed</b>	<b>Intended Audience</b>	T&CC Staff
<b>Reviewed by</b>	<b>Business Block</b>	Title and Contract Change

REFORMATTED

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