

Allianz
Long Term Care

Underwriting Guide

FutureSelect PlusSM



Underwriting mission statement

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

Underwriting philosophy

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

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

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

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

Information hotline: 800.950.7372 (press 2 for New Business, then 2 for LTCi)

When to use the information hotline:

- Prequalifying a client relative to health status and/or functionality.
- Clarification of this underwriting guide with respect to individual client's health.

Information hotline information

5:00 a.m. – 4:00 p.m. Pacific time (Monday – Thursday)

5:00 a.m. – 3:00 p.m. Pacific time (Friday)

Underwriting guidelines are subject to change.

Please see the Web site at www.allianzlife.com for the most current version of the Underwriting Guide.

Premium rate classes

Long term care insurance from Allianz offers three premium rate classes. Each rate class is separated by a premium difference of 25%. From our most attractive rate to our highest premium rate, the maximum premium difference is 50%. To avoid difficulties of placing a policy with a higher premium than was originally quoted, pay special attention when quoting the rate class. Should your client qualify for a better rate than quoted, the appropriate (better risk) class will be issued.

Preferred Plus – P+ (very healthy, nonsmoking applicants)

- Nonsmoker for the last 12 months (other tobacco use acceptable)
- Weight is within Preferred Plus/Preferred range on height/weight chart
- Consultation with a physician within the last 12 months
- No history of treatment for serious health conditions (such as heart or circulatory disorder, diabetes or rheumatoid arthritis)
- Applicant may be receiving regular treatment of a preventative nature only, for example:
 - Medications such as thyroid replacement, hormonal supplements, digestive aids, mild sedatives, or analgesics and anti-inflammatory medications acceptable
 - High blood pressure that is kept in normal range (140/90) with medication is acceptable, but cannot be in combination with heart disorders

Preferred – P (healthy smokers or nonsmokers with weight problems or significant but stable health history). One or more of the following apply:

- Smoker in otherwise good health
- Weight is within Preferred Plus/Preferred range on the height/weight chart
- Medical history of cardiac or circulatory disorder, diabetes, rheumatoid arthritis, or cancer with excellent prognosis
- Under regular treatment with prescription medications listed on the prescription drug guide for conditions not eligible for Preferred Plus rates

Standard – S (for applicants with significant health problems due to health history, weight problems, smoking status or a combination of these factors)

- Under treatment for a serious health condition which requires close medical supervision (such as ulcerative colitis or emphysema)
- History of a combination of serious conditions (such as heart and lung disease, or rheumatoid arthritis with coronary artery disease)

Individual Consideration – IC

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

Previously declined cases

We encourage you to call the information hotline at 800.950.7372 to discuss previously declined cases or any case that involves complex medical histories.

Underwriting requirement chart

The underwriting requirement chart below indicates the requirements needed based on age and benefits. The Home Office will always take care of ordering all requirements. However, you may order requirements directly from the approved vendors with prior authorization from the Home Office.

PHIs are all done by the Home Office.

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

Underwriting specifics

NOTE: Any applicant age 65 through 71, who has not been seen by a physician within the last two years will not be considered for coverage until they have completed a physical at their own expense or completed a face-to-face assessment along with a complete blood profile (BLDPF) and a Home Office urine specimen (HOS). Any applicant age 72 through 84, who has not been seen by a physician within the last two years will not be considered for coverage until they have completed a physical at their own expense. The extent of the exam is minimally a “screening physical exam” although the physician may have other requirements for someone not current on health maintenance. Allianz does not have a form for this purpose; documentation of clinical information is the responsibility of the physician. Additional requirements may be ordered at the underwriter’s discretion, based on individual health history.

Personal history interview (PHI)

Telephone interviews will be ordered on all applicants age 69 and under. Medical questions such as height, weight, or blood pressure would be examples of questions asked during telephone interviews since medical records are not ordered on every applicant. Specific questions related to activities of daily living (ADLs) such as “Does the applicant have difficulty dressing?”, will be asked on every interview. The interview may also include some cognitive tests.

Face-to-Face assessments (F/F)

Face-to-Face Assessments will be ordered on all applicants age 70 and older. On joint applications where one applicant is age 70 or older and the second applicant is younger, the assessment will be done on both applicants. The interview will include a memory test.

Attending physician’s statement (APS)

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

Policy dating

When applicants are approved for coverage, a policy will be issued with an effective date that may range from 60 days prior to the application date (backdating to save age) to 30 days after the underwriting approval date (dating to match the renewal date of the policy being replaced). Backdating and post-dating must be requested on the application and will be accommodated if there are no reservations regarding the applicant’s health status.

When at least two months’ premium is paid with the application and the policy is approved as applied for, the application date becomes the policy effective date. If the policy is issued other than as applied for, or if less than two months’ premium is submitted, the policy receives a current date. However, current dating will not be required if it would change the issue age.

Field selection

- Eligible issue ages for FutureSelect PlusSM are 18-84, based on age at last birthday.
- Use the build chart to help determine the proper rating class based on build.
- Review the prescription drug guide. Certain medications indicate that your client has an uninsurable condition. This guide will assist you in determining your client's impairments.
- Review the impairment guide to determine your client's risk class and insurability. If your client qualifies for a better risk class than applied for, we will issue the better risk class.
 - Does the applicant function independently? How does she/he get around?
 - Can the applicant perform, without assistance, the activities of daily living (ADLs)?
 - Does the applicant have any difficulty with the instrumental activities of daily living (IADLs)? Any inability to perform ADLs or IADLs may indicate a functional or cognitive limitation, which is not acceptable.
- ADLs include bathing, eating, dressing, toileting, continence, and transferring.
- IADLs include housekeeping, laundry, shopping, cooking and meal preparation, handling personal finances, and using the telephone.
- Is the applicant currently receiving disability or worker's compensation payments? This may indicate a current or recent history that typically excludes the applicant from insurability at the present time.

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

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

- 1) The underwriter will put a note on the Web site when the decision has been made.
- 2) The underwriter will include a clinical reason for a decision other-than-applied-for, when possible, within the data privacy guidelines of HIPAA.
- 3) The underwriter will send a letter to the applicant with the decision other-than-applied-for, with a copy to the agent. The wording of this letter must also comply with data privacy regulations. We cannot, by law, release any information that the applicant did not disclose to us.
- 4) The underwriter will place a phone call to the agent with the decisions other-than-applied-for; a message will be left, if voicemail is available; a message will include the name, telephone number, and extension of the underwriter.
- 5) After receiving and reviewing the underwriting information, and referencing the guidelines printed in this document, the agent may call the underwriter for information to clarify the decision, if the wording of the above-mentioned communication is not clear.
- 6) The underwriter will reference the information that was disclosed by the applicant together with the underwriting guides on which the decision was made.
- 7) The underwriter will tell the agent if this is a permanent decision, or when a re-application would be appropriate.
(Note: reapplication is subject to full underwriting, and premium will be based on attained age)
(Note: a permanent decision stops any further underwriting processing at this point)
- 8) For the most positive outcome of ongoing discussions about the decision, it is recommended that the agent discuss the letter with the client. In many cases the client is aware of the clinical information in the medical records.
- 9) The client is encouraged to speak to his/her physician about health conditions that are unknown to the client, or about dates of clinic visits mentioned in the letter without an associated health condition.
- 10) The underwriter can submit a letter to the physician within 21 days, citing the clinical reason for the decision; in order to do that, we must receive a written request from the client to do so (see #12 and #13 below).
- 11) If the physician has additional information that is substantially different from what is in the medical records, that information may be submitted in writing to Allianz Life Insurance Company of North America within 30 days from the date on the letter of risk class change or declination.
- 12) Be sure to include the application number on all correspondence.
- 13) The fax number to receive such communication is 763.582.6002.
- 14) The underwriter will consider the additional information relative to the extent of risk, and will send written response reporting the outcome of that additional information within 21 days.
- 15) Remember that insurance medicine differs from clinical medicine in the implications of particular health conditions. The element of risk to the insurance company may not present exactly the same concern in the clinical setting.
- 16) If the review of additional information results in a change in coverage, the new business department will issue new coverage pages for the contract.

Height and weight chart

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

Automatic decline list

Conditions listed below are uninsurable. An application should not be submitted if an applicant has any of the following conditions:

ADL (activity of daily living) deficits
Adult day care services, current
AIDS, acquired immune deficiency syndrome
Alzheimer's disease, memory loss, dementia
Ambulation difficulty (i.e. unsteadiness, instability, shuffling gait, use of assistive devices)
Amyotrophic lateral sclerosis (ALS, Lou Gehrig's disease), progressive neurological disease
Aplastic anemia, bone marrow failure syndrome
Arteriosclerosis obliterans, plaque formation of vessels to the extent of closure of blood vessels
Assisted living residence, current
Ataxia, lack of muscle coordination, due to a disorder in the brain
AV malformation, cerebral; congenital malformation of arteries and veins in the brain
Avascular necrosis, current; collapse of bones or joints due to loss of blood supply

Brain impairments, disorders not identified elsewhere in this guide, most commonly damage as a result of trauma
Buerger's disease; inflammation of the blood vessels, with subsequent clotting disorder

Cardiomyopathy, disease of heart muscle – see impairment guide
Catheter use, urinary; a tube passed into the urinary bladder to allow the withdrawal of urine
CCRC living, current; Continuous Care Retirement Community
Cerebral palsy, congenital neurologic disorder – see impairment guide
Charcot-Marie-Tooth disease, disorder of nerves of feet, legs, hands
Cirrhosis of the liver, gradual destruction of the ability of the liver to function
Claudication, pain in legs associated with poor circulation
Collagen disease, an autoimmune rheumatic disorder affecting tendons, bones, and tissues
Confusion, mental disorientation
Creutzfeld-Jakob syndrome, a disease of the nervous system that causes dementia
CREST syndrome, slowly progressive systemic sclerosis
Cystic fibrosis, congenital disease of the lungs

Dementia, memory impairment or loss, all types of cognitive deficits
Dermatomyositis, chronic weakness and inflammation of muscles
Dialysis, kidney/renal, the process of mechanically removing metabolic wastes from the blood
Disabled, and/or collecting disability or workers compensation benefits

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

Falls (multiple, or with dizziness, syncope, cerebrovascular or neurological disorders, or gait disturbance)
– see impairment guide

Automatic decline list (continued)

Hemiplegia, paralysis of one side of the body

Hemophilia, blood clotting disorder

Hepatitis, chronic, active; inflammation of the liver

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

Home care services, current or within the past 12 months

Hydrocephalus, abnormal accumulation of fluid in the brain

Huntington's chorea, inherited disease of the nervous system

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

Kidney transplant, surgical implantation of donor kidney to replace one removed from a person

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

Lupus, systemic lupus erythematosus (SLE), chronic inflammation caused by autoimmune disease

Medicaid recipient

Memory loss, cognitive deficit, dementia

Mental retardation

Multiple myeloma, cancer of white blood cells

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

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

Myasthenia gravis, neurological disorder with progressive muscle weakness

Myelodysplasia, myelodysplastic syndrome, bone marrow dysfunction

Nephrosclerosis, hardening of kidney tissue

Nephrotic syndrome, progressive kidney damage with kidney failure

Nursing home confinement, current or recent

Obesity (as defined in build chart) – frequently a co-morbid with other conditions such as diabetes, high blood pressure, heart disease or arthritis

Organ transplant (except cornea – see impairment guide)

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

Osteomyelitis, current; infection involving bone tissue

Osteoporosis with compression fractures, falls; osteoporosis involves loss of bone mass

Oxygen use

Paralysis, loss of function

Parkinson's disease, chronic progressive neurologic disease with progressive muscle weakness

Peripheral vascular disease, disease of the blood vessels outside of the heart and brain – see impairment guide

Pick's disease, dementia that begins at a young age

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

Automatic decline list (continued)

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

Psychosis, mental illness in which the person loses touch with reality

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

Quadriplegia – paralysis, all four limbs

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

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

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

Schizophrenia, chronic, often debilitating mental illness

Scleroderma, progressive hardening and tightening of skin and connective tissues

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

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

Shy-Drager syndrome, progressive disorder of nervous system

Social Security disability recipient

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

Transplant (except cornea – see impairment guide)

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

Walker use

Wheelchair use

Major surgeries, as a general rule, must wait six months before the individual can be considered for this product except for those conditions specified otherwise in the impairment section of this guide.

Prescription drug guide

Drugs prescribed for uninsurable conditions

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

Drug name	Alternate name for same drug	Condition for which drug is most commonly used
Actimmune	Interferon gamma 1-b	Chronic granulomatous disease
Abilify	Aripiprazole	Schizophrenia
Akineton	Biperiden	Parkinson's disease
Aldazine	Mellaril, Thioridazine	Mental health
Amantadine	Symmetrel	Parkinson's disease
Anexsia	Hydrocodone	Narcotic
Antabuse	Disulfiram	Alcoholism
Aranesp	Darepeotinalfa	Chronic anemia; renal failure
Aricept	Donepezil	Dementia
Artane	Novohexidyl	Parkinson's disease
Auranofin	Ridaura	Gold therapy/rheumatoid arthritis
Avonex	Interferon, Rebif	Multiple sclerosis
Azathioprine	Imuran	Multiple sclerosis
AZT	Retrovir, Apo-zidovudine	HIV
Baclofen	Lioresal	Multiple sclerosis
Bendopa	Levodopa	Parkinson's disease
Benztropine mesylate	Cogentin	Parkinson's disease
Betaseron	Interferon, recombinant	Multiple sclerosis
Bromocriptine	Parlodel	Parkinson's disease
Carbidopa	Sinemet	Parkinson's disease
Chlorpormazine	Thorazine	Mental health
Cladribine	Leustatin	Luekemia, multiple sclerosis
Clorazil	Clozapine	Mental health
Clozapine	Clorazil	Mental health
Codeine	N/A	Pain control
Cogentin	Apo-benzotropine	Parkinson's disease
Cognex	Tacrine HCl	Dementia
Combivir	Zidovudine, Lamivudine	HIV
Comtan	Entacapone	Parkinson's disease
Copaxone	Glatiramer acetate	Multiple sclerosis
Dantrium	Dantrolene	Multiple sclerosis
Dantrolene	Dantrium	Cerebral palsy, multiple sclerosis
Darvocet	N/A	Pain control
Demerol	N/A	Pain control
Deprynel	Eldepryl	Dementia, parkinson's disease
Dilaudid	N/A	Pain control
Donepezil	Aricept	Dementia
Dopar	Levodopa	Parkinson's disease
Duragesic	N/A	Pain control
Edrophonium Chloride	Tensilon	Myasthenia gravis
Eldepryl	Selegiline	Parkinson's disease
Endocet	Percocet	Narcotic pain medication
Epogen	Erythropoietin	Renal failure, anemia of chronic disease
Eulexin	Flutamide	If for recurrent prostate cancer
Exelan	N/A	Dementia
Fluphenazine	Prolixin	Mental health
Flutamide	Eulexin	Cancer
Glatiramer acetate	Copaxone	Multiple sclerosis
Gold compound	Ridaura	Rheumatoid arthritis

Prescription drug guide (continued)

Drugs prescribed for uninsurable conditions

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Drug name	Alternate name for same drug	Condition for which drug is most commonly used
Haldol	Haloperidol	Mental health
Hydergine	DHE45	Dementia
Hydrea	Hydroxyurea	Cancer
Hydrocodone	N/A	Narcotic
Imuran	Azathioprine	Myasthenia gravis, multiple sclerosis
Infergen	Interferon alfacon-1	Hepatitis, other liver disease
Insulin	N/A	Diabetes
Interferon	Betaseron	Multiple sclerosis
Intron-A	Interferon	If used for recurrent cancer
Invirase	N/A	HIV
Larodopa	Levodopa	Parkinson's disease
Leukine	Sargramostim, GM-CSF	Bone marrow transplants
Leuprolide	Lupron	If used for recurrent cancer
Levodopa	Carbidopa, Sinemet	Parkinson's disease
Lioresal	Baclofen	Multiple sclerosis
Lorcet, Lortab	Hydrocodone	Pain control
Loxapine	Loxitane	Mental health
Lupron	Leuprolide	If for recurrent prostate cancer
Mellaril	Thioridazine	Mental health
Mestinon	Edrophonium	Myasthenia gravis
Methadone	Dolophine	Pain control
Mirapex	Pramipexide	Parkinson's disease
Moban	Molindone	Mental health
Morphine	N/A	Pain control
MS-Contin	N/A	Pain control
Naltrexone	N/A	Alcohol abuse
Namenda	Memantine	Dementia
Narcotics, regular use	N/A	Pain control
Navane	Thiothixene	Mental health
Neostigmine	Prostigmin	Myasthenia gravis
Neumega	Oprelvekin	Severe blood disease
Neupogen	G-CSF, filgrastim	Blood cell enhancer in advanced disease
Niloric	N/A	Dementia
Norgesic	N/A	Pain control
Nubain	N/A	Pain control
Olanzapine	Zyprexa	Mental health
Orap	Pimozide	Mental health
Oxycodone	Oxycontin, Proladone	Pain control
Parlodel	Bromocriptine	Parkinson's disease
Pegasys	Peginterferon alfa-2a	Chronic hepatitis C
PEG-Intron	Peginterferon alfa-2a	Chronic hepatitis C
Percocet	Endocet	Pain control
Percodan	N/A	Pain control
Pergolide	Permax, Celance	Parkinson's disease
Permitil	Prolixin	Mental health
Perphenazine	Trilafon	Mental health
Pimozide	Orap	Mental health
Procrit	Erythropoietin	Renal failure; anemia of chronic disease
Prolixin	Fluphenazine	Mental health

Prescription drug guide (continued)

Drugs prescribed for uninsurable conditions

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

Drug name	Alternate name for same drug	Condition for which drug is most commonly used
Prostigmin	Neostigmine	Myasthenia gravis
Rebetron	N/A	Hepatitis C
Regonol	N/A	Myasthenia gravis
Revia	N/A	Alcohol abuse
Requip	N/A	Parkinson's disease
Retrovir	N/A	HIV
Ridaura	Auranofin	Rheumatoid arthritis
Rilutek	Riluzole	ALS
Risperdal	Risperidone	Mental health
Roferon-A	Recombinant, rIFN-A	AIDS, cancer, hepatitis, leukemia
Roxicet	N/A	Pain control
Saquinavir	N/A	HIV
Selegiline	Eldepryl	Dementia, Parkinson's disease
Serentil	Mesoridazine	Mental health
Seroquel	Quetiapine	Mental health
Sinemet	Carbidopa, Levodopa	Parkinson's disease
Solganal	Gold therapy	Rheumatoid arthritis
Sparine	N/A	Mental health
Stadol	N/A	Pain control
Stelazine	Trifluoperazine HCl	Mental health
Symmetrel	Amantadine	Parkinson's disease
Synapton	N/A	Dementia
Tacrine	N/A	Dementia
Talwin	Pentazocine	Pain control
Taractan	N/A	Mental health
Tasmar	Tolcapone	Parkinson's disease
Tensilon	Edrophonium	Myasthenia gravis
Thioridazine	Mellaril	Mental health
Thiothixene	Navane	Mental health
Thorazine	Chlorpromazine	Mental health
Tindal	N/A	Mental health
Tolcapone	Tasmar	Parkinson's disease
Tramadol	Ultram	Narcotic pain control
Trichlorfon	N/A	Dementia
Trifluoperazine	Stelazine	Mental health
Trilafon	Perphenazine	Mental health
Ultracet	Tramadol	Pain control
Ultram	Tramadol	Narcotic pain control
Vicodin	N/A	Narcotic pain control
Zeldoz	N/A	Mental health
Zidovudine	N/A	HIV
Ziprasidone	N/A	Mental health
Zyprexa	Olanzapine	Mental health

Impairment guide

The following is a list of medical conditions intended to give you a general idea of whether your client is insurable, and if so, whether they qualify as Preferred Plus, Preferred, or Standard risk. In general, we will decline coverage if surgery or physical therapy has recently been completed or is pending. The waiting period for the specific condition needs to be met in order for coverage to be considered. Call the information hotline at 800.950.7372 if you have any questions regarding your client's insurability.

PREF+ = Preferred Plus
PREF = Preferred

STD = Standard
DEC = Decline

IC = Individual Consideration

A

Abscess

resolved or 6 months after surgery.....PREF+
brain or abdominal present or surgery within
6 months.....DEC

Addison's Disease

Controlled on medications, no complications, after 24 months'
stabilityPREF
With any other clinical conditions, any hospitalizations, after
2 years stabilityIC
All others.....DEC

ADL Deficits

any mental or physical limitation in
performing the activities of daily living.....DEC

Adult Day Care.....DEC

Assisted Living.....DEC

AIDS.....DEC

Alcoholism

recovered more than 5 years, in good healthPREF
recovered more than 3 years, in good healthSTD
within 3 years or with relapsesDEC

ALS (Lou Gehrig's Disease).....DEC

Alzheimer's Disease.....DEC

Amaurosis Fugax

after 2 years.....STD
within 2 years or multiple episodesDEC

Amnesia (Transient Global Amnesia)

one episode, after 2 years with a complete
neurological work-up that is within normal limitsSTD
multiple episodesDEC

Amputation

due to trauma in pastSTD
due to disease.....DEC

Anemia

mild.....PREF+
moderate.....PREF
severe or with complications or defined as AplasticDEC

Aneurysm

abdominal, 1 year after surgery with good recoveryPREF
cerebral, with or without surgeryDEC
presentDEC

Angina Pectoris

controlled on medications.....PREF
occasional episodes, or with history
of myocardial infarctionPREF/STD
not well controlledDEC
smokerDEC

Angioplasty

after 6 months, with good resultsPREF
with stent, after 6 months, with good results.....PREF
with history of myocardial infarctionPREF/STD
with poor exercise tolerance or smokeDEC

Anxiety Disorder

mild (occasional medication)PREF+
moderate (regular or multiple medications)PREF/STD
severe and/or with functional impairments.....DEC

Aplastic Anemia.....DEC

Arnold-Chiari MalformationDEC

Arteriosclerosis

mildPREF
moderateSTD
severeDEC

Arthritis (Degenerative or Osteoarthritis)

mild.....PREF+
moderate.....PREF
severe but without physical limitations.....STD
with physical limitations or surgery anticipated.....DEC

Arthritis (Rheumatoid)

mild, controlled with non-steroid medicationsPREF
moderate to severe, requiring multiple
medicationsSTD/DEC
with physical limitations or surgery anticipated.....DEC

Impairment guide (continued)

Asthma

mild, infrequent attacks.....PREF+
 moderate, controlled with medications (no steroids).....PREF
 severe, required multiple medications or steroids.....STD/DEC
 in combination with circulatory disease.....DEC
 smoker.....DEC

Ataxia.....DEC

Atrial Fibrillation

history of, not on medication, 6 months since last episode.....PREF
 currently on medication, 6 months since last episode.....STD/DEC
 described as chronic.....DEC

B

Back Disorder

not disabling.....PREF+
 herniated disc (unoperated) or compression fracture.....PREF/STD
 disabling or surgery needed.....DEC

Barrett's Esophagus

biopsy done within the last two years
 with favorable results.....PREF/STD
 all others.....DEC

Bell's Palsy

history of, complete recovery.....PREF+
 with residual facial paralysis.....PREF/STD

Benign Prostatic Hypertrophy.....PREF+

Bipolar Disorder, manic depression.....STD

stable 4 years, well controlled on medication; a single
 hospitalization > 10 yrs ago acceptable, fully independent,
 no cognitive limitations

Bladder Disease

history of infection, complete recovery.....PREF+
 chronic infections, without incontinence.....PREF/STD
 with incontinence.....DEC

Bladder Prolapse (Cystocele)

surgically repaired.....PREF+

Blood Pressure, Elevated (Check list for cardiac medications)

mild and no other cardiac condition.....PREF+
 in combination with other cardiac condition.....PREF/STD
 not controlled.....DEC

Braces

without ADL limitation.....STD, No HHC
 with ADL limitation.....DEC

Brain Impairments.....DEC

Brain Tumor

after 5 years following removal, benign, no residuals.....STD
 all others.....DEC

Breast Disorders

fibrocystic disease.....PREF+
 breast cancer present.....DEC
 breast cancer with surgery (See Cancer)

Bronchiectasis

asymptomatic, nonsmoker, minimum 3 years since
 diagnosis with no periods of disability.....STD, No HHC
 all others.....DEC

Bronchitis

acute attack.....PREF+
 multiple attacks.....PREF
 chronic.....STD/DEC

Buerger's Disease (Thromboangiitis Obliterans).....DEC

Bypass Surgery (Heart)

after 6 months, with good results.....PREF
 with history of myocardial infarction.....PREF/STD
 with poor exercise tolerance post surgery.....DEC
 smoker.....DEC

C

Cancer (90-day elimination period)

early stage, 1 year since last treatment.....PREF+/PREF
 moderate stage, after 1 year since last treatment.....STD
 with metastasis or less than 1 year since
 last treatment, or recurrent cancers.....DEC

Cancer (Lymphoma or Lung) (90-day elimination period)

after 10 years since recovery with no recurrences.....STD
 less than 10 years since recovery.....DEC

Cane Use.....DEC

Cardiomyopathy.....DEC

Carotid Artery Disease

mild, asymptomatic or corrected by
 enarterectomy, no history of TIA or stroke.....PREF
 moderate, asymptomatic, with
 other heart or circulatory disorder.....STD/DEC
 severe; symptomatic or smoker.....DEC

Carpal Tunnel Syndrome

no resulting disability.....PREF+

Cataracts

present but not requiring surgery.....PREF+
 recovered after surgery.....PREF+
 surgery scheduled or anticipated.....DEC

Catheter (Current use; indwelling).....DEC

Cerebral Palsy.....DEC

Impairment guide (continued)

Cerebral Vascular Accident (CVA)

after 5 years , no neurological residuals.....	STD
within 5 years.....	DEC
smoker	DEC

Charcot-Marie-Tooth Disease.....DEC

Cholecystitis, Cholelithiasis (Gallbladder)

after surgery.....	PREF+
surgery anticipated	DEC

Chronic Fatigue Syndrome.....DEC

Chronic Obstructive Pulmonary Disease (COPD)

mild	PREF
moderate.....	STD
severe	DEC
with smoking within the last year.....	DEC

Cirrhosis, Liver.....DEC

Claudication.....DEC

Colitis, Ulcerative

mild	PREF
moderate.....	STD
severe	DEC

Collagen Disease.....DEC

Colostomy

2 years after surgery, no complications.....	STD
with complication	DEC

Confusion.....DEC

Congestive Heart Failure (CHF)

controlled with medications for 1 year	IC
current.....	DEC

Coronary Artery Disease

mild	PREF
moderate, or with history of myocardial infarction.....	PREF/STD
severe, with poor exercise tolerance.....	DEC
smoker	DEC

CREST Syndrome (Scleroderma).....DEC

Creutzfeldt-Jakob Syndrome.....DEC

Crohn's Disease

mild	PREF
moderate.....	STD
severe	DEC

Cushing's Syndrome (from steroid use)

current.....	DEC
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Cushing's Syndrome

(due to Pituitary, Adrenal or Ectopic Tumors)

corrected by surgery, no complications or secondary disorders such as high blood pressure, osteoporosis or diabetes	STD
present	DEC

Cystic Fibrosis.....DEC

D

Dementia

all forms.....	DEC
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Depression

mild	PREF+
moderate	PREF/STD
severe	DEC

Dermatomyositis.....DEC

Diabetes Mellitus, Non-Insulin Dependent (diet or oral medications)

good control	PREF
fair control, overweight, or ex-smoker	STD
poor control or with other serious health conditions, diabetic complications or smoker.....	DEC

Dialysis.....DEC

Disabled – Collecting Disability Benefits.....DEC

Discoid Lupus

definite diagnosis, limited to skin with no other symptoms of Lupus	PREF
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Diverticulitis, Diverticulosis

mild, well controlled by diet or medication	PREF+
moderate.....	PREF
surgery anticipated	DEC

Drug Dependency or Abuse

after 5 years, in good health.....	PREF
after 3 years, in good health.....	STD
within 3 years or with relapses	DEC

Duodenal Ulcer

history of, occasional medication	PREF+
chronic and/or bleeding.....	PREF/STD
surgery scheduled	DEC

E-G

Emphysema (no oxygen use)

mild	STD
moderate.....	STD/DEC
severe or with oxygen use	DEC
with smoking in the last year	DEC

Impairment guide (continued)

Endarterectomy (without stroke)

after 6 months, no other circulatory disorder.....PREF
with other circulatory disorder or cardiac
conditionSTD/DEC

Endocarditis

fully recovered, 1 episode, no residuals;
rate will depend on severity of related
heart disorderPREF/STD
recurrentDEC

Epilepsy

good control on medication.....PREF
seizure within 2 yearsSTD/DEC
seizure within 1 year, poor control or cause unknownDEC

Epstein-Barr Syndrome (confirmed diagnosis of infectious mononucleosis)

6 months after full recoveryPREF+/PREF/STD
current or less than 6 months after full recoveryDEC

Esophageal VaricesDEC

Esophagitis.....PREF+/PREF

Falls

multiple within the last 12 monthsDEC
due to dizziness, gait disturbance or TIA.....DEC

Fibromyalgia

mild, not affecting functional abilityPREF
moderateSTD, No HHC/DEC
severe, with functional limitations; use
of steroids or narcoticsDEC

Fuch's Corneal DystrophyDEC

Gallbladder (Cholecystitis, Cholelithiasis)

post surgeryPREF+

Gastroesophageal Reflux Disease (GERD).....PREF+

Gilbert's Disease (confirmed diagnosis).....PREF+

Glaucoma

mild to moderate visual impairmentPREF+/PREF
severe impairment affecting ADLs.....DEC

Goiter

post surgery or post radioactive iodine treatment
benign, on thyroid replacementPREF+

GoutPREF+

Guillian-Barre Syndrome

under 65 years old, 2 years past full recovery with
no residualsPREF
with residualsSTD/DEC
less than 2 years past full recovery,
diagnosed at age 65 or over, or with relapsesDEC

H

Hashimoto's Thyroiditis

controlled by thyroid replacement therapyPREF+

Headaches

migraine.....PREF+

Heart Murmur

functional, no medication requiredPREF+
well controlled with medicationPREF
causing physical limitationsDEC

Heart Attack (After 6 months)

stable and fully functionalPREF
with history of bypass surgeryPREF/STD
with chronic angina (chest pain)DEC
smokerDEC

Heart Valve Replacement

good recovery 1 year post surgeryPREF
with other cardiac disorderSTD/DEC
surgery scheduled or anticipatedDEC

HemiplegiaDEC

HemochromatosisDEC

Hemophilia.....DEC

Hepatitis (A, B & C)

hepatitis A, 6 months after full recoveryPREF+
hepatitis B, 1 year after full recovery,
normal liver enzymes.....PREF
hepatitis C, any historyDEC
described as chronic active or due to alcoholDEC
active, any type.....DEC

Herniated Disc

post surgery with good recoveryPREF+
present, no surgery planned.....PREF
surgery scheduled or needed.....DEC

Hiatal HerniaPREF+

Hip Replacement

one hip or both hips, after 6 months, fully
ambulatory, mild or no arthritis in other joints.....PREF+
recovered after 6 months, with
moderate arthritis in other jointsPREF
recovered after 6 months, with severe arthritis
in other joints but without physical limitations.....STD
surgery scheduled or needed or physical limitationsDEC

HIV PositiveDEC

Hodgkin's Lymphoma (90-day elimination period)

after 10 years since recovery with no recurrenceSTD
less than 10 years since full recoveryDEC

Impairment guide (continued)

Home Care Service

within the last year.....DEC

Huntington's Chorea.....DEC

Hydrocephalus.....DEC

Hyperparathyroidism

surgically corrected.....PREF+

minimally elevated calcium levels, stable, closely monitored, no related disorders such as high blood pressure, impaired renal function, or bone

demineralization.....PREF/STD

all others.....DEC

Hypertension

controlled with medication, with readings in normal range.....PREF+

in combination with cardiac condition.....PREF

not controlled.....DEC

Hyperthyroidism

controlled by medication.....PREF+/PREF

not adequately controlled.....STD/DEC

Hypothyroidism.....PREF+

Hysterectomy

nonmalignant.....PREF+

I – K

Ileostomy

two years after surgery, no complications.....STD

less than 2 years after surgery or with complications.....DEC

Incontinence

stress incontinence.....PREF+

all others.....DEC

Inner Ear Disorder

mild (occasional medication).....PREF+

moderate (regular medications).....PREF

severe.....STD/DEC

Intestinal Obstruction

surgery corrected, no malignancy.....PREF+/PREF

within 2 years; resulting in colostomy.....STD

surgery scheduled or needed.....DEC

Irritable Bowel Syndrome.....PREF+

ITP (Idiopathic Thrombocytopenic Purpura).....DEC

Kidney Dialysis.....DEC

Kidney Infection

treated and recovered.....PREF+

chronic.....STD/DEC

Kidney Stones (Nephrolithiasis).....PREF+

Kidney Transplant

5 years after transplant, no episodes of rejection,

no complications.....STD, No HHC

all others.....DEC

Knee Replacement

one or both knees, after 6 months, fully ambulatory,

mild or no arthritis in other joints.....PREF+

recovered after 6 months, with moderate

arthritis in other joints.....PREF

recovered after 6 months, with severe arthritis in

other joints but without physical limitations.....STD

surgery scheduled or needed or physical limitations.....DEC

L – M

Labyrinthitis

controlled by medication.....PREF+/PREF

not controlled.....DEC

Lacunar Infarct

after 2 years, no neurological residuals.....STD

within 2 years.....DEC

smoker.....DEC

Lambert-Eaton Syndrome (Myasthenia Syndrome).....DEC

Leukemia (90-day elimination period)

after 10 years since recovery with no recurrences.....STD

less than 10 years since full recovery.....DEC

Lung Cancer (90-day elimination period)

after 10 years since recovery with no recurrences.....STD

less than 10 years since full recovery or a current smoker.....DEC

Lupus (Discoid)

definite diagnosis, limited to skin with

no other symptoms of Lupus.....PREF

Lupus Erythematosus (SLE).....DEC

Lyme Disease

stage 1, early, localized infection, 3 months

after full recovery.....PREF+

current or less than 3 months after full recovery,

any stage.....DEC

all others (stage 2 and 3) 3 months after full

recovery rate and residual symptoms.....STD/DEC

Lymphoma (90-day elimination period)

after 10 years since full recovery with no recurrence.....STD

less than 10 years since full recovery.....DEC

Macular Degeneration

stable, without vision impairment.....PREF+

stable, mild vision impairment.....PREF

progressive or with moderate to severe visual

impairment.....DEC

Impairment guide (continued)

Medicaid RecipientDEC

Melanoma

early stage or moderate stage after 5 years.....PREF+/PREF

early stage, after 2 yearsPREF

moderate stage, after 2 years.....STD

advanced stage, or recurrentDEC

Memory LossDEC

Meniere's Disease

controlled with medication.....PREF+

not controlled.....DEC

Mental Retardation.....DEC

Mitral Valve Prolapse

asymptomatic, no other cardiac condition.....PREF+

symptomatic, or with other cardiac condition.....PREF/STD

Multiple MyelomaDEC

Multiple SclerosisDEC

Muscular DystrophyDEC

Myasthenia GravisDEC

Myocarditis

acute, full recovery, not related to any other

health condition.....PREF+

Myocardial Infarction (after 6 months)

stable and fully functionalPREF

with bypass surgery, or angioplasty.....PREF/STD

with chronic angina (chest pain)DEC

smokerDEC

N – P

Narcolepsy

well controlledPREF/STD

not controlled.....DEC

Narcotic Use

within 3 years.....DEC

(after 3 years, rate will depend on the status of the condition for which it was prescribed)

Nephrolithiasis (Kidney Stones).....PREF+

NephrosclerosisDEC

Neurogenic BladderIC

Neuropathy

stable 3 years, mild numbness of fingers or feet, fully functional, stable or improved, non-progressive.....PREF

stable 1 year, mild numbness of fingers or feet, fully functional, stable or improved, non-progressive.....STD

2 years stability when due to peripheral nerve entrapment or injury, minimal or no residual functional impairment, no surgery recommended or planned.....STD

major symptoms, or use of narcotics, or with impaired function, or if due to diabetesDEC

Any peripheral neuropathy demonstrating a progressive clinical course single extremity neuropathy stable

2 years, or others.....IC, usually DEC

Nursing Home Confinement

within the last year.....DEC

Organic Brain SyndromeDEC

Organ Transplant (except cornea)DEC

Osteomyelitis

single bone and single attack, recovered after 6 monthsPREF

multiple bones and attacks.....DEC

Osteoporosis

mild, no fractures (bone density tests will help

determine rate)PREF+/PREF

with fractures or spinal problems.....DEC

Oxygen UseDEC

Pacemaker

normal cardiac output, no other heart disorder.....PREF

with other cardiac disorder.....STD/DEC

Paget's Disorder

pelvis only, not crippling.....PREF/STD

all others.....DEC

Pancreatitis

single episode, complete recovery after 1 yearPREF

multipleDEC

episodes related to alcohol.....DEC

Paralysis.....DEC

Parkinson's DiseaseDEC

Pericarditis

acute, full recovery, no other cardiac

or related health conditionPREF+

Peripheral Vascular DiseaseDEC

Impairment guide (continued)

Phlebitis

single attack, fully recovered	PREF+
edema but fully ambulatory	PREF/STD
requiring aid to ambulate	DEC

Physical Therapy

within the last 6 months	DEC
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Pick's Disease

.....	DEC
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Polycystic Kidney Disease

.....	DEC
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Polymyalgia Rheumatica

controlled with medications	PREF/STD
not controlled or with functional limitations	DEC

Polyps

surgically removed, benign	PREF+
malignant	See Cancer

Prostate Disorders

prostatitis or benign prostate surgery	PREF+/PREF
prostate cancer, present	STD/DEC
prostate cancer with surgery	See Cancer

PSA (Elevated)

if proven benign by biopsy/ultrasound	PREF+/PREF
if 8 or above not proven benign	DEC

Psychosis

.....	DEC
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Pulmonary Fibrosis

.....	DEC
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R – Z

Reflex Sympathetic Dystrophy

current	DEC
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Restless Leg Syndrome

controlled with medication	PREF+
multiple medications	STD/DEC

Retinitis Pigmentosa

.....	DEC
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Retinopathy (Diabetic)

.....	DEC
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Rheumatoid Arthritis

mild, controlled with non-steroidal drugs	PREF
moderate to severe, requiring multiple medications	STD/DEC
with functional limitations	DEC

Sarcoidosis

no progression for at least 1 year, mild symptoms, no treatment, nonsmoker	PREF
affecting eyes or other organs, moderate symptoms that require treatment	STD/DEC
progressive or smoker	DEC

Schizophrenia	DEC
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Scleroderma (CREST Syndrome)	DEC
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Sclerosing Cholangitis	DEC
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Seizure Disorder

2 years after last seizure, good control on medication	PREF
seizure within 2 years	STD/DEC
seizure within last year, poor control or cause unknown	DEC

Shunts (brain, heart or kidney)	DEC
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Shy-Drager Syndrome	DEC
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Skin Cancer (not Melanoma)

external, basal or squamous cell cancer	PREF+
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Sleep Apnea

mild or currently using CPAP	PREF
with cardiac disorder and/or overweight	STD
not well controlled	DEC

Smoking Cigarettes

without medical problems	PREF
with chronic upper respiratory infections	STD
with diabetes, heart or lung disease	DEC

Social Security Disability Recipient	DEC
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Spinal Stenosis

mild, non-progressive	PREF
all others	STD, No HHC/DEC

Stent (Cardiac)

after 6 months, with good results	PREF/STD
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Stroke

after 5 years, no neurological residuals	STD
within 5 years, or multiple	DEC
smoker	DEC

Subarachnoid Hemorrhage

successful surgical treatment, no residual effect, no cognitive deficit, no other vascular or neurological diseases, nonsmoker, stable 1 year	STD
present, unoperated, stable 4 years	IC
within 1 year, or untreated, or with any cardiovascular or neurological disorders, or cognitive impairment	DEC

Subdural Hematoma

successful surgical treatment, no residual effect, no cognitive deficit, no other vascular or neurological diseases, nonsmoker, stable 1 year	STD
present, unoperated, stable 4 years	IC
within 1 year, or untreated, or with any cardiovascular or neurological disorders, or cognitive impairment	DEC

Impairment guide (continued)

Subclavian Steal Syndrome

if caused by bony compression and relieved, stable 6 months;
no functional impairmentPREF+
caused by bony compression which has been relieved and
stable 6 months, with minimal current symptoms,
no functional impairment.....PREF
if due to bony compression, not resolved, mild symptoms,
no functional impairment.....STD
if due to cardiovascular or neurological disorder(s), or with
any functional impairment regardless of cause, or surgery
recommended or pending.....DEC

Surgeries plannedDEC

Risk class will be determined by specific conditions.
Waiting period is generally 6 months after discharge
from further follow-up by M.D.

Syncope

cause unknown.....DEC

Temporal Arteritis

presentDEC
1 year after recoveryPREF/STD

Thromboangiitis Obliterans (Buerger's Disease).....DEC

Thrombocythemia (elevated blood platelets)DEC

Thrombocytopenic Purpura (low blood platelets)DEC

TIA (Transient Ischemic Attack)

after 2 years.....STD
multiple attacks.....DEC
smokerDEC

Transplants (See Organ Transplant)

Tremors

classified as benign or familial.....PREF+/PREF
classified as Parkinsonism.....DEC

Ulcers (Duodenal or Peptic)

occasional medicationPREF+
chronic or bleeding.....PREF/STD
surgery scheduled.....DEC

Varicose Veins

uncomplicated, without medicationPREF+
medication required or with skin ulcers.....PREF/STD
with ambulatory restrictions or other complicationsDEC

Vertigo

controlled with medicationPREF
not controlled.....DEC

Von Willebrand's DiseaseDEC

Waldenstrom's DiseaseDEC

Walker Use.....DEC

Wheelchair Use.....DEC

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