

Special offer
extended
by popular
demand

Foresters Lifefirst Non-Medical Term Insurance

Now available
up to **\$350,000**

- ✓ Available through to age 55
- ✓ No exams, no fluids, no APS, no routine PHIs
- ✓ No cost annualization

Turn your sales to **gold**

To help your underwriter with the evaluation process you are responsible for ordering requirements from a third party provider. A representative from the selected third party provider will call your client to schedule an appointment to complete the necessary requirements (outlined in the chart below).

Age	Up to \$100,000	\$100,001 to \$150,000	\$150,001 to \$200,000	\$200,001 to \$350,000	\$350,001 to \$499,999	\$500,000 to \$999,999	\$1,000,000 to \$1,500,000	\$1,500,001 to \$1,999,999	\$2,000,000 to \$2,999,999	\$3,000,000 and up
18 to 40					V/B					
41 to 45										M/B/E/I
46 to 50	NM									
51 to 55					P/B					
56 to 60							P/B/E			
61 to 65									M/B/E	
66 to 70	Not Available									M/B/T/I
71+ ¹	Not Available									

Legend

Code	NM	V	P	M	E	T	I	B	APS
Requirement	Non-Medical	Vital Signs	Paramedical (Nurse)	Medical (Doctor)	Electrocardiogram (ECG)	Exercise (Treadmill ECG)	Inspection Report	Blood Profile	Attending Physicians Statement (ordered by Foresters)
Validity	N/A ²	1 Yr.	1 Yr.	1 Yr. ³	1 Yr. ³	1 Yr.	1 Yr.	6 Mos.	

¹ At ages 75 and up, a completed Activities of Daily Living Questionnaire (ADLQ) is required with the application form.

² Requirements are valid for the time shown if the findings were as expected. If findings were unexpected, the underwriter may request that the requirement be repeated.

³ For additional insurance within 12 months of a paramedical or medical exam, non-medical declarations will be required.

Foresters Underwriting Guide

It is the responsibility of the Underwriting Department to properly evaluate all applicants for insurance coverage. This requires sound, underwriting practices consistent with Foresters philosophy for the selection of risks. In order to provide the best possible service, Foresters Underwriting Team must also rely on the producer to develop complete and accurate information at point of sale.

This manual is a guide intended to help the producer understand the probable underwriting action for commonly encountered medical histories. Naturally, the final action on an application is the decision of the Underwriter, based upon the varying circumstances that each particular case may present. **It is important to recognize that the underwriting guide is meant as a basis for decision-making, and that other factors, including Foresters Underwriter's judgment, may affect the final decision.**

This document was prepared for the exclusive use of appointed producers. It is not intended for public distribution, nor is it to be used in any solicitation or marketing of Foresters products.



For producer use only

This document is intended for producer use only and should not be disclosed to the public. The information contained in this guide is general in nature and is subject to the appropriate certificate and rider wording.

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Introduction

You are an important part of the underwriting process. As a key participant in the underwriting and issue of our life insurance certificates, we want you to be familiar with our underwriting philosophy and practices. Attention to this Guide will help to expedite certificate issue and to explain underwriting decisions when the certificate is placed.

The most important step in the underwriting process is accurate detailed answers to all questions on the application. It is important that the application show detailed health history for all proposed insureds to assure that it may be underwritten in an accurate and timely manner. Failure to properly record complete and accurate information could result in either unnecessary delays or serious problems at time of claim.

PRODUCT INFORMATION

Individual life insurance coverage is provided by Foresters™, a trademark of The Independent Order of Foresters, a fraternal benefit society, 789 Don Mills Road, Toronto, Ontario Canada, M3C 1T9.

Underwriting guidelines, procedures and forms may vary by type of life insurance coverage and state. Be sure to consult all materials relative to your specific product and state. By following the procedures outlined in this manual and the marketing guidelines you will maximize your percentage of issued life insurance applications.

FIELD UNDERWRITING

As an appointed producer you are authorized to solicit, write applications and otherwise transact the business of insurance in any state where you are both properly licensed by the state and authorized by Foresters to conduct business.

As an appointed producer you may not solicit applications in any manner prohibited by or inconsistent with the provisions of Foresters rules, regulations, or policies. If you have any questions regarding any type of solicitation transaction please contact your agency.

Foresters adhere to state laws and regulations with regard to licensing and appointment of producers. In observance of these laws, the following practices are not acceptable:

- 1) Applications completed and signed by a producer who is not licensed or appointed in the state where the insurance was solicited and the state where the application was written or resident state for the applicant.
- 2) Applications completed by two producers unless both producers are licensed and appointed, as per 1 above.
- 3) Applications submitted with appointment paperwork in a state that prohibits this practice.

- 4) Applications completed by an employee of the producer and signed by the licensed/appointed producer, unless the employee is also licensed and appointed, as per 1 above.
- 5) Applications altered or corrected with regard to the signature of the proposed insured, the date signed, the city and state of the applicant, or the licensed resident producer's signature altered. Or any changes to information deemed to be material to the issuance of the certificate.
- 6) Stamped signature rather than handwritten ink signatures.
- 7) Typed applications or applications completed in pencil.

Good Field Underwriting is critical to the success of Individual Life Insurance Operations, and consists of more than just careful questioning of the proposed insured.

The following suggestions should help you and your clients in obtaining coverage quickly and on the most equitable basis:

- 1) Furnish complete information on past medical history to include dates, name of condition or diagnosis, type of treatment, and physician information.
- 2) If medical history is involved, identify the disease or condition for which treatment was obtained.
- 3) Complete all underwriting questionnaires as appropriate.

Do not underestimate the applicant's knowledge of the diagnosed condition or the reason for the operation or treatment.

1) The writing producer is never authorized to disregard an applicant's answers, or to impose his or her judgment as to what is or is not important to record. The writing producer is never authorized to accept or alter an application for the proposed insured.

2) Only the Underwriting Team can make the final decision; therefore, never suggest or promise that coverage will be issued without change.

RESIDENCE/CITIZENSHIP

The applicant's primary residence must be in a state where the product is approved for sale. Check the product availability maps on ezbiz for availability details.

Below are Foresters general guidelines, which are subject to underwriting discretion.

Permanent Residents of the United States:

1. Must be legally in the USA as a permanent resident (i.e. have a valid green card)
2. Must have insurable loss in the US, such as a house, property, or investments
3. Must reside in the US a minimum of 6 months annually.
4. If in the US for more than one year – regular UW requirements apply otherwise if in the US for less than one year a paramedical exam with blood and urine will be required

Foreign Nationals / Non Permanent Residents:

1. Must have insurable loss in the US, such as a house, property, or investments
2. Must reside in the US a minimum of 6 months annually. Must be legally in the USA (i.e. must have a valid SSN, or work visa or other immigration visa that validates status in the U.S.)
3. Must be citizens from a country that is insurable
4. If in the US for more than one year – regular UW requirements otherwise if in the US for less than one year a paramedical exam with blood and urine will be required
5. No Benefits (i.e.) WP, ADB, CI and DI are available
6. Maximum amount of insurance is \$500 000 and maximum age is 65.
7. Must be a professional or spouse or dependent thereof (if applicant is spouse or dependent, you should ensure that evidence of non-applying spouse is reviewed i.e. if husband is on work visa and only wife applies, ensure that we get husband's information)

FOREIGN TRAVEL/RESIDENCE

Applicants contemplating foreign travel or residence may be subject to unsatisfactory living conditions, increased risk of infectious disease and accident hazards.

Coverage is not available for applicants planning to reside in a foreign country indefinitely.

Travel in the course of business or pleasure will be considered up to and including 12 weeks. Underwriting foreign travel/residency will vary depending on international risks and how changes in political, security and health "environments" could impact the risk in that area. Should you have an applicant who answers yes to the travel question it is advisable to call underwriting for a more accurate risk assessment as travel advisories are always changing.

MILITARY

Foresters welcome applications from active duty military personnel and each case will be underwritten based on individual consideration. State regulations require the use of point of sale disclosure documents when selling to active duty military personnel.

It is also important to note that Foresters is currently not registered to sell on military installations.

OCCUPATION

The occupation of a proposed insured is a major factor in their eligibility and occupations may eliminate an applicant from qualifying for the Non-Medical product and / or disability income protection. Applicants with occupations that are exceptionally hazardous will be declined, for example:

- Any that involves handling explosives
- Any that involves handling hazardous materials

For Disability Income Rider (accident only) or Disability Income Rider (Accident and Sickness) sales please refer to the Occupation Exclusion Guide for details.

AVOCATIONS

Examples of recreational activities that may eliminate an applicant from Non-Medical Issue include:

- Scuba diving. The decision depends primarily on the level of certification and depths. Please have applicant complete Scuba and Skin Diving Questionnaire
- Motorized racing (automobiles, motorcycles, boats). The decision depends on the level of competition, size and power of engine, etc. Please have applicant complete Motor Sports Questionnaire
- Hang-gliding, skydiving. Please have applicant complete Aerial Sports Questionnaire
- Mountain/Rock Climbing. Please have applicant complete Climbing and Mountaineering Questionnaire

BUILD

OVERWEIGHT

Of significant importance in evaluating one's insurability is the relationship of an individual's height and weight. An overweight individual has an increased incidence of cardiovascular disease and renal disease. In addition, there is added stress to the weight bearing joints and bones. Obesity may also be associated with other disorders such as diabetes.

UNDERWEIGHT

Underweight is usually less significant than overweight. However, abnormally thin individuals may have difficulty gaining weight because of nutritional deficiencies, a chronic illness, nervous problems or alcoholism. Recent unexplained weight loss is of concern, particularly at the older ages.

WEIGHT REDUCTION

When weight reduction has been accomplished, and the weight has been stable for one year, full credit will be given for weight loss.

If there has been weight loss and the weight has not been stable for a period of 12 months, half credit will be given for the weight lost. Example: Female 5'7" ... 231lbs. Lost 36 lbs within 2 months. Current weight is 195 lbs. Allow ½ credit by adding 18 lbs, or 5'7" 213 lbs.

BENEFICIARY DESIGNATION

The beneficiaries must meet the insurable interest requirements under state insurance law. In addition, to complying with legislation relating to fraternal societies, "...benefits (must) be paid to the member or to the estate or dependents of the member (life insured) either directly or indirectly".

TEMPORARY INSURANCE AGREEMENT (TIA)

The TIA is a temporary insurance agreement that allows the applicant to have coverage during the underwriting process. It is available to the applicant up to and including age 70 and for face amounts applied for up to a maximum of \$1 million dollars. The applicant must answer "No" to the 3 questions asked in the TIA agreement and provide their first month premium for the TIA to take effect. The maximum payout is the lesser of the face amount applied for or \$500,000.

PREFERRED SUBMISSION INSTRUCTIONS

- Preferred rates are only available on fully underwritten plans (see Product Guide for face amount minimums).
- Current testing and underwriting can only determine preferred criteria. Applicants cannot be expected to know if they qualify. All submissions will automatically be considered for preferred underwriting and certificates will be issued based on the best insurance class for which the client qualifies.
- **AVOID DELAYS AND DISSATISFACTION:** Even if the applicant appears to qualify for preferred rates, they may not. Foresters underwriting strongly advises that the producer collect the standard non-smoker or smoker premium with the application

NON-MEDICAL UNDERWRITING

Lifefirst

Non-Medical or Simplified Issue is available for 20 year and 30 year level term plans. Underwriting requires answers to all medical questions on the application. A pharmacy database and MIB check will be done for every proposed insured. In the event of a discrepancy in information from these sources, the Foresters service centre will call the proposed insured for a telephone interview.

Non-Medical Issue Limits

Age	20 year Term	30 year Term
18 - 50	\$ 250,000	\$250,000
51 - 55	\$ 200,000	\$200,000
56 +	\$ 100,000	

If the proposed insured does not qualify for non-medical rates, the underwriter will offer to consider as fully underwritten if the face amount is increased to the minimum amount for fully underwritten. For example, at age 45, the minimum face amount for fully underwritten is \$250,001.

BIG UL

Non-medical underwriting is not available.

The age and amount requirements will be determined by the total Death Benefit at time of issue which is the face amount at issue plus the benefit amount under the Death Benefit Enhancement Rider.

MEDICAL UNDERWRITING

Tobacco (Standard)	Applicants who have used any product containing nicotine within the past 12 months.
Tobacco Plus	Applicants who smoke up to but no more than one pack per day and who meet all the Preferred criteria listed below.
Non-Tobacco (Standard)	Applicants who have not used a product containing nicotine within the past 12 months.
Non-Tobacco Plus	Applicants who have not used a product containing nicotine within the past 12 months and who meet all the Non-Tobacco Plus criteria listed below.
Preferred Non-Tobacco	Applicants who have not used a product containing nicotine within the past 2 years and who meet all the Preferred criteria listed below.
Preferred Plus Non-Tobacco	Applicants who have not used a product containing nicotine within the past 5 years and who meet all the Preferred Plus criteria listed below.
Substandard	Applicants who would require an extra premium or exclusion(s) for certain health conditions that are otherwise not insurable

PREFERRED CRITERIA – LIFEFIRST AND BIG UL

	Lifefirst and BIG UL Preferred Plus Non-Tobacco	Lifefirst and BIG UL Preferred Non-Tobacco	Lifefirst and BIG UL Non-Tobacco Plus	Lifefirst and BIG UL Tobacco Plus
Tobacco Use	No nicotine use for 5 yrs.	No nicotine use for 3 years	No nicotine use for 1 year	Up to one pack per day
Cholesterol Level	<220 (No previous history of treatment or medication)	<230 (No previous history of treatment or medication)	<260 (No previous history of treatment or medication)	<230 (No previous history of treatment or medication)
Cholesterol/HDL Ratio	<4.5 (No previous history of treatment or medication)	<5.0 (No previous history of treatment or medication)	<6.5 (No previous history of treatment or medication)	<5.0 (No previous history of treatment or medication)
Blood Pressure	<135/80	<140/90	<140/90	<140/90
Height Weight	See Build Charts	See Build Charts	See Build Charts	See Build Charts
Family History: NO Death of a parent	<AGE 65 due to CAD, CVD or Cancer	<AGE 65 due to CAD, CVD, Cancer	<AGE 60 due to CAD, CVD or Cancer	<AGE 65 due to CAD, CVD, Cancer
Medical History	No history of Cancer or significant health impairment	No history of Cancer or significant health impairment	No history of Cancer or significant health impairment	No history of Cancer or significant health impairment
Alcohol & Drug Abuse	No history	No history	No history	No history
MVR: DUI/Reckless Driving Moving Violations	0 for 5 yrs. <3 within 5 yrs.	0 for 5 yrs. <3 within 3 yrs.	0 for 5 yrs. <3 within 3 yrs.	0 for 5 yrs. <3 within 3 yrs.
Avocation	No hazardous sport (except with exclusion)	No hazardous sport (except with exclusion)	No hazardous sport (except with exclusion)	No hazardous sport (except with exclusion)
Aviation (Commercial pilots excepted)	No flying as a pilot or crew member of a private aircraft	No flying as a pilot or crew member of a private aircraft	No private or student pilot unless (except with exclusion)	No flying as a pilot or crew member of a private aircraft

AGE & AMOUNT REQUIREMENTS

(Medically underwritten products)

To help your underwriter with the evaluation process you are responsible for ordering requirements from a third party provider (See Approved Vendors). A representative from the selected third party provider will call your client to schedule an appointment to complete the necessary requirements (outlined in the appropriate age and amount requirement charts).

The risk appraisal is based on information obtained from the following sources:

- Attending Physician's Statements (APS)
- Paramedical Examination
- Medical Examination
- Blood Profile
- Urinalysis
- Vitals
- Inspection Reports
- Medical Information Bureau (MIB)
- Special Questionnaires
- Pharmaceutical Records
- Department of Motor Vehicle (MVR)
- ECG or Stress Test
- Application

AGE & AMOUNT REQUIREMENT CHARTS

(Medically underwritten products)

It is important to note the following:

- At ages 75 and up, a completed Activities of Daily Living Questionnaire (ADLQ) is required with the application form submission.
- For additional insurance (within 12 months) age and amount requirements will be based on the total insurance amount applied for in all companies.
- Additional requirements may be requested by the underwriter to obtain details of declared histories

LIFEFIRST

Age	to \$99,999	\$100,000 to \$150,000	\$150,001 to \$200,000	\$200,001 to \$250,000	\$250,001 to \$499,999	\$500,000 to \$999,999	\$1,000,000 to \$1,999,999	\$2,000,000	\$3,000,000
18 to 40					V/B				
41 to 45									M/B/E/I
46 to 50			NM						
51 to 55					P/B		P/B/E	M/B/E	
56 to 60									M/B/T/I
61+									

BIG UL

The age and amount requirements will be determined by the total Death Benefit at time of issue which is the face amount at issue plus the benefit amount under the Death Benefit Enhancement Rider.

Age	Up to \$99,999	\$100,000 to \$250,000	\$250,001 to \$500,000	\$500,001 to \$1,000,000	\$1,000,001 to \$2,000,000	\$2,000,001 to \$3,000,000	\$3,000,001 and up
18 to 39							P/G/I
40 to 49	N/A	V/B					M/B/E/I
50 to 59			P/B				
60 to 65							M/B/T/I
66 to 69				P/B/E			
70 to 75						M/B/E	M/B/E/I

Legend

Code	Requirement	Validity
NM	Non-Medical	N/A
V	Vital Signs	1Yr.
P	Paramedical (Nurse)	1Yr.
M	Medical (Doctor)	1Yr.
E	Electrocardiogram (ECG)	1Yr.
T	Exercise (Treadmill ECG)	1Yr.
I	Inspection Report	1 Yr.
B	Blood Profile	6Mos.
APS	Attending Physicians Statement (ordered by Foresters)	

APPROVED VENDORS

Name	Follow up Procedure:
APPS	Visit the APPS website to obtain APPS local number for your state http://appslive.com/ , or Call directly for the contact number for your state
EMSI	Visit the EMSI website to obtain contact information for the servicing office in your client's area https://eol5.emsinet.com
Portamedic/Hooper Holmes:	Visit the Portamedic/Hooper Holmes website to obtain contact information for the servicing office in your client's area http://www.portamedic.com/

MODIFIED COVERAGE

It may be necessary to issue coverage with an extra premium or exclude or deny coverage to an applicant due to health history. Final disposition regarding an application is the decision of the Underwriter. It is possible that two applicants with similar conditions could result in significantly different final action based on other factors.

FILE INCOMPLETE OR POSTPONED

Incompletion occurs when the requested information is not received within 45 days after the application date. However, once received, the file can be considered for reopening and a certificate issued if the applicant is insurable.

Postponements are applied in immediate high risk situations where it is possible that a satisfactory judgment may be made at a later date.

Some impairments will require a waiting period before being considered for life insurance. This is not a complete list:

- Cancer: - one or more years
- Coronary Artery Disease (includes angina, heart attack, bypass surgery and angioplasty): minimum six months
- Uninvestigated symptoms, symptoms currently under investigation until investigation is complete

IMPAIRMENTS

Some medical impairments cannot be considered for coverage. Please refer to the attached Impairment Guide.

- Certain combinations of impairments are often uninsurable. The following are some examples: Chronic kidney disease with high blood pressure
 - Depressive and/or anxiety problems in combination with alcohol abuse
 - Diabetes in combination with Coronary Artery Disease (CAD), Cardiovascular Disease (CVD), or kidney disease.

RECONSIDERATION OF UNDERWRITING ACTION

Certain medical impairments that resulted in a substandard premium may be reconsidered when there has been an improvement in health status. A reconsideration of the rating may be reviewed upon completion of a change application and the review of any deemed underwriting requirements.

A reconsideration date can be offered in some situations at the time of initial underwriting; you will be advised when this is possible

UNDERWRITING IMPAIRMENT GUIDE

Although clients may qualify for Non-Medical Issue for Lifefirst, if rateable up to 200% mortality (+100, or 4 tables), the impairments listed below as "decline" should not be submitted for Non-Medical or "Simplified Issue".

The following guide applies to single impairments. Individuals with multiple impairments may not qualify.

Submitting Information

If all the available information is submitted with the application, it is more likely that a decision can be made with a single review. Use the applicable questionnaire for "yes" answers when possible. Questionnaires are available from our "ezbiz" site. (Impairments with available questionnaires are noted with a "Q" in the following Guide.) For details of "yes" answers when a questionnaire is not available, the following general questions will help obtain details:

- What was the month/year of onset?
- What was the treatment? Are you still under treatment?
- What is your follow-up procedure?
- Is there any additional information that would be helpful?

NON-MEDICAL IMPAIRMENTS

Impairment	Guideline	
Criminal Activity	If on probation or parole, (accept 1 year after probation) If jail time has been served, consider 7 to 10 years after parole	Decline
Driving Record	2 DUI, last within 5 years More than 2 DUI	Decline

Impairment	Criteria	Critical Illness	Life (Non-Medical)
AIDS / HIV +ve		decline	decline
Alcoholism "Q"	Within 5 years	decline	decline
	After 5 years, without relapse, no current use	accept	accept
Alzheimer's		decline	decline
Amputation	Caused by injury	accept	accept
	Caused by disease	decline	decline
Anemia	Iron deficiency	accept	accept
Aneurysm		decline	decline
Angina	See Heart Disease	decline	decline
Angioplasty	See Heart Disease	decline	decline
Aortic Insufficiency		decline	decline
Aortic Stenosis		decline	decline
Arthritis "Q"	Osteoarthritis	accept	accept
	Rheumatoid – Mild	accept	accept
	Rheumatoid – Moderate or severe (Rx include Naproxyn, Humira, Embrel)	decline	decline
Asthma "Q"	Mild	accept	accept
	Moderate	accept	accept
	Severe-Hospitalization	decline	decline
Blood Pressure "Q"	Controlled	accept	accept
Bronchitis	Acute	accept	accept
	Chronic	decline	decline
Buerger's Disease	Non-smoker, no symptoms for >2 years	accept	accept
By-Pass Surgery	See Heart Disease	decline	decline
Cancer	Basal Cell Carcinoma (Skin)	accept	accept
	Cancer with treatment completed over 10 years ago, with no recurrence	decline	accept
	Other cancer	decline	decline
Cerebral Palsy		decline	decline
Chronic Obstructive Lung Disease		decline	decline
Cirrhosis of Liver		decline	decline
Colitis-Ulcerative		decline	decline
Congestive Heart Failure		decline	decline
Crohn's Disease "Q"	>5 years in remission	accept	accept
CVA /Stroke /TIA		decline	decline
Cystic Fibrosis		decline	decline
Depression/Anxiety "Q"	Mild > age 25, onset less than 1 year or longer, no hospitalization or time off work	accept	accept
	Severe, major depression, bi-polar disease, schizophrenia (Rx include Lithium, Seroquel, Abilify, Respidol)	decline	decline
Diabetes "Q"	Type II, duration < 10 years, oral medication, age 41 or older, good control No extra debits for smoking	decline	accept
	Other diabetes, poor control, insulin dependent, with complications such as heart disease, kidney disease, peripheral vascular disease, neuropathy.	decline	decline

Impairment	Criteria	Critical Illness	Life (Simplified Issue)
Diverticulitis/Diverticulosis		accept	accept
Down's Syndrome		decline	decline
Drug Use (other than marijuana)		decline	decline
Drug use – marijuana "Q"	Occasional use	accept	accept
Fibromyalgia	No depression	accept	accept
Gallbladder Disorders		accept	accept
Gastric Bypass	After 1 year, weight stabilized	accept	accept
Gastritis		accept	accept
Gout		accept	accept
Heart Disease	Heart Attack, Myocardial Infarction, Coronary Artery Disease and Angina Pectoris	decline	decline
Heart Murmur/Arrhythmia		decline	decline
Heart Murmur	"innocent", no symptoms, no treatment	accept	accept
Other Heart Murmur		decline	decline
Hemophilia		decline	decline
Hepatitis	A , recovered	accept	accept
	B or C	decline	decline
Hodgkin's Disease		decline	decline
Hypertension "Q"	Controlled	accept	accept
Hysterectomy	Non cancer	accept	accept
Kidney Disease	Stones, acute infection	accept	accept
	Other chronic kidney disease	decline	decline
Leukemia		decline	decline
Liver disease		decline	decline
Lupus Erythematosus	Discoid	accept	accept
	Systemic	decline	decline
Marfan's Syndrome		decline	decline
Mitral Insufficiency		decline	decline
Mitral Stenosis		decline	decline
Multiple Sclerosis		decline	decline
Muscular Dystrophy		decline	decline
Narcolepsy	Occasional Episodes	accept	accept
Pacemaker		decline	decline
Pancreatitis	Single attack , acute >1 year ago, non alcohol related, no complications	accept	accept
	Alcohol related, chronic	decline	decline
Paralysis	Paraplegia and Quadriplegia	decline	decline
Parkinson's Disease		decline	decline
Peripheral Vascular Disease (PVD)		decline	decline
Prostate Disorder	Infection, inflammation	accept	accept
Sarcoidosis	Localized, non-pulmonary	accept	accept
	Pulmonary	decline	decline
Sleep Apnea	Treated and controlled	accept	accept
Spina Bifida		decline	decline
Splenectomy	Due to trauma	accept	accept
Stroke/ CVA/ TIA		decline	decline
Suicide Attempt		decline	decline
Thyroid Disorders	Treated, no symptoms	accept	accept
Transient Ischemic Attack (TIA)		decline	decline
Tuberculosis	Treatment completed, inactive	accept	accept
Ulcer/GERD "Q"		accept	accept
Weight	See Build Charts		

DISABILITY INCOME RIDER

The general underwriting guideline is to accept the rider other than in the presence of a risk, not covered under the contract rules, that clearly predisposes the applicant to an accident and ensuing disability.

Applicants rated up to +150 will be eligible. Health history will otherwise not be a consideration for underwriting the rider.

The DIR will not be available to clients who are engaged in a hazardous occupation (listed below), who have a recent driving record with serious moving violations, or a history of repeated periods of disability.

The following list represents hazardous occupations, more likely to lead to accidents causing disability and consequently, the DIR coverage will be declined. The list is not exhaustive however, Foresters underwriting will review each application.

Industry	Occupation
Athletes (Professional)	hockey player
	jockey/horse breaker
Construction	blaster / explosive handler
	roofer
	sandblaster
	steeplejack
	structural steel workers
Chemical	tunnel workers
	caustic material handlers
Entertainment	still and tank cleaners
	circus or carnival acrobat/ aerialists
	wild animal handlers
Fishing	stunt person
	deep sea fishing
Law Enforcement	divers
	jailer / prison guard
Lumber	narcotics / vice / undercover police
	raft or river crew
Metal	chainsaw operator, chopper, sheer operator, rigger
	furnace room worker
Underground mining	workers with or near hot metal or slag
	hard rock, underground miners
Public Utilities	lineman , power line installer / repairer
	tree trimmers
Railroad	track workers
Search and rescue	All workers
Shipping	stevedore

BUILD CHARTS

Lifefirst Non Medical Build Chart Male & Female		Lifefirst / BIG UL Standard Plus Build Chart Male & Female		Lifefirst / BIG UL Preferred Build Chart Male & Female		Lifefirst / BIG UL Preferred Plus Build Chart Male & Female		Lifefirst / BIG UL Standard Build Chart Male & Female		Lifefirst Critical Illness Build Chart Male & Female	
Height (Feet)	Maximum Weight (Pounds)	Height (Feet)	Maximum Weight (Pounds)	Height (Feet)	Maximum Weight (Pounds)	Height (Feet)	Maximum Weight (Pounds)	Height (Feet)	Maximum Weight (Pounds)	Height (Feet)	Maximum Weight (Pounds)
4'8	185	4'-8"	143	4'10	135	4'10	126	4'-8"	166	4'8	151
4'9	193	4'- 9"	150	4'11	137	4'11	130	4'- 9"	173	4'9	157
4'10	198	4'-10"	155	5'0	152	5'0	144	4'-10"	178	4'10	161
4'11	207	4'-11"	160	5'1	158	5'1	149	4'-11"	185	4'11	168
5'0	212	5'- 0"	167	5'2	162	5'2	152	5'- 0"	191	5'0	173
5'1	221	5'-1"	175	5'3	166	5'3	157	5'-1"	198	5'1	180
5'2	225	5'- 2"	180	5'4	172	5'4	161	5'- 2"	203	5'2	184
5'3	234	5'- 3"	185	5'5	178	5'5	166	5'- 3"	211	5'3	191
5'4	243	5'- 4"	190	5'6	182	5'6	170	5'- 4"	219	5'4	199
5'5	250	5'- 5"	195	5'7	190	5'7	176	5'- 5"	225	5'5	204
5'6	259	5'- 6"	200	5'8	195	5'8	180	5'- 6"	232	5'6	211
5'7	265	5'- 7"	205	5'9	200	5'9	184	5'- 7"	239	5'7	216
5'8	274	5'- 8"	210	5'10	205	5'10	190	5'- 8"	248	5'8	223
5'9	281	5'- 9"	215	5'11	210	5'11	196	5'- 9"	252	5'9	230
5'10	292	5'-10"	222	6'0	220	6'0	202	5'-10"	261	5'10	236
5'11	298	5'-11"	227	6'1	225	6'1	206	5'-11"	267	5'11	243
6'0	307	6'- 0"	234	6'2	230	6'2	211	6'- 0"	276	6'0	250
6'1	314	6'-1"	242	6'3	240	6'3	216	6'-1"	283	6'1	256
6'2	325	6'- 2"	247	6'4	244	6'4	221	6'- 2"	292	6'2	265
6'3	336	6'- 3"	252	6'5	251	6'5	227	6'- 3"	300	6'3	274
6'4	342	6'- 4"	258	6'6	260	6'6	244	6'- 4"	307	6'4	278
6'5	353	6'- 5"	264	6'7	265	6'7	249	6'- 5"	318	6'5	287
6'6	360	6'- 6"	270	6'8	270	6'8	254	6'- 6"	322	6'6	294
		6'- 7"	276	6'9	273	6'9	259				

This build chart is for single impairment of build only. Where multiple impairments occur the applicant may not qualify for the **Critical Illness Rider**. **For Non-Medical Issue**, Foresters will accept up to and including the corresponding weight for each height if build is the only impairment.

CERTIFICATE CHANGE INFORMATION

OVERVIEW

These types of changes include requests from the applicant or producer to change the coverage either by increasing or decreasing benefits; adding or deleting benefits, adding or deleting family members or reinstating coverage that has lapsed. Changes that increase Foresters liability require underwriting approval.

UNDERWRITING POLICY CHANGES AND REINSTATEMENTS

All medical history is reviewed including claims information on file. Current underwriting guidelines are followed and insurability requirements must be met.

As with New Business applications, the underwriting review process may include requests for information through Attending Physicians Statement, Exam, Blood Profile, Inspection Report, Motor Vehicle Report (MVR), or the Medical Information Bureau (MIB).

Benefit changes – If current guidelines would require modification to coverage with a rating, it is normal underwriting procedure to deny a benefit change to avoid compromising current benefits.

Reinstatement – If reinstatement of coverage can be approved with modifications of coverage, this offer is made and must be considered by the primary insured in writing before coverage is reinstated.

90 Day Changes

Changes made to certificates within 90-days of issue. Changes could include –

- Increasing or decreasing certificate face amount
- Increasing or decreasing rider coverage amount
- Adding or removing riders (e.g. Accidental Death Rider)

- Changing the plan type (e.g. changing from a 20-year term to a 15-year term).

To request changes within 90-days of certificate issue, we require the following –

- The original certificate issue package to be returned.
- A signed letter from the owner, advising of the requested changes.
- If the request is for an increase in coverage (e.g. face amount increase or addition of a rider), a check from the owner for the difference in premium.

Note: These changes are effective as of the original certificate issue date. Therefore, ensure that the check will cover the difference in premium from the original issue date to the date the request is being submitted.

After the change has been completed, a new certificate issue package will be provided to you for delivery to the owner. The New Business delivery processes should then be followed.

Post 90 Day Changes

Changes made to certificates over 90-days from the issue date. Changes could include (depending on the life insurance product):

- Decrease in certificate face amount
- Decrease in rider coverage amount
- Addition or removal of riders
- Change to non-tobacco premium basis
- Reduction or removal of rating

To request changes over 90-days of certificate issue, we require the following

- A completed Application for Change, Conversion and Reinstatement that has been signed by the owner. This form can be found on the website designed specifically for you, which you can link directly to from your home company's website.