UNDERWRITING

A Guide to Working With LBL

Focused Underwriting

What you'll find inside . . .

- Medical Requirements
- Underwriting Guidelines
- Retention and Reinsurance Limits
- Super Sherlock Underwriting Program
- Medical Testing Overview

LINCOLN BENEFIT LIFE
AN ALLSTATE COMPANY

Clear vision. Clear priorities.

Effective underwriting comes from being focused on the customer first. Start there and everything else falls into place. At LBL, our underwriting team takes a comprehensive look at each customer's needs and health factors and then works with producers to find the best rate possible. This process results in better outcomes for customers—and for you.

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Medical and Paramedical Requirements (Non-TeleApp)

Amounts refer to total currently applied for plus any existing coverage issued within the past three years. For single premium plans, use net amount at risk. For second-to-die, if both lives are insurable, use half of the face amount.

	AGES 18-35[1]	AGES 36-40	AGES 41-45	AGES 46-50	AGES 51-60	AGES 61-69	AGES 70+
Through $99,999	SMAC, HOS	SMAC, HOS	SMAC, HOS	SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SA, SMAC, HOS,
$100,000–$199,999	Lab slip vitals, SMAC, HOS	Lab slip vitals, SMAC, HOS	Lab slip vitals, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS, EKG	Paramed, SA, SMAC, HOS, EKG
$200,000–$300,000	Lab slip vitals, SMAC, HOS	Lab slip vitals, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SA, SMAC, HOS, EKG
$300,001–$500,000	Lab slip vitals, SMAC, HOS	Lab slip vitals, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SA, SMAC, HOS, EKG
$500,001–$750,000	Lab slip vitals, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SA, SMAC, HOS, EKG
$750,001–$1,000,000	Paramed, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SA, SMAC, HOS, EKG
$1,000,001–$2,000,000	Paramed, SMAC, HOS	Paramed, SMAC, HOS	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SA, SMAC, HOS, EKG
$2,000,001–$3,000,000	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SA, SMAC, HOS, EKG
$3,000,001–$5,000,000	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SA, SMAC, HOS, EKG
$5,000,001–$10,000,000	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	Nonsmoker[3] Smoker[4]	Paramed, SA, SMAC, HOS, EKG
$10,000,001 and up	Paramed, SMAC, HOS, EKG	Paramed, SMAC, HOS, EKG	MD, Stress EKG,[2] SMAC, HOS	MD, Stress EKG,[2] SMAC, HOS	MD, Stress EKG,[2] SMAC, HOS	MD, Stress EKG,[2] SMAC, HOS	Paramed, SA, SMAC, HOS, EKG

[1] Ages 0–17: Nonmedical for amounts less than $100,000; for amounts of $100,000 and above, contact the Underwriting Department.

[2] Consult Underwriting before arranging a treadmill EKG on any proposed insured who has coronary artery disease or cannot walk without assistance.

[3] Paramed, SMAC, HOS, Resting EKG

[4] MD, SMAC, HOS, Stress EKG

Paramed: An exam done by the approved paramedical facility (ExamOne).

SA: Timed Up and Go and Delayed Word Recall tests. Must be scheduled through ExamOne.

MD: An exam done by an approved medical doctor.

Lab slip vitals: Build, blood pressure, and pulse recorded by paramed examiner on lab slip.

SMAC: Blood drawn from the arm and sent to our lab for analysis.

HOS: Urine specimen collected by examiner and sent to our lab for analysis.

EKG: A resting, 12-lead electrocardiogram. EKG is based only on the amount applied for.

Stress EKG: An electrocardiogram done while the applicant is exercising on a treadmill.

Time Limits for Medical Requirements

REQUIREMENT	PI AGE <70	PI AGE ≥70
Fully completed application including Part 2, with concurrent MIB inquiry	6 months	6 months
Paramed or MD exam, lab slip vitals, SMAC, HOS, and resting EKG	12 months	6 months
Senior Assessment	N/A (not required)	6 months
Stress EKG	24 months if a normal resting EKG has been done within the past 12 months, otherwise 12 months	

Notes:

1. Time limits are measured from date of the requirement to date of application approval.
2. If the application is approved at or near the end of the applicable time limit, the usual 45 day period for policy delivery is still allowed but may not be extended.

Class Requirements

	CLASS	BUILD	BLOOD PRESSURE	CHOLESTEROL	CHOL/ HDL	SERUM ALBUMIN	FAMILY HISTORY[1] (AGES < 65 ONLY)	ALCOHOL/ DRUG	TOBACCO	DRIVING[2]
ELITE	**Term:** Preferred Elite ≥5M (base only) **UL:** N/A	See Build Chart	**Without Rx:** 135/85 for ages 0–60, 145/90 for ages 61+ **With Rx**[3]	**Without Rx:** 220 **With Rx**[4]	4.5[3,5]	**Ages 70+** must be >4.0	No occurrence of specified disease in parent or sibling before age 60	Never treated	No use within 5 years	Maximum of 1 moving violation in 3 years; no DUI, reckless driving in 10 years (nor >1 ever)
	Term: Preferred Elite <5M **UL:** Preferred Elite (all amounts)	See Build Chart	**Without Rx:** 140/85 for ages 0–60; 150/90 for ages 61+ **With Rx**[3]	**Without Rx:** 220 **With Rx**[4]	5.0[3,5]	**Ages 70+** must be >4.0	No occurrence of specified disease in parent or sibling before age 60	Never treated	No use within 5 years	Maximum of 2 moving violations in 3 years; no DUI, reckless driving in 10 years
PREFERRED	**Term:** Preferred **UL:** Preferred Nonsmoker	See Build Chart	**Ages 0–60**[5] 140/90 **Ages 61–69**[5] 150/90 **Ages 70+**[5] 155/90	**Age <70**[5] 250 **Age 70+**[5] 325	**Age <70**[5] 6.0 **Age 70+**[5] 6.5	**Ages 70+** must be >4.0	No death of parent or sibling from specified disease before age 60	Never treated	No use within 3 years	Maximum of 2 moving violations in 3 years; no DUI, reckless driving in 5 years
STANDARD	**Term:** Standard Select **UL:** N/A	See Build Chart	**Ages 0–60**[5] 145/90 **Ages 61+**[5] 155/95	285[5]	7.0[5]	N/A	No more than 1 death of parent from specified disease before age 60	Not treated within 5 years	No use within 2 years	Maximum of 3 moving violations in 3 years; no DUI, reckless driving in 5 years
	Term: Standard No Tobacco **UL:** Standard Nonsmoker	See Build Chart	**Ages 0–60**[5] 155/95 **Ages 61+**[5] 160/95	300[5]	9.0[5]	N/A	No more than 1 death of parent from specified disease before age 60	Not treated within 5 years	No use within 1 year	Maximum of 3 moving violations in 3 years; no DUI, reckless driving in 2 years
	Term: Preferred Smoker **UL:** Preferred Smoker	See Build Chart	**Ages 0–60**[5] 140/90 **Ages 61–69**[5] 150/90 **Ages 70+**[5] 155/90	**Age <70**[5] 250 **Age 70+**[5] 325	**Age <70**[5] 6.0 **Age 70+**[5] 6.5	**Age 70+** must be >4.0	No death of parent or sibling from specified disease before age 60	Never treated	Maximum of 1 pack per day	Maximum of 2 moving violations in 3 years; no DUI, reckless driving in 5 years
	Term: Standard Smoker **UL:** Standard Smoker	See Build Chart	**Ages 0–60**[5] 155/95 **Ages 61+**[5] 160/95	300[5]	9.0[5]	N/A	No more than 1 death of parent from specified disease before age 60	Not treated within 5 years	Any tobacco use not qualifying for Preferred Smoker	Maximum of 3 moving violations in 3 years; no DUI, reckless driving in 2 years

[1] Coronary artery disease, stroke, invasive internal cancer, or malignant melanoma. Cancer exceptions: basal cell and squamous cell skin cancer, any carcinoma in situ, and cancers in gender-specific organs when the relative is not the same gender as the proposed insured.

[2] Refer to the Motor Vehicle Reports section for the face amounts requiring MVRs.

[3] Requirements for PE with hypertension under treatment: ages 18–60 130/75, ages 61+ 140/85; control documented by minimum 3 readings in past 2 years; compliant with treatment, no problems with medications, and no more than 2 medications needed for control; and no history of high cholesterol.

[4] Requirements for PE with hyperlipidemia under treatment: total cholesterol ≤200 and (a) TC/HDL ratio ≤4.5 or (b) LDL ≤100; control documented by minimum of 3 readings in 2 years; compliant with treatment, no problems with medications, no more than 2 medications needed and one must be a statin; and no history of hypertension.

[5] Treatment allowed.

Class Requirements (continued)

	CLASS	AVIATION	AVOCATIONS	RESIDENCY[7]	OCCUPATION	MILITARY
ELITE	**Term:** Preferred Elite (all amounts) **UL:** Preferred Elite (all amounts)	Regularly scheduled U.S. airline only	None in 2 years except recreational scuba diving to maximum of 60 feet	Lawful permanent resident of U.S. for 12 months	No hazardous occupation	No active military duty
PREFERRED	**Term:** Preferred **UL:** Preferred Nonsmoker	None except regularly scheduled U.S. airline & best private pilots[6]	Not excluded but flat extra may apply	Lawful permanent resident of U.S. for 12 months	No exclusion but flat extra may apply	No active military duty below rank of commissioned officer
STANDARD	**Term:** Standard Select **UL:** N/A	Not excluded but flat extra may apply	Not excluded but flat extra may apply	Lawful permanent resident of U.S. for 6 months	No exclusion but flat extra may apply	No exclusion but flat extra may apply
	Term: Standard No Tobacco **UL:** Standard Nonsmoker	Not excluded but flat extra may apply	Not excluded but flat extra may apply	Lawful permanent resident of U.S. for 6 months	No exclusion but flat extra may apply	No exclusion but flat extra may apply
	Term: Preferred Smoker **UL:** Preferred Smoker	None except regularly scheduled U.S. airline & best private pilots[6]	Not excluded but flat extra may apply	Lawful permanent resident of U.S. for 12 months	No exclusion but flat extra may apply	No active military duty below rank of commissioned officer
	Term: Standard Smoker **UL:** Standard Smoker	Not excluded but flat extra may apply	Not excluded but flat extra may apply	Lawful permanent resident of U.S. for 6 months	No exclusion but flat extra may apply	No exclusion but flat extra may apply

[6] Best private pilots are those with over 300 hours of experience flying 50–150 hours/year with instrument flight rating.

[7] Lawful permanent residents include U.S. citizens, individuals granted permanent residency by the INS, and holders of acceptable temporary visas.

Quick Impairment Rating Guide

PREFERRED EXCLUDED: A PREFERRED OFFER IS NOT USUALLY POSSIBLE WITH THESE CONDITIONS.[8]	
Atrial fibrillation	Epilepsy or seizure disorder
Asthma	Glucose intolerance (“borderline” or “prediabetes”)
Chronic lung disease	History of drug or alcohol addiction
Coronary artery disease	History of mood or eating disorders
Chronic kidney disorder	Obstructive sleep apnea
Crohn’s disease or ulcerative colitis (“inflammatory bowel disease”)	Personal history of cancer (other than non-melanoma skin cancer)
Depression	Personal history of blood disorders (other than iron deficiency anemias)
Detectable blood or protein in the urine	Use of steroids
Diabetes	Use of chronic analgesics
Elevated liver functions	Use of immunosuppressants
Emphysema	Valvular or congenital heart disease

SUBSTANDARD: THESE CONDITIONS ARE TYPICALLY NOT INSURABLE AT STANDARD OR BETTER RATES AND MOST OFTEN REQUIRE AN ADDITIONAL RISK RATING.[8]	
Acute or chronic kidney disorder	Major depression
Aneurysms	Myocardial infarction
Cerebral vascular disease	Neurologic disorder
Chronic hepatitis	Paraplegia
Chronic liver disorder	Peripheral vascular disease
Diabetes, Type 1	Recent history of blood disorder
Heart failure or dysfunction	Recent history of cancer
History of cardiac arrest	Severe psychiatric disorder
Lupus or related disorder	Stroke or transient ischemic attack (“TIA”)

[8] If you have questions regarding any of the conditions above or you feel your case may be an exception to the above guidelines, please contact the Underwriting Department to discuss what offer may be possible.

Quick Impairment Rating Guide (continued)

UNINSURABLE: THESE CONDITIONS OR COMBINATION OF IMPAIRMENTS ARE USUALLY CONSIDERED UNINSURABLE FOR LIFE COVERAGE IN MOST INSTANCES.[8]	
Acquired immune deficiency syndrome (AIDS)	Heart transplant
AIDS-related complex (ARC)	HIV positive state
Alzheimer's disease	Hunter's syndrome
Amyotrophic lateral sclerosis ("ALS" or "Lou Gehrig's disease")	Huntington's chorea
Autonomic neuropathy or Shy-Drager syndrome	Hydrocephalus, untreated
Brain or central nervous system cancers	Hypertension – severe and uncontrolled
Cancer that has metastasized or disseminated (spread beyond primary site)	Liver transplant
Coronary artery disease – advanced with diabetes	Malignant Mesothelioma
Cerebral atrophy	Multiple Myeloma
Chemotherapy – receiving current drug or immunotherapy treatment for cancer	Multiple Sclerosis – progressive
Chronic dialysis therapy (kidney machine)	Myelodysplasia or dysplastic anemia
Chronic organic brain syndrome	Oxygen therapy
Chronic pancreatitis	Organ transplants other than kidney
Cirrhosis of the liver	Peripheral vascular disease – severe with diabetes
Congestive heart failure – chronic, recurrent, uncompensated, or symptomatic	Psychotic disorders in past 2 years
Cystic fibrosis	Quadriplegias
Current drug or alcohol dependency	Pulmonary hypertension – primary
Current eating disorders (bulimia or anorexia)	Radiation therapy – receiving current treatment for cancer
Dementia	Sarcoidosis – stage IV
Demyelinating disease	Seizure disorder/Epilepsy – uncontrolled
Diabetes with renal disease	Systemic lupus erythematosis with renal disease
Diabetes with severe coronary artery disease or peripheral vascular disease	Whipple's disease, untreated
Esophageal varices	

[8] If you have questions regarding any of the conditions above or you feel your case may be an exception to the above guidelines, please contact the Underwriting Department to discuss what offer may be possible.

Build Requirements, Ages 18 and Over, Both Genders

TERM UL	PE PE	P/PS PN/PS	SSL NA	SNT/SM NS/SM	+25 +25	+50 +50	+75 +75	+100 +100	+125 +125	+150 +150	+200 +200
HEIGHT	**WEIGHT**										
4' 8"	124	134	141	156	169	178	185	194	202	207	216
4' 9"	129	139	146	161	175	184	192	201	209	215	224
4' 10"	133	143	151	167	181	191	199	208	216	223	232
4' 11"	138	148	156	173	188	198	206	215	224	230	240
5'	143	154	161	179	194	204	213	222	231	238	248
5' 1"	147	159	167	185	201	211	220	230	239	246	256
5' 2"	152	164	172	191	207	218	227	237	247	254	265
5' 3"	157	169	178	197	214	225	234	245	255	263	273
5' 4"	162	175	184	203	221	233	242	253	263	271	282
5' 5"	167	180	189	210	228	240	249	261	272	279	291
5' 6"	172	186	195	216	235	247	257	269	280	288	300
5' 7"	178	191	201	223	242	255	265	277	289	297	309
5' 8"	183	197	207	230	249	263	273	285	297	306	318
5' 9"	189	203	213	237	257	270	281	294	306	315	328
5' 10"	194	209	220	243	264	278	289	303	315	324	337
5' 11"	200	215	226	250	272	286	298	311	324	333	347
6'	205	221	232	258	280	294	306	320	333	343	357
6' 1"	211	227	239	265	287	303	315	329	343	352	367
6' 2"	217	234	245	272	295	311	323	338	352	362	377
6' 3"	223	240	252	279	303	319	332	347	362	372	387
6' 4"	229	246	259	287	312	328	341	357	371	382	398
6' 5"	235	253	266	295	320	337	350	366	381	392	408
6' 6"	241	259	273	302	328	345	359	376	391	402	419
6' 7"	247	266	280	310	337	354	369	385	401	413	430
6' 8"	253	273	287	318	345	363	378	395	411	423	441
6' 9"	260	280	294	326	354	372	387	405	422	434	452
6' 10"	266	287	301	344	363	382	397	415	432	445	463
6' 11"	273	294	309	342	372	391	407	425	443	456	474
7'	279	301	316	351	381	401	417	436	454	467	486
BMI =	27.9	29.98	31.5	35	38	40	41.6	43.5	45.3	46.6	48.5

Underweight

TERM UL	AGES 0-69 +25	AGES 70+ IC if below[1]	Min. for PE/P/SSL		AGES 0-69 +25	AGES 70+ IC if below (1)	Min. for PE/P/SSL
HEIGHT	WEIGHT			HEIGHT	WEIGHT		
4' 8"	74	74	82	5' 11"	118	118	132
4' 9"	76	76	85	6'	122	122	136
4' 10"	79	79	88	6' 1"	125	125	140
4' 11"	82	82	91	6' 2"	129	129	144
5'	85	85	95	6' 3"	132	132	148
5' 1"	87	87	98	6' 4"	136	136	152
5' 2"	90	90	101	6' 5"	139	139	156
5' 3"	93	93	104	6' 6"	143	143	160
5' 4"	96	96	108	6' 7"	146	146	164
5' 5"	99	99	111	6' 8"	150	150	168
5' 6"	102	102	114	6' 9"	154	154	172
5' 7"	105	105	118	6' 10"	158	158	177
5' 8"	109	109	121	6' 11"	162	162	181
5' 9"	112	112	125	7'	166	166	185
5' 10"	115	115	129	BMI =	16.5	16.5	18.5

KEY:

Preferred (P)
Standard (S)
Standard NT (SNT)
Preferred Smoker (PS)
Select (SSL)
Standard Smoker (SM)
Preferred Nonsmoker (PN)
Standard Nonsmoker (NS)
Preferred Elite (PE)

[1] Individual Consideration, usually decline. To consider as exception, must obtain APS and refer to MD.

Inspection Reports

Inspection Report (IR) is required for:

Ages 16-74: Insurance amounts over $1 million
Ages 75+: Insurance amounts over $499,999

A Business Beneficiary supplement is required whenever the beneficiary is a business, business partner, or employer.

Refer to the Financial Underwriting Requirements chart on page 10.

Motor Vehicle Reports

Motor Vehicle Reports (MVR) are ordered by the Underwriting Department:

Ages 18-40: Insurance amounts over $100,000
Ages 41-64: Insurance amounts over $499,999
Ages 65-74: Insurance amounts over $100,000
Ages 75+: All amounts

Financial Underwriting Guidelines

The writing agent is an important source of information. A well-written cover letter by the writing agent explaining how the face amount was determined and the reason for the insurance will typically give the underwriter a better understanding of the case and result in quicker issuance of the policy applied for. Information should be included regarding the background of the sale and the purpose and need for the insurance. Be sure to clarify any unusual or unique aspects of the case. List all amounts of life insurance in force and the amount, if any, being replaced. Copies of an estate planning analysis and available financial statements should accompany the cover letter.

Financial Underwriting Requirements

FACE AMOUNT	AGES 16-64	AGES 65-69	AGES 70-74	AGES 75+
\$500,000–\$1,000,000				IR
\$1,000,001–\$3,000,000	IR	IR	IR, ICF, DBV	IR, ICF, DBV
\$3,000,001–\$5,000,000	IR, BF	IR, BF, DBV	IR, ICF, BF, DBV	IR, ICF, BF, DBV
\$5,000,001 and up	IR, ICF, BF, DBV[9]	IR, ICF, BF, DBV	IR, ICF, BF, DBV	IR, ICF, BF, DBV

[9] DBV requested at underwriter discretion.

INSPECTION REPORT (IR)

We will automatically order an inspection from First Financial Underwriting Services (FFUS) unless advised by the producer that an inspection has already been ordered. For face amounts greater than \$2,500,000, FFUS will routinely verify finances through an employer, accountant, or other financial advisor. Producers who prefer to order inspections themselves are strongly encouraged to use FFUS. Inspections from other nationwide inspection companies may be accepted, but LBL reserves the right to supplement inspections from unapproved vendors with information from FFUS or other sources.

NOTE: Inspections on proposed insureds aged 70 and above must be done by our preferred vendor, First Financial Underwriting Services. Inspection reports and invoices from any other provider will not be accepted.

INDEPENDENT CONFIRMATION OF FINANCES (ICF)

At certain age and amount levels (indicated by ICF in the above chart), formal, written verification of finances from an informed, disinterested third party is required. The third party must be a professional who is independent of the sale and knowledgeable about the applicant’s finances, such as a CPA, an estate planning attorney, or a personal banker. Accountants and other financial advisors cited as sources of financial information must be fully identified including address and phone number. The written verification should provide the proposed insured’s income and net worth (including breakdown of assets and liabilities). It can be in the form of a professionally prepared financial statement, a brokerage account statement, or a letter on the professional’s letterhead.

BUSINESS FINANCIAL STATEMENTS (BF)

Business financial statements are required for face amounts exceeding $3,000,000 if the coverage applied for serves a business purpose and for personal insurance purposes if a business interest accounts for a substantial portion of the proposed insured's net worth. At a minimum, the business's income statements and balance sheets for the past two years should be provided.

CONSUMER DATABASE VERIFICATION (DBV)

LBL will check various consumer databases to verify customer identification, address, property values, credit, and other information. This process is generally transparent to the producer and customer.

IMPORTANT INFORMATION

- Significant assets must be specifically identified (e.g., names and addresses provided for businesses and real estate holdings).
- For customers with a substantial percentage of their net worth in an asset class other than real estate and equities, we will require independent evidence of the asset value (insurance policy, formal appraisal, etc.).
- Allstate/Lincoln Benefit Life reserves the right to request additional information at any time to verify the customer's income or to verify the ownership and valuation of assets.
- Allstate/Lincoln Benefit Life will not issue new coverage if a policy issued (by any company) in the past five years has been settled (applies to ages 70+).
- Any evidence of financial misrepresentation or STOLI intent will result in the declination of an application.
- For any case, additional financial statements and/or information may be required to justify the insurance amounts applied for.

Personal Insurance

INCOME REPLACEMENT

Current income multiplication factors for determining the maximum amount of insurance in force and applied for in all companies.

AGE	TIMES INCOME	AGE	TIMES INCOME
18-30	30[10]	51-55	15
31-40	25	56-60	12
41-50	20	61-65	10
[10] Multiples above 25 should be reserved for those with stable employment in professional or highly skilled fields.		Over 65	5

ESTATE CONSERVATION

The limit for estate conservation coverage is 55% of the projected future estate value. If the proposed insured is under age 80, we project the current net worth for the lesser of 75% of life expectancy or 20 years. If the proposed insured is age 80 or older, we project the net worth for half of the remaining life expectancy.

We generally use a growth rate between 5% and 7% for projecting the future estate value. Within this range, the appropriate rate depends on asset mix, size of the estate, and the proposed insured's age. A higher rate is appropriate for younger ages and larger estates with an aggressive investment mix.

The table below illustrates the amounts produced by our method on standard male and female nonsmokers with current net worth of $10 million at representative ages.

AGE	MALE-NS 5% GROWTH	MALE-NS 7% GROWTH	FEMALE-NS 5% GROWTH	FEMALE-NS 7% GROWTH
50	$14,593,137	$21,283,265	$14,593,137	$21,283,265
60	$12,347,394	$16,881,025	$13,830,582	$19,756,777
70	$9,662,713	$12,015,596	$10,666,144	$13,779,945
80	$8,753,682	$10,477,150	$9,452,875	$11,655,278
90	$6,951,385	$7,610,353	$7,281,170	$8,115,577

Business Insurance

Financial statements are required for amounts over $3 million.

KEY PERSON INSURANCE

A reasonable measure of an individual's value to the business is usually 5–10 times the annual income (includes salary, bonuses, commissions, and deferred compensation). Larger amounts can be considered when facts and financial data demonstrate a greater loss to the business.

BUY-SELL, PARTNERSHIP, STOCK REDEMPTION

The amount must be related to proposed insured's ownership percentage and the fair market value of the business. All partners must be insured for their share of the ownership.

CREDITOR OR BUSINESS LOAN

- Maximum of 75% of the outstanding loan balance.
- Term of the loan is 5 years or more.

Acceptable Beneficiary/Owner Designations

One of the key principles of financial underwriting is that the beneficiaries and owners should have a real interest in the continued life of the proposed insured. This is often referred to as an "insurable interest." Insurable interest represents a probable financial loss to be suffered by the beneficiary/owner should the insured die prematurely; a loss that would be as great as the total amount of life insurance contemplated. Generally, a person has an insurable interest in the life of another where there is a reasonable expectation of financial gain from the continued life and a financial loss resulting from the untimely death of the other person.

The following beneficiaries may generally be assumed to have an insurable interest in the life of the proposed insured:

- Spouse, fiancé(e), domestic partner, partner in a civil union where allowed by law, child, parent, grandparent, brother, and sister.
- Business partners and employers if the insured person is a director, officer, or high-level employee.
- Charitable organizations—if the proposed insured has a history of giving to the named charity and already has sufficient personal needs insurance in force.If a beneficiary other than those listed above is named, the underwriter may seek answers to the following questions:

- Why was the beneficiary named? What was the purpose for the coverage?
- Will the beneficiary suffer a financial loss in the event of death of the proposed insured?

Introduction of third-party owners and/or premium payors presents unique challenges for the underwriter, and the underwriter will have to establish, as was done with the designated beneficiary, that a potential financial loss exists prior to policy approval. The following traditional ownership/payor situations may generally be assumed to be acceptable:

- A parent or legal guardian owning a child's policy purchased during the child's school years. (All minor children in the family should be insured for equal face amounts.)
- A grandparent owning a policy on a grandchild where the application is signed by the custodial parent. (All grandchildren should be insured for the same amount.)
- A spouse, fiancé(e), or domestic partner owning his or her partner's policy.
- Business partners owning policies on each other for buy-sell purposes. (All partners should have policies unless they are uninsurable.)
- A business owning a policy for the purpose of stock redemption, split dollar, or deferred compensation for an employee.
- Estate tax concerns where incidence of ownership of the policy is wisely relegated to a third party or trust.
- A business entity owning a policy on a key employee.
- Coverage to pay taxes on a **substantial** estate, where ownership of the policy is wisely relegated to a third party or trust to keep it out of the taxable estate.
- A policy owned by a former spouse or other third party to comply with a divorce decree.

Occasionally, the underwriter will be asked to consider nontraditional third-party owner and/or payor arrangements. Examples of some of these nontraditional third-party ownership/payor sales situations are:

- A person other than a parent, legal guardian, or grandparent owning a child's policy.
- A friend named as owner.
- A parent, legal guardian, or grandparent owning a policy or paying premiums on an adult child or grandchild who is not a student.
- Brothers or sisters owning a policy or paying premiums on each other unless there would be a demonstrable financial loss based on a business or financial relationship.
- Adults owning policies or paying premiums on their parents or grandparents.

Because of the potential for anti-selection, LBL will generally not accept these arrangements. If there are unusual circumstances which the producer believes merit special consideration, the producer should call one of our underwriters before submitting the application.

Foreign Residence, Foreign Travel, Recent Immigrants, and Temporary U.S. Residents

Foreign Residence

Residence is defined as greater than 60 days outside of the United States. Preapproval by the Chief Underwriter is required before the case is written. We will only consider high net worth applicants who have either:

A substantial verifiable business interest in the United States, such as:

- Employment by a U.S. company but working outside the United States.
- Active ownership of a substantial business in the United States
- Active management of substantial property or investments in the United States which requires regular visits to the United States (or)

Ownership of a U.S. residence of substantial value where the applicant spends considerable time.

UNDERWRITING REQUIREMENTS

- All applications, exams, and related forms and paperwork must be completed in the United States (no exceptions). A Tax "Release and Disclosure Form" and a Foreign Residence questionnaire must be signed and submitted with the application.
- Permanent plans only (no term insurance can be considered)*, ages 18–80, with a minimum face amount of $500,000. ADB and COP are not available. Maximum face amount is subject to availability of reinsurance and the country of residence but will never be more than $6 million ($4.5 million in New York State).

  * VUL will be considered. Please contact the Underwriting Department or the Sales Team for additional information.
- Preferred Elite is not available, and in addition, cases may be declined or issued with a flat extra rating depending on the country of residence. Maximum medical rating available is Table-8. The Chief Underwriter will provide details at the time that you receive preapproval to write a particular case.
- The customer must be able to provide documentary identification as deemed necessary by the Chief Underwriter (copy of passport, Visa, National I.D., etc.).
- Annual mode or PAM modes only and funds must be paid in U.S. dollars.
- W8-BEN form required for non-U.S. citizens without a Social Security number unless not applicable according to the instructions at the top of the W8-BEN.
- No foreign politicians, public figures, missionaries, government leaders (including representatives to the U.N.), police, journalists, judicial personnel, military, or trade union officials. No U.S. or foreign missionaries or aviation cases.
- Inspection reports (from First Financial) will be ordered by the Underwriting Department on all cases.
- An attending physician statement (APS), in English, covering at least the past five years is required. Applicants aged 50 and above with no doctor visits within the past five years will not be considered. Translation of foreign language APSs must be completed by an impartial third party at the applicant's expense.
- All other age/amount requirements must be obtained (no exceptions).

Foreign Travel

Our guidelines classify each country into a category, either A, B, C, or D. Consideration will be given to applicants traveling to A, B, and C countries; travel to D countries will not be considered unless required by state laws or regulations. Since this list is subject to frequent change, you are encouraged to contact the Underwriting Department for up-to-date information on a country as it relates to a potential applicant. The current classification for a few sample countries is as follows:

A	B	C
Argentina Taiwan	Mexico	India Philippines

Travel of up to 60 days can be accepted as follows:

COUNTRY CATEGORY	BEST RATING AVAILABLE
A	Preferred Elite (subject to travel details)
B	Preferred Elite (subject to travel details)
C	Standard plus $1.00 flat extra per $1,000
D	Not Acceptable

NOTE: Foreign travel underwriting will continue to comply with various state laws and regulations.

Recent Immigrants

An immigrant who has lived in the United States for a minimum of six months, intends to become a permanent resident, and has a permanent visa may be considered for life insurance.

Illegal aliens, including those who have applied or may intend to apply under an amnesty program, will not be offered life insurance.

IMMIGRANTS FROM CANADA AND MEXICO

Special guidelines apply to Canada and Mexico based on their status as NAFTA signatories. We will consider for life insurance any Canadian citizens legally residing in the United States regardless of length of residence. There is no visa requirement, as the INS does not generally require Canadians entering the United States to acquire a visa.

We will consider for life insurance any Mexican citizens legally residing in the United States, regardless of length of residency, with a permanent visa or one of the following qualifying temporary visas: E(1) – treaty investor, E(2) – investor, G – representative to an international organization, H(1)(B) – professional temporary workers, I – foreign information media representative, J – exchange alien, L – intra-company transferees, O – aliens of extraordinary ability, or TN – qualifying professional under NAFTA agreement.

Temporary U.S. Residents

Foreign nationals residing six months full-time in the United States on one of the following types of temporary visas may be considered for life insurance:

E(1)	Treaty trader or investor
E(2)	Investor
E(3)	Professional worker from Australia
H(1)(B)	Professional temporary worker
H(4)	Spouses and children of H(1)(B) visa holders
L	Intra-company transferees
O	Aliens of extraordinary ability
TN	Qualifying professional under NAFTA agreement
V1, V2	Spouse and children of legal permanent residents who are principle beneficiaries of a family-based petition
Applicants married to a U.S. citizen (except in New York)	

Tobacco Use Guidelines

(The proposed insured must also meet all other eligibility criteria for the applicable rate class).

Preferred Elite – No tobacco in any form or nicotine substitute use (e.g., nicotine patch, gum, nasal spray) within 5 years (60 months) of the application and urinalysis negative for nicotine.

Preferred, Preferred Nonsmoker – No tobacco in any form or nicotine substitute use (e.g., nicotine patch, gum, nasal spray) within 3 years (36 months) of the application and urinalysis negative for nicotine.

Standard Select – No tobacco in any form or nicotine substitute use (e.g., nicotine patch, gum, nasal spray) within 2 years (24 months) of the application and urinalysis negative for nicotine.

Standard No Tobacco, Standard Nonsmoker – No tobacco in any form or nicotine substitute use (e.g., nicotine patch, gum, nasal spray) within 1 year (12 months) of the application and urinalysis negative for nicotine.

Preferred Smoker – Cigarette use allowed up to a maximum of 1 pack per day. Other forms of tobacco or nicotine use allowed.

NOTE: In the event that cigarette smoking or tobacco and nicotine substitute use is not disclosed on the application or examination, the appropriate smoker class will be assigned when the urine is positive for nicotine.

Occasional Cigar Use (Celebratory Cigar)

Occasional cigar users may qualify for the Preferred, Preferred Nonsmoker, and Standard Select rate classes if all of the following requirements are met:

- Cigar use must be limited to no more than 12 per year (1 per month).
- Current urinalysis must be negative for nicotine (cotinine).
- The cigar use must be disclosed on the application and/or examination and not after receiving a positive urinalysis or indication of use from medical records or other third-party source.
- The proposed insured meets all other eligibility criteria for the applicable rate class.
- Must not have tested positive for nicotine with another carrier for the time period required to be tobacco-free for the requested rate class.

Medical Requirements for Seniors

Life insurance sales to seniors present both opportunities and challenges. One challenge is when no medical history or primary care physician is disclosed in the application or paramedical exam.

Avoid Underwriting Delays

The overwhelming majority of seniors have regular contact with a medical professional for health maintenance or ongoing medical conditions. Successful underwriting of the elderly depends on good documentation of these medical contacts and conditions, especially now that physician exams have been replaced with paramedical exams.[11] And while a claim of having no regular physician and no recent medical history might be a good thing coming from a young customer, it poses a dilemma when the customer is age 65 or older. Producers can help avoid underwriting delays and additional requirements in these cases by taking extra care in requesting and recording medical history and physician information.

Physician Exam

When, after careful questioning, a customer age 65 – 69 is unable to provide the name of a primary care physician he or she has consulted within two years for at least a check-up, extra measures may be necessary which will include a physician (as opposed to paramedical) exam.

Postponing An Application

When a customer age 70 or older does not have an established primary care physician whom they have seen for ongoing medical surveillance and age appropriate testing and follow-up, then it will be necessary to postpone that application. In this age group, in the absence of regular check-ups and appropriate health maintenance, the risk of undiagnosed medical issues is higher than the Company can assume.

[11] Physician exams have been replaced with paramedical exams for all but the largest amounts of coverage.

Retention and Reinsurance Limits

RETENTION LIMITS

	ISSUE AGES	STANDARD - TABLE 6	TABLE 7 - TABLE 16
Single Life Plans	0-69	$5,000,000	$2,500,000
Single Life Plans	70+	$3,000,000	$1,500,000
Joint Life Plans	All Ages	$5,000,000	$2,500,000

ISSUE AGES	STANDARD - TABLE 4	TABLE 5 - TABLE 6	TABLE 7 - TABLE 16
0-69	$45,000,000	$35,000,000	$20,000,000
70-75	$30,000,000	$30,000,000	$15,000,000
76-80	$20,000,000	$15,000,000	$10,000,000
81-85	$5,000,000	$0	$0
86+	$0	$0	$0

AUTOMATIC REINSURANCE LIMITS[12]

Automatic Binding Limits[13] The automatic limit is the maximum amount to which we can bind reinsurers on our own authority without sending them the underwriting file.

ISSUE AGES	STANDARD - TABLE 4	TABLE 5 - TABLE 16
0-75	$65,000,000	$65,000,000
76-80	$40,000,000	$40,000,000
81-85	$30,000,000	$0
86+	$0	$0

JUMBO LIMITS

Jumbo Limits[13] The jumbo limit is the maximum amount of life insurance that may be in force and applied for in all companies without the need to send our underwriting file to reinsurers.

[12] Applies to all life insurance with LBL and other members of the Allstate Financial group combined.

[13] For New York products, auto bind and jumbo limits are half of the amounts shown in the charts above.

Survivorship Products

For survivorship (second-to-die) products, if the retention, automatic, or jumbo limits indicated by these tables are different for the two lives, the larger amount applies. If one life is uninsurable, use the amount for the insurable life.

Enhanced Retention Limits

Lincoln Benefit Life's enhanced retention limit is for customers who have maximized the reinsurance market's automatic capacity or prefer, for personal reasons, not to have their application underwritten by reinsurers. Cases LBL can reinsure on an automatic basis, i.e., without sending underwriting papers to reinsurers for approval, are not eligible for enhanced retention. LBL can accept up to a total of $10 million of death benefit per proposed insured within the following guidelines:

- Applicable to permanent plans only.
  (Existing LBL coverage reduces available retention on the new policy.)
- Enhanced retention is not available where a business exception has been given on the regular retention amount.
- The amount above the regular retention amount will be charged a temporary flat extra for five years. (*Flat extras vary according to product and age*). However, since we do not have the administrative capability to charge a flat extra on Preferred Elite cases, customers who qualify for Preferred Elite will be given Preferred Nonsmoker rates without a flat extra.
- Limited to cases Table 4 or better and ages <80.
- Legacy Secure SL flat extras are based on the younger of the two ages.
- The customer must sign an amendment at the time of policy delivery, acknowledging acceptance of the flat extra premium.

Authorized Companies

PARAMEDICAL

These companies are authorized to perform paramedical and medical exams on behalf of Lincoln Benefit Life Insurance Company.

- **ExamOne, Inc.**
  Website: www.examone.com
  Phone: 800.768.2071

APS RETRIEVAL

These companies are authorized to obtain Attending Physician Statements (APS) on behalf of Lincoln Benefit Life Insurance Company.

- **Examination Management Services, Inc. (EMSI)**
  Address: APS Service
  8300 Central Park Dr.
  Waco, TX 76712
  Phone: 800.530.0560

- **APS Workflow**
  Address: APS Workflow
  750 Goddard Avenue
  Chesterfield, MO 63005
  Phone: 636.812.0166

INSPECTION

These companies are authorized to perform inspection reports on behalf of Lincoln Benefit Life Insurance Company.

- **First Financial Underwriting Services, Inc. (FFUS)**
  Website: www.firstfin.com
  Phone: Customer callback for interview 800.570.3477 (8:30 AM to 8:00 PM Eastern Time)

- **ExamOne, Inc.**
  Website: www.examone.com
  Phone: 800.768.2071

Super Sherlock Underwriting Program

Super Sherlock is an underwriting program that allows LBL's underwriters to apply select underwriting credits for a variety of medical impairments. If applicants are compliant with their physician's advice, have routine medical follow-up to control their health situations, and have a regular exercise program, then Super Sherlock may help them qualify for a better underwriting class. This program is based upon clinical research and is reviewed and updated annually.

GUIDELINES:

- Applicable to permanent fixed and variable life plans
- Ages 25–69, rated Table 6 or better
- The maximum improvement allowed is 4 tables or one preferred/standard class (for example, from Standard Select to Preferred or from Preferred to Preferred Elite)
- Both insureds can benefit on joint life plans
- Super Sherlock applies to cases with face amounts from $100,000 to a maximum of $5 million
- Super Sherlock doesn't allow for credits on applicants with stroke or TIA, cancer, alcohol or drug histories, or a combination of diabetes and coronary artery or other atherosclerotic disease; it isn't available on cases with flat extra ratings
- Significant ratable conditions must have been disclosed on the application or on the medical exam to be Super Sherlock-eligible

EXAMPLES OF SUPER SHERLOCK CREDITS:

- Normal treadmill stress tests
- Normal ultra-fast heart scan
- Normal echocardiograms
- Exceptional blood pressure levels
- Favorable homocysteine levels
- A regular exercise program
- Height and weight – ideal BMI
- Favorable family history
- Regular wellness exams and follow-up exams for any chronic conditions
- Exceptional cholesterol and HDL ratios

Field Guide to Medical Testing

MEDICAL TESTING AND EXAMINATION RESULTS

Medical tests can be influenced by external factors. These factors can result in abnormalities that may result in further testing and investigation. Many of these abnormalities can be due to being unprepared. The good news is that you can prepare and advise your applicants so that they are ready and in the very best condition to test for their insurance coverage.

BLOOD CHEMISTRY

Insurance companies, to assess a multitude of body processes, use blood studies. Blood testing is sometimes referred to as sequential multiphasic analyzer (SMA). Blood chemistry is performed on blood serum, the watery thin part of the blood. Drawn blood samples need to be centrifuged (spun down to separate the blood cells from the blood serum). The sooner this is done, the better or more reliable the results are. Temperature and delayed centrifugation can contribute to blood sample deterioration.

Any meals or fluids taken prior to a blood sample can create unwanted problems, which hit a peak at around three to four hours after ingestion. Blood sugar levels and blood fats (cholesterol and particularly triglycerides) rise during this time frame. Fat deposits in the blood may also end up in abnormal or elevated values.

A general guideline to use is advising applicants to avoid, if possible, any food or drink during the four hours prior to testing. Water is acceptable, but it's wise to avoid any coffee and soft drinks. Avoid all caffeine products on the day of testing. If the applicant is a diabetic, be sure to request that a Hemoglobin A1c level is also completed.

Hemoglobin A1c levels help assess diabetic control and are part of our blood chemistry testing on applicants aged 40 and up for all face amounts that require a blood profile. While a current blood sugar shows only a snapshot of the current level, the A1c shows the average blood sugar level within the last 90 days. This will provide a broader picture of the applicant's overall degree of control for the underwriter to review.

N-Terminal Pro B-Type Natriuretic Polypeptide (NT-ProBNP) is a part of our blood chemistry testing on applicants aged 65 and up applying for ≥$100,000. ProBNP has a prognostic value for congestive heart failure, pulmonary hypertension, chronic obstructive lung disease, and coronary heart disease, among other disease processes.

On all male applicants aged 50 and up applying for >$500,000, a Prostate-Specific Antigen (PSA) will also be ordered. The PSA is used as a screening tool and method for detection of prostate cancers. It is also used as a monitor of the disease after treatment.

DRIED BLOOD SPOT (DBS)

Dried blood spot testing yields only a small amount of information to the underwriter. DBSs are not accepted as testing that fulfills LBL's medical requirements. Any questions regarding DBS should be directed to the Underwriting Department before the exam is scheduled.

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COMPLETE BLOOD COUNT WITH DIFFERENTIAL AND PLATELETS (CBC)

The CBC with differential count is additional blood testing which gives information about the hematologic system. Again, delayed centrifugation and shipping of the specimen to the laboratory can contribute to deterioration. Some prescription drugs may also interfere with the results. The CBC can provide excellent information to the underwriter.

A CBC is never a routine underwriting requirement but occasionally is required with certain health histories. Your underwriter will advise if one is needed.

URINALYSIS, THE HOME OFFICE SPECIMEN (HOS)

A good rule to follow here is avoiding all heavy exercise on the day of the test. If possible, do not urinate for the three- to four-hour time frame prior to testing. This will help ensure your applicant can provide an adequate specimen and avoid an unwanted return visit to the testing facility. Heavy exercise may cause increased amounts of protein in the urine, along with red blood cells.

In some cases, the underwriter will require a full drug screen. Drug screening is performed on urine.

ORAL FLUID TESTING

As a rule, oral fluid testing is not allowed except on approved simplified underwriting programs. If there are any questions, please contact the Underwriting Department first.

BLOOD PRESSURE CHECK AND HEART RATE

Avoid any possible white-coat syndrome by having the applicant relax while waiting. Don't rush into the testing facility or get stressed out with the usual daily pressures or traffic on the way to the examination. Don't use any caffeine products on the day of the exam. Refrain from smoking at least two hours prior to the test. Better yet, refrain from smoking at all on the day of the exam. Smart Tip: Instruct your customers to request a wide cuff for their blood pressure test, if their arm circumference measurement is more than 14 inches in diameter. The reason is that the smaller cuff used may give a higher reading on the larger arm. It's important to get the very best readings possible. If the applicants are hypertensive, be sure they have their medication(s) and that they take them on the day of testing. Be aware that some decongestants and asthma medications can raise blood pressure.

THE ELECTROCARDIOGRAM (EKG) AND THE TREADMILL STRESS TEST (GXT)

The 12-lead resting EKG is taken in a reclining position. Home or office testing is sometimes complicated by the applicant taking the EKG in a sitting position. This can result in abnormal wave changes. The portable EKG machine can also be influenced by other electrical equipment that is plugged in in the room. Our four-hour guideline can also help to eliminate other unwanted changes due to food and liquids in the body.

For treadmill stress testing, have your applicants wear loose, comfortable clothing and shoes. Some medications can interfere with the test results (Beta-blockers). Before any testing, applicants need to consult with their own personal attending physicians to see whether they can discontinue these medications two days before the treadmill is completed. Doing so will help ensure that the examiner will get the very best results.

EXAMINATIONS

Have your applicants take with them a list of all prescription medications currently being taken, along with the dosage. This is to ensure that no medications are forgotten.

Good historians give detailed and accurate summaries of their health histories. Any unfinished or questionable areas may result in underwriting delays. It's important that the examiner receives a complete history and details. For older applicants, advise them to bring a list of all their physicians' names, addresses, phone numbers, and dates consulted.

LAB VITALS

At some ages and face amounts, Lincoln Benefit Life will require only a blood chemistry panel and HOS with lab vitals. Lab vitals are used in lieu of a full paramedical exam. Lab vitals include height, weight, blood pressures, and heart rate.

PULMONARY FUNCTION TESTING (PFT)

When underwriting requests pulmonary function testing, the FEV 1.0 and FVC are needed. The FEV 1.0 means forced expiratory volume in one second, while FVC is forced vital capacity.

PFTs are used to determine the extent of any pulmonary abnormality. If your applicants have asthma, bronchitis, chronic obstructive pulmonary disease (COPD), or any obstructive or restrictive disease, be sure to have them bring their inhaler (bronchodilator) to the testing facility. FEV 1.0 and FVC are simple tests, but this is where some of the problems begin in obtaining a good result. Applicants need to listen carefully to the examiner's instructions in taking the test and give their best effort. Pulmonary function studies are performed before and after the use of their bronchodilator spray. Correctly done, these tests will give the underwriter an excellent airflow assessment.

CHEST X-RAY

While not a routine requirement, a chest x-ray may be needed in connection with certain health conditions and medical history. If the proposed insured has had such an x-ray completed recently, the Underwriting Department may accept the attending physician's statement (APS) along with the radiologist's interpretation, without requiring to view the actual film. Prior to application submission, please contact the Underwriting Department to determine what will be required.

INSPECTION REPORTS AND TELEPHONE INTERVIEWS

Inspection reports, although not a part of the medical examination and testing, are required at ages 16–74 for face amounts of $1,000,001 and up and at ages 75+ for face amounts of $500,000 and up.

A consumer reporting company compiles the inspection report. It contains important information to the underwriter when dealing with questions regarding personal and business finances, insurable interest, hazardous sports or activities, environment, health history, and other areas of insurability.

The personal telephone interview is a report that may contain some of the same type of information as an inspection report but has the proposed insured as the only source. Be certain to get the correct phone number(s) and best time(s) for the inspector to call your applicant.

THE SENIOR ASSESSMENT (SA)

The Senior Assessment is required at ages 70+ for all face amounts. This includes both the **Delayed Word Recall** and the **Timed Up and Go.**

Delayed Word Recall (DWR): The proposed insured is given a list of 10 words that he or she is asked to recall in the examination interview. DWR is a cognitive screen and not a diagnostic for Alzheimer's disease.

Timed Up and Go (TUG): The proposed insured is asked to sit in a straight back chair, stand up, and walk 10 feet; turn around and walk back to the chair and sit down. The process is timed from start to finish. The TUG test is a screening tool for frailty. Frailty is recognized as a significant mortality risk in life underwriting.

Clear difference.

LBL strives to make the underwriting process consistent, straightforward, and tuned in to your customers' needs. We're continually searching out new ways to improve our programs and competitiveness.

You'll have a hard time finding an underwriting team with more commitment to serving you and your customers.

The Underwriting Advantage

LBL's focus on the customer has resulted in a strong set of underwriting guidelines that could make a big difference in the lives of your customers.

Age last birthday underwriting.

Competitive build charts.

Best preferred offers for treated hypercholesterolemia and treated hypertension.

Preferred offers for mild depression cases; complete RBBB cases; certain personal cancer history cases; those recovering from alcoholism or drug abuse with 10+ years of abstinence; and best cases of epilepsy, obstructive sleep apnea, ulcerative colitis, and rheumatoid arthritis.

Standard offers for limited coronary artery disease with favorable risk factors, controlled Type 2 diabetics aged 50+, and "active surveillance" prostate cancer cases.

LINCOLN BENEFIT LIFE
AN ALLSTATE COMPANY

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This guide presents our usual handling of common underwriting situations. Actual underwriting decisions take into account a wide range of information, not all of which can be anticipated by this guide, and therefore may vary based on the specifics of each case.

Not FDIC, NCUA/ NCUSIF insured	Not insured by any federal government agency	Not a deposit	No bank or credit union guarantee	May go down in value

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