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# Single Premium Whole Life

## UNDERWRITING GUIDELINES

**LifeScape<sup>®</sup>**

**For Agent use only.**

Product availability, rates and features vary by state.



**Assurity<sup>®</sup>**

*Life Insurance Company*

## Non-Medical Limits and Examination Requirements

### Amount of Coverage

- To calculate the amount of coverage used in determining underwriting requirements, add up the total amount of life coverage applied for on this application and/or pending, including term riders, plus other insurance in-force with Assurity over the past two years and excluding any group insurance, Acci-Flex Accidental insurance or Simplified Whole Life insurance.
- If applying for coverage on a juvenile (ages 0 through 16), one least one parent must carry twice the child's in-force coverage plus the amount applied for.
- Telephone inspections will be required on cases \$250,001 and up.
- The applicant must be a U.S. citizen or a permanent resident to apply for coverage.

On Single Premium Whole Life, **if the total in force and pending** (reference bullet #1 above regarding amount of coverage) is:

- Greater than or equal to \$695,000 for ages 0-60, or
- Greater than or equal to \$435,000 for ages 61 and up, or
- If the proposed insured has not seen a physician in the past two years,

Set up exam/laboratory requirement using the tobacco and non-tobacco medical requirement guidelines on the next page.

Otherwise, do not set up any exam/laboratory requirements unless instructed by an underwriter. The underwriter will request medical records if needed.

**Note: These limits are subject to change at any time. Assurity reserves the right to require a medical exam and/or other medical requirements on any proposed insured.**

**Exam Limits Chart** (effective Feb. 1, 2008)

Age	Amount	Non-Med or Exam	UA	BLD	EKG	TMT
<b>0-14</b>	Up to \$300,000 We may request a statement from the personal physician	Non-Med	No	No	No	No
<b>15-35</b>	To \$99,999 \$100,000 to \$250,000 \$250,001 to \$750,000 \$750,001 to \$2,000,000 \$2,000,000 and up	Non-Med Exam* Exam* Exam* MD	No Yes Yes Yes Yes	No No Yes Yes Yes	No No No Yes Yes	No No No No No
<b>36-45</b>	To \$99,999 \$100,000 to \$200,000 \$200,001 to \$500,000 \$500,001 to \$2,000,000 \$2,000,001 and up	Non-Med Exam* Exam* Exam* MD	No Yes Yes Yes Yes	No No Yes Yes Yes	No No No Yes No	No No No No Yes
<b>46-55</b>	To \$75,000 \$75,001 to \$150,000 \$150,001 to \$300,000 \$300,001 to \$2,000,000 \$2,000,001 and up	Non-Med Exam* Exam* Exam* MD	No Yes Yes Yes Yes	No No Yes Yes Yes	No No No Yes No	No No No No Yes
<b>56-65</b>	To \$50,000 \$50,001 to \$100,000 \$100,001 to \$250,000 \$250,001 to \$2,000,000 \$2,000,001 and up	Non-Med Exam* Exam* Exam* MD	No Yes Yes Yes Yes	No No Yes Yes Yes	No No No Yes No	No No No No Yes
<b>66 and up</b>	To \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1,000,000 \$1,000,001 and up	Non-Med Exam* Exam* MD MD	No Yes Yes Yes Yes	No No Yes Yes Yes	No No Yes Yes No	No No No No Yes

*\*Exam – If a TeleApp is completed or if all questions to the app are completed, we can waive this and use an abbreviated exam in which the paramed records height, weight, blood pressure and pulse.*

## Additional Information Regarding Examinations

Our authorized paramedical firms have the examination forms, containers and blood draw kits in stock.

**To qualify for any of the Company's preferred underwriting classifications, the full blood profile must be completed.**

The non-medical and examination limits for life insurance is based upon the amount issued or administered by Assurity Life Insurance Company, including term riders, in the last **two** years and the amount **currently** being applied for. Exclude group insurance.

### Authorized Paramedical Firms:

<b>American Paraprofessional Systems, Inc. (APPS)</b>	<b>(800) 635-1677</b>
<b>Examination Management Services (EMSI)</b>	<b>(800) 872-3674</b>
<b>ExamOne Worldwide</b>	<b>(800) 873-8845</b>
<b>Portamedic Hooper Holmes</b>	<b>(800) 765-1010</b>

For significant medical health histories or if the applicant has been declined previously, contact Home Office Underwriting prior to scheduling an examination.

**The Company reserves the right to require a medical examination or other medical requirements on any proposed insured.**

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## Additional Underwriting Information

### ADDITIONAL UNDERWRITING INFORMATION TO EXPEDITE PROCESSING

Underwriting action often depends on answers to a number of basic questions specific to the condition or situation. In addition to information provided in the application, the underwriting process can be expedited by providing such additional underwriting information as outlined below. On a separate sheet of paper attached to the application, give the information as specified for conditions or situations listed 1 through 13. For any condition or situations not listed, please give information according to section 14.

#### 1. Arthritis

- Applicant's name
- Type of arthritis
- Joints and areas involved
- Currently prescribed medications and treatment
- Name, address and phone number of all physicians and medical facilities

#### 2. Asthma, emphysema, or bronchitis

- Applicant's name
- Number of attacks in the past 12 months
- Date of last attack
- Hospitalizations due to respiratory condition
- Date of last hospitalization (if any)
- Currently prescribed medications and treatment
- Name, address and phone number of all physicians and medical facilities

**Additional Underwriting Information** (continued)**3. Back or neck pain or problems**

- Applicant's name
- Diagnosis (sprain, strain, herniated disc, etc.)
- Area of the back or neck affected
- Date of last symptom
- Currently prescribed medications and treatment
- Date of last treatment
- Name, address and phone number of physician and medical facilities

**4. Diabetes or glucose metabolism abnormalities**

- Applicant's name
- Diagnosis
- Date of onset or diagnosis
- Currently prescribed medications and treatment
- Date(s) of any hospitalizations
- Related conditions – eye disorders, kidney disorders, heart disorders, recurrent infections, circulatory problems, amputations, skin ulcers
- Other conditions/symptoms due to diabetes
- Name, address and phone number of physician and medical facilities

**5. Epilepsy or seizure**

- Applicant's name
- Type of epilepsy or seizure
- Date of onset or diagnosis
- Date of last seizure
- Currently prescribed medications or treatment
- Name, address and phone number of all physicians and medical facilities

**6. Heart attack, angina or coronary artery disease**

- Date of onset or diagnosis
- Diagnosis
- Date of last symptoms
- Tests completed or prescribed
- Currently prescribed medications and treatment
- **Name, address and phone numbers of all physicians and medical facilities**

**7. Heart murmur**

- Applicant's name
- Date of onset or diagnosis
- Type of murmur
- Restrictions to activities
- Currently prescribed medications and treatments
- Name, address and phone number of physician and medical facilities

**8. High blood pressure**

- Applicant's name
- Date of onset or diagnosis
- Currently prescribed medications or treatment
- Name, address and phone number of physicians and medical facilities

**Additional Underwriting Information** (continued)**9. Kidney or urinary tract disease or disorder**

- Applicant's name
- Disease or disorder
- Currently prescribed medications and treatments
- Tests completed
- Name, address and phone number of physician and medical facilities

**10. Stomach and/or digestive tract disorders**

- Applicant's name
- Diagnosis
- Date of onset
- Date of last symptoms
- Currently prescribed medications and treatment
- Name, address and phone number of physicians and medical facilities

**11. Tumor, polyp or cyst**

- Applicant's name
- Diagnosis
- Location of growth
- Date of removal
- Currently prescribed medications and treatment
- Follow-ups planned
- Name, address and phone number of physician and medical facilities

**12. Driving under the Influence (DUI)**

- Applicant's name
- Date of offense
- Number of DUI offenses
- License currently suspended
- Current employment

**13. Drug or alcohol abuse**

- Applicant's name
- Types of drugs or alcohol used
- Dates of last drug or alcohol use
- Treatment dates
- Current affiliation in support group - Alcoholics Anonymous (AA), Narcotics Anonymous (NA)

**14. All other medical conditions**

- Applicant's name
  - Diagnosis
  - Date of onset or diagnosis
  - Residual or ongoing symptoms
  - Date of last symptoms
  - Tests completed or prescribed
  - Currently prescribed medications or treatment
  - Names, addresses and phone numbers of all physicians and medical facilities
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## Product Highlights

<b>Issue Ages:</b>	Non tobacco: 0 through 80 Tobacco: 16 through 80 (All applications submitted as non-medical)
<b>Minimum Face Amount:</b>	\$10,000 for issue ages 0 through 54 \$5,000 for issue ages 55 and older
<b>Coverage:</b>	To age 121
<b>Policy Fee:</b>	\$75
<b>Dividend Options:</b>	1. Paid in cash each year 2. Buy paid-up additions 3. Reduce loans with excess to buy paid-up additions

## Automatic Riders Where Approved:

**Accelerated Death Benefit:** (Two options available)

**Terminal Illness Option:** (Death is expected within 12 months.) Available at all ages. Up to 75 percent of net amount of insurance may be paid in lump sum or in any other manner agreed upon. Subject to a \$250,000 overall limit.

**Long-Term Care/Home Care Option:** Available at age 65. Up to 50 percent of net amount of insurance; or, 36 monthly payments of 2 percent of net amount of insurance. Benefit is paid after insured has been confined or received home care for three months.

Universal life death benefits are reduced by the amount of all accelerated death benefit advances and unpaid interest on those advances. Prior to death, the insured can repay part or all of any advance. Repaid amounts are applied to the death benefit. Benefit is not available if policy is issued substandard.

## About Assurity

Assurity Life Insurance Company's origins are rooted in a 120-year legacy of providing long-term security to policyholders that has earned generations of customers' confidence and trust.

Assurity Life serves customers across the nation, offering disability income, critical illness, accident, long-term care and life insurance, annuities and specialty insurance plans through our representatives and worksite distribution.

With assets exceeding \$2 billion, Assurity Life has built a reputation for "best in class" service and sound, conservative business practices with a disciplined approach to financial management. Headquartered in Lincoln, Neb., Assurity Life has earned a high rating from A.M. Best Company, one of the insurance industry's leading independent analysts. For more information about this rating, please visit [www.ambest.com](http://www.ambest.com) or [www.assurity.com](http://www.assurity.com).

We're proud of our history of integrity, financial accountability...and helping people through difficult times.

## Revisions to this Product Guide

Date	Page	Update
9/15/2010	2	Reworded information
1/19/2010	4-6	Added the “Additional Underwriting Information to Expedite Processing” section
1/19/2010	8	Added the “Revisions” page