



LIFE INSURANCE

Individual Insurance – underwriting handbook for advisors

THE MANUFACTURERS LIFE INSURANCE COMPANY



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About this Handbook

The Underwriting Handbook for Advisors is designed to provide you with a basic overview of the more common medical conditions and diseases encountered in underwriting.

It's an important tool that can help you when you're writing a life insurance application, particularly when you're reviewing your client's medical history.

It provides a brief description of the condition or disease, lists the risk factors which will influence the final assessment and provides possible underwriting ratings.

The Handbook provides you with the background you need to gather the details an underwriter will need to assess a specific condition. By providing this information up front, you'll fast track your application by giving your underwriter a head start in developing a tentative assessment and you'll help Manulife provide you with the best possible offer, as quickly as possible.

It's important to understand that it provides a preliminary rating estimate only, since it's difficult to assess the risk without the complete picture. Final offers from underwriting may differ, depending on all the facts.

The information will also help you prepare your client for a possible medical rating, which should result in better outcomes when you deliver the policy to your client.

How this Handbook is organized

The Handbook is organized into two major sections: medical conditions (impairments) and avocations (non-medical risks).

The information is organized as follows:

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
<p>Provides the name of the impairment, including a short description.</p> <p>Conditions are listed alphabetically with subtypes alphabetically listed within the category.</p>	<p>This is the criteria the underwriter uses to classify the risk.</p>	<p>Lists the medical requirements the underwriter is likely to request in addition to the regular “age” and “amount” medical requirements.</p> <p>Lists the specific details to include so the underwriter can award the maximum possible credits available and make the most competitive decision from the outset.</p> <p>Helps focus the APS requests to ensure the correct information is requested from the doctor up front, streamlining the underwriting process by significantly reducing the need for subsequent reports.</p>	<p>Shows the classification or rating for the impairment, based on the factors and requirements presented.</p> <p>For most conditions, provides a sample decision for a “best case” scenario, “typical case” and “worst case” rating.</p>

Acronyms and short forms used in this Handbook

Acronyms and short forms			
APS	Attending Physician’s Statement	FEV	Forced Expiry Volume
ASD	Atrial Septal Defect (congenital heart disorder)	GI	Gastrointestinal
ATP	Airline Transportation Pilot certificate	IFR	Instrument Flight Rating
CAD	Coronary Artery Disease	Lipids	Fats in the blood (e.g. cholesterol)
COPD	Chronic Obstructive Pulmonary Disease	MVR	Motor Vehicle Report
CPAP	Continuous Positive Airway Pressure	PAF	Paroxysmal Atrial Fibrillation
CT	Computed Tomography Scan	PSA	Prostate Specific Antigen
DUI	Driving Under the Influence	PVD	Peripheral Vascular Disease
EKG	Electrocardiogram	TIA	Transient Ischemic Attack
ER	Emergency Room	VSD	Ventral Septal Defect (congenital heart disorder)

Family history is important for health

Family history (parents and siblings) is an important risk factor in the assessment for insurance products. Some factors for determining risk will depend on the disease diagnosed and the age of onset, however, advancements in this field develop rapidly and our approach is constantly evolving.

The World Health Organization describes a risk factor as: Any attribute, characteristic or exposure of an individual that increases the likelihood of developing a disease or injury. Some examples of the more important risk factors are underweight, unsafe sex, high blood pressure, tobacco and alcohol consumption, and unsafe water, sanitation and hygiene.

Risk factors for disease can be reduced by eating a healthy diet, getting enough exercise, and not smoking. Family members often share their environment, lifestyles, and habits, contributing to family history being a risk factor for developing a wide range of diseases, including: heart disease, stroke, diabetes, and cancer. Awareness of family history can help reduce risk factors for developing health problems through motivation to make better choices.

Key features of family history that may indicate an increased risk are:

- Diseases that occur at an earlier age than expected (10 to 20 years before most people get the disease)
- The same disease in more than one close relative
- Certain combinations of diseases within a family (for example, heart disease and diabetes)

People with a family history of disease may have the most to gain from lifestyle changes and screening tests, prompting a change in unhealthy behaviors like smoking, inactivity, and poor diet. In many cases, adopting a healthier lifestyle can reduce the risk for diseases. Screening tests (such as mammograms and colorectal cancer screening) can detect diseases like cancer at an early stage, when they are most treatable. Screening tests can also detect disease risk factors like high cholesterol and high blood pressure, which can be treated to reduce the chances of getting a disease.

Please note: Bill S-201 became law on May 4, 2017 and prohibits the use of any genetic test information in underwriting applications for insurance policies. The penalty for breaking the law is a fine of up to \$1 million and/or imprisonment for up to 5 years.

Medical impairments

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
<p>Alcohol Misuse and Alcoholism Alcohol consumption considered as alcohol abuse, dependence, at risk and heavy use.</p>	<ul style="list-style-type: none"> ■ Current age ■ Amount of alcohol declared and pattern of use ■ Any diagnosis of abuse or dependence ■ How long abstinent or consuming in moderation ■ Any relapses ■ Member of a self-help group ■ Treatment with medication ■ Any co-morbid conditions ■ Any medical complications ■ Pattern of use: daily, binge drinking, etc. ■ Any association with drug use or emotional disorder 	<p>Requirements: APS, MVR, blood and urine tests, Alcohol Usage Questionnaire</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of medical treatment and any psychiatric/psychological report ■ Document any residential care, including dates and length of treatment ■ Clearly outline any favourable aspects such as continued employment, attendance at self-help groups, etc. 	<p>Ratings depend primarily on applicant's age, time since last use, pattern of use, and any co-morbid factors</p> <p>Best case (over age 30 and >5 years since last consumption): standard</p> <p>Typical case: 150–200%</p> <p>Worst case: Decline</p>
<p>Anemia A reduction in the number of red blood cells due to blood loss, failure of the bone marrow to produce sufficient cells or premature destruction of the cells.</p>	<ul style="list-style-type: none"> ■ Type of anemia ■ Cause of anemia, if known ■ Details of testing done and referrals to specialists (include dates, names of tests and doctors seen) ■ Blood test results ■ Treatment ■ Medications ■ Any concurrent impairment ■ Age 	<p>Requirement: Possibly APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of investigation and testing ■ Details of ongoing surveillance of the condition (including blood tests, electrophoresis) 	<p>Ratings depend on type of anemia, age and decision can range from standard to decline</p> <p>Iron deficiency anemia: usually standard when fully investigated and no underlying condition identified</p> <p>Aplastic Anemia: Usually decline but could reconsider once resolved</p> <p>Hemolytic anemia: standard–200% but rating could be higher depending on type and severity</p> <p>Sickle cell disease: standard to decline</p>
<p>Aneurysm Abnormal dilation of an artery.</p>	<ul style="list-style-type: none"> ■ Type or location of aneurysm ■ Date of diagnosis ■ Cause ■ Size and stability of aneurysm ■ Currently present ■ Treatment or surgery ■ Smoking history ■ Blood pressure control ■ Follow ups ■ Co-morbid conditions such as high blood pressure, diabetes, CAD, alcohol misuse, COPD, smoking 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of all tests and details of ongoing surveillance ■ Details of any lifestyle modifications ■ Details of blood pressure and lipid control ■ Smoking history ■ Any residuals (good level of activity) 	<p>Can consider on a rated basis 6–12 months post-op depending on the type of aneurysm</p> <p>Abdominal:</p> <p>Unoperated:</p> <p>Small, stable x 2 years: standard to 200%</p> <p>Large (> 5 cm): decline</p> <p>Operated: average rating 150%</p> <p>Cerebral:</p> <p>Unruptured, small, no surgery: Standard to postpone</p> <p>Unruptured, large, no surgery: Decline</p> <p>Unruptured, small with surgery: Standard to Postpone</p> <p>Unruptured, large, with surgery: 150% to Postpone</p> <p>Ruptured aneurysm or AVM must have no residual deficit otherwise it's rated as intracerebral hemorrhage</p> <p>Thoracic:</p> <p>Unoperated: Decline</p> <p>Operated: 200% to Decline</p>

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
Angina Pectoris Chest pain caused by reduced blood flow to the heart due to coronary artery disease.	Refer to Coronary Artery Disease		Unable to consider until 6 months after onset or treatment
Angioplasty	Refer to Coronary Artery Disease		Unable to consider until 6 months after surgery.
Apnea/Sleep Apnea Breathing stops for a short period during sleep.	<ul style="list-style-type: none"> ■ Current age ■ Type of apnea (obstructive, central or mixed) ■ Severity ■ Treatment (CPAP or surgery) ■ Compliant with treatment ■ Date of last sleep study ■ Current height/weight ■ Concurrent impairments such as CAD, arrhythmia, PVD, hypertension ■ Smoking history ■ Alcohol use ■ Any history of accident 	Requirement: APS if moderate or severe apnea Fast track: <ul style="list-style-type: none"> ■ Details of sleep studies, treatment and compliance ■ Details of risk factor control e.g. build, medications and lifestyle modification (smoking, tranquilizers, alcohol use and misuse) 	Mild symptoms and no complications: Standard Moderate symptoms and no complications: Standard to 200% Severe symptoms and no complications: 150%–decline Higher ratings if applicant < age 50
Arteriosclerosis	Refer to Coronary Artery Disease, Stroke or Transient Ischemic Attack (TIA)		Unable to consider until 6 months after onset and treatment
Asthma Chronic inflammatory condition of the airways causing shortness of breath, which is triggered by allergens, irritants, cold air or exercise.	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis ■ Severity of symptoms ■ Frequency of attacks ■ Timing of attacks (day or night) ■ Type of medication and frequency of use ■ Compliant with medications ■ Medication side effects ■ Hospitalizations or ER visits ■ Limitations to activities ■ Smoking history ■ Concurrent impairments such as COPD, psychiatric disorder, alcohol abuse, CAD, underweight <p>We are more concerned with children or with older adult smokers with a recent diagnosis of asthma</p>	Requirement: APS selectively Fast track: <ul style="list-style-type: none"> ■ Details of recent pulmonary function tests, hospitalizations ■ Details of lifestyle modification (such as smoking cessation) ■ Level of activity and any limitations of daily activities ■ Asthma questionnaire ■ Asthma control 	Minimal and mild: standard to 150% Moderate: 150% to 200% Severe: 250% to decline Children Minimal to mild: standard to 150% if diagnosis was more than 12 months ago Moderate or severe: 200% to decline
Atherosclerosis	Refer to Coronary Artery Disease		Unable to consider until 6 months after treatment

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
<p>Atrial Fibrillation/Atrial Flutter Arrhythmia of the atria where it contracts chaotically.</p>	<ul style="list-style-type: none"> ■ Date of diagnosis and age at onset ■ Age of applicant ■ Frequency of attacks ■ Fully investigated ■ Paroxysmal vs Chronic ■ Treatment ■ Complications from treatment (e.g. drug toxicity or hemorrhage from anticoagulant) ■ Any underlying heart disease ■ Complications (e.g. stroke or congestive heart failure) ■ Any concurrent impairment (e.g. history of alcohol abuse, CAD, valvular disease, TIA, high blood pressure, diabetes, obesity, or stroke) 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of all cardiac investigations ■ Details of any prophylactic medication (e.g. blood thinners) ■ Outline any lifestyle modification ■ Current level of activity ■ Symptoms ■ Frequency of attacks 	<p>New diagnosis or new finding on insurance exam must be declined</p> <p>If there are underlying heart disorders it will be rated according to the cause</p> <p>Well controlled. Paroxysmal Atrial Fibrillation (PAF) with minimal attacks: fully investigated. ≤ 4 attacks per year: standard > 4 attacks: 150%</p> <p>If there is no CAD or other underlying heart disease: Rating ranges from 150% to 200% depending on age. If treated with ablation, could be standard.</p> <p>The older the client, the lower the possible rating</p>
<p>Bariatric Surgery Surgery for morbid obesity, most commonly known as "stomach stapling."</p>	<ul style="list-style-type: none"> ■ Pre-operative weight ■ Any co-morbid conditions (such as diabetes, hypertension, coronary disease, depression) ■ Date of surgery ■ Type of surgery ■ Any surgical complications ■ Outcome of surgery (weight loss, improvement of risk factors) 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of surgery and follow up ■ Illustrate positive improvements in lifestyle 	<p>Unable to consider until 6 months after surgery</p> <p>Assuming no complications: 6–12 months: rating based on pre-operative weight minus half of any weight loss >1 year: rating based on current weight and any complications and residual co-morbid conditions</p>
<p>Barrett's Esophagus Disorder in which the cells normally lining the lower esophagus are replaced by cells normally found lining the stomach. May occur due to esophageal injury caused by reflux. Barrett's esophagus may be a pre-malignant condition for esophageal cancer.</p>	<ul style="list-style-type: none"> ■ Current age ■ Ongoing risk factors ■ Type of testing done and results (endoscopy, biopsy) ■ Stable course ■ Medication/treatment ■ Response to medication treatment ■ Compliant with medical treatment and follow up ■ Complications (such as hemorrhage, perforation) ■ Any surgery 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of ongoing follow up (e.g. endoscopy) ■ Details of lifestyle modification (smoking cessation and alcohol use) ■ Medication to control reflux 	<p>Best case: standard if no dysplasia and good follow up done on a regular basis</p> <p>Average rating: standard</p> <p>Worst case: decline (if history of high-grade dysplasia and treated with medication only)</p>
<p>Blood Pressure</p>	<p>Refer to Hypertension</p>		
<p>Bypass Surgery</p>	<p>Refer to Coronary Artery Disease</p>		<p>Unable to consider until 6 months after surgery.</p>

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
Cancer	Refer to specific organ or type of cancer		Treatment must be completed
Cancer: Basal Cell Carcinoma (skin) A type of skin cancer that rarely spreads; more common in people with a history of sun exposure.	<ul style="list-style-type: none"> ■ Date of diagnosis ■ Pathology (confirmation of basal cell carcinoma) ■ Type of treatment ■ Date treatment completed ■ Confirmation that tumour has been removed completely ■ Any recurrence or spread ■ Ongoing risk factors like multiple dysplastic nevi and a propensity to develop other skin cancers ■ Any serious complications from treatment 	Requirement: APS Fast track: <ul style="list-style-type: none"> ■ Details of the doctor who has the pathology report including postoperative ■ Details of ongoing follow up ■ Details of lifestyle modification (sun screen, smoking cessation) 	Incompletely removed: postpone Complete excision: standard immediately on removal
Cancer: Breast Breast cancer is the most frequently diagnosed cancer in women and the second most frequent cause of cancer death. The lifetime risk of developing breast cancer is 1 out of 9 women (11.7%).	<ul style="list-style-type: none"> ■ Date of diagnosis ■ Type and stage of cancer ■ Size of tumour ■ Type of treatment ■ Date treatment completed ■ Any recurrence or spread ■ Reduced/eliminated risk factors (e.g. smoking) ■ Any serious complications from treatment ■ Follow ups including any tests 	Requirement: APS Fast track: <ul style="list-style-type: none"> ■ Details and date(s) of treatment, including any adjunct therapy (e.g. Tamoxifen) ■ Details of doctor who has pathology and hospital reports ■ Details of follow up (mammograms, bone scan, etc.) 	Underwriting can only be done once treatment has been completed and if the client is well followed. On higher stage/grade tumours, may only be able to consider > 10 years after last treatment. Ratings often are a combination of both table and reducing flat extras. A permanent rating might be needed. Best case: carcinoma in-situ – can consider at standard 2-3 years after treatment Typical case: unable to consider until 2 years after completion of treatment (chemo or radiation), then \$12/mil x 4 years
Cancer: Colorectal 2nd most diagnosed in males, 3rd in females	<ul style="list-style-type: none"> ■ Date of diagnosis ■ Pathology report including type, size and stage ■ Date treatment was completed ■ Any complications or spreading. ■ Reduced or eliminated risk factors ■ Complications from treatment ■ Any co-morbid conditions 	Requirements: APS Fast track: <ul style="list-style-type: none"> ■ Details of the doctor who has pathology report, hospital treatments reports ■ Details of regular follow ups ■ Family history 	Lowest grades might be insurable right away Best case is \$10.00/mil x 4 years
Cancer: Leukemia A progressive, malignant disease of the blood cells and blood forming organs (i.e. bone marrow and spleen).	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis ■ Type of leukemia and stage of cancer ■ Treatment ■ Date treatment completed ■ Any recurrence or secondary cancer 	Requirement: APS Fast track: <ul style="list-style-type: none"> ■ Details of the doctor who has pathology report, hospital treatment reports ■ Evidence of regular follow up 	The most common type of leukemia seen in underwriting is Chronic Lymphocytic Leukemia (CLL) which is insurable, if stable, low-stage disease and after 2 years post-diagnosis For other types of leukemia, depending on the type, coverage may not be available for 5 or more years following diagnosis. Very few cases can be offered Best case: 150–200% 5–10 years post treatment

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
<p>Cancer: Lung The most common type of cancer death for both men and women. The two main types of lung cancer are small cell and non-small cell.</p>	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis ■ Type of cell and stage of cancer ■ Type of treatment ■ Date treatment completed ■ Any recurrence or spread ■ Reduced/eliminated risk factors (e.g. quit smoking and quit date) ■ Any concurrent impairment (e.g. emphysema, COPD or chronic bronchitis) ■ Any serious complications from treatment 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of the doctor who has pathology report, hospital treatment reports ■ Evidence of regular follow up (CT scans, etc.) ■ Smoking habits 	<p>Only stage I is insurable. At best, would be postponed for 3 years from the end of treatment, and then best case scenario (stable, no recurrence, not smoking) is \$15.00/mil x 5 years</p>
<p>Cancer: Prostate This is the most common internal malignancy found in males. Lifetime risk is 12.8% and it's the 3rd leading cause of death for males.</p>	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis ■ Type of treatment ■ Date treatment completed or if active surveillance ■ Stage and Gleason score ■ Any recurrence or spread ■ Current PSA reading ■ Any serious complications from treatment 	<p>Requirement: APS, Blood Profile to include PSA if current results are not available</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of the doctor who has pathology report, hospital treatment reports ■ Details of the type of treatment, regular follow up and PSA testing ■ Biopsy results 	<p>< age 70: availability of coverage will depend on the stage, Gleason grade of the tumour and type of treatment</p> <p>Best case: (treated, PSA is undetectable) Standard</p> <p>Typical case: (prostatectomy or radiation, PSA favourable) \$5.00/mil for 3 years</p> <p>Active surveillance: Depending on age, an offer may be possible with regular documented follow ups</p>
<p>Cancer: Skin Borderline Malignancy Paget's disease, Bowen's disease (not genital), dysplastic nevus, Lentigo Maligna, Hutchinson's melanotic freckle.</p>	<ul style="list-style-type: none"> ■ Date of diagnosis ■ Pathology ■ Type of treatment ■ Date treatment completed ■ Confirmation that tumour has been removed completely ■ Any recurrence or spread ■ Ongoing risk factors like multiple dysplastic nevi and a propensity to develop other skin cancers ■ Any serious complications from treatment ■ Family history 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of the doctor who has pathology report, hospital treatment reports ■ Details of ongoing follow up ■ Details of lifestyle modification (sun screen, smoking) ■ Any recurrences 	<p>Incomplete excision: postpone</p> <p>Completely excised: standard immediately on removal; may qualify for preferred</p>

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
<p>Cancer: Skin Malignant Malignant change in the skin becomes more common with increasing age. Exposure to sunlight is an important predisposing factor in fair-skinned people.</p>	<ul style="list-style-type: none"> ■ Date of diagnosis ■ Type of cancer/tumour ■ Depth and thickness of tumour ■ Type of treatment ■ Date treatment completed ■ Any recurrence or spread ■ Ongoing risk factors like multiple dysplastic nevi and a propensity to develop other skin cancers ■ Any serious complications from treatment 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of the doctor who has pathology report, hospital treatment reports ■ Details of regular dermatology follow up ■ Family history ■ Date of diagnosis ■ Any recurrences 	<p>Malignant melanoma: If in-situ: standard</p> <p>Best cases are postponed for 1 year and then a rating of \$12.00/mil x 4 years applies</p>
<p>Cancer: Thyroid The most common malignancy of the endocrine system, generally more common in women. 5th most diagnosed cancer in females.</p>	<ul style="list-style-type: none"> ■ Type of thyroid cancer (papillary, follicular, anaplastic, etc.) ■ Pathology ■ Age of applicant ■ Type of treatment and date(s) performed ■ Any remission and for how long ■ Any recurrence ■ Any complications from treatment 	<p>Requirement: APS including pathology report and copies of lab tests</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of the doctor who has pathology report, hospital treatment reports ■ Details of regular follow up 	<p>Best case: lowest grade papillary tumour, can consider at standard 3 years after treatment</p> <p>Typical case: low to moderate grade papillary tumour, can consider standard 5–6 years following treatment</p> <p>Worst case: decline if anaplastic tumour</p> <p>Reconsideration may be possible for cases initially postponed for uninvestigated thyroid nodule which has subsequently been investigated and is proven benign</p>
<p>Congenital Heart Disease A variety of malformations of the heart that vary significantly in severity.</p>	<ul style="list-style-type: none"> ■ Current age ■ Specific congenital abnormality ■ Treatment including date(s) of any surgery ■ Medications ■ Smoking history ■ Any concurrent serious impairment ■ Any underlying coronary artery disease ■ Active lifestyle ■ Blood pressure and cholesterol readings ■ Family history 	<p>Requirement: APS to include echocardiogram</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of investigations, surgery, post operative reports (e.g. serial echos, EKGs) ■ Details of lifestyle modification ■ Activity level ■ Surgery ■ Symptoms, recurrences 	<p>Depending on the type of congenital abnormality, some cannot be considered until they have been surgically corrected. For the more serious abnormalities (transposition of great vessels) coverage cannot be considered until two years after surgery</p> <p>Less serious abnormalities such as small ASD, VSD, Paten Foramen Ovale: may be standard</p> <p>For more serious abnormalities (such as large ASD, VSD, coarctation of aorta, tetralogy of fallot): ratings</p> <p>Congenital valve disorders (two years after surgically corrected): postpone minimum 6 months from surgery and then 150% to 300% minimum</p>

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
<p>Chronic Obstructive Pulmonary Disease (COPD) A variety of diseases that cause chronic progressive irreversible airway obstruction.</p>	<ul style="list-style-type: none"> ■ Current age ■ Smoking history and current tobacco use ■ Build, any current weight loss ■ Treatment (oxygen) ■ Response to treatment ■ Severity of symptoms ■ Speed of disease progression ■ Alpha-1 antitrypsin deficiency or other biochemical abnormality ■ Any concurrent impairment (e.g. CAD, cancer, depression, malnutrition) ■ Any hospitalization ■ Pulmonary function tests (PFT's) including FEV1 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of lifestyle modification, recent pulmonary function test results ■ Level of activity ■ Exacerbations frequency and severity ■ Stability 	<p>The younger the applicant, the higher the rating</p> <p>Chronic bronchitis or Emphysema: Mild (FEV1 60–69): Standard–200% Moderate (FEV1 50–59): 50%–decline Severe (FEV1 40–49): 250%–decline Very Severe (FEV1 ≤ 39): decline</p> <p>Any use of oxygen is a decline</p>
<p>Coronary Artery Disease (CAD) The coronary arteries are unable to supply sufficient blood to the heart due to progressive narrowing of the arteries, thrombosis or vascular spasm.</p>	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis and age at onset ■ Severity of the disease (how many vessels and which ones) ■ Current symptoms ■ Treatment or surgery ■ Medications ■ Smoking history ■ Any co-morbid conditions such as diabetes, hypertension, coronary disease, depression or other concurrent serious impairment ■ Any history of congestive heart failure or arrhythmia ■ Active lifestyle ■ Blood pressure and cholesterol readings ■ Family history 	<p>Requirement: APS to include recent cardiac test results (e.g. angiogram, recent stress tests, perfusion)</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of the doctor who has complete records ■ Detailed list of medication ■ Details of any lifestyle change ■ Details on activity level 	<p>Unable to consider until 6 months post treatment (bypass surgery, etc)</p> <p>Decline if age at onset is ≤ 35</p> <p>Decline if Class 4 (heart failure, ejection fraction <40%)</p> <p>Class 2 CAD (average severity. Examples are 2 vessel disease and an ejection fraction of 50–55%). Ratings may be higher or lower if the CAD is Class 1 (e.g. 1 vessel disease and ejection fraction >55%), or Class 3 (e.g. more serious CAD, e.g. 3 vessel disease and ejection fraction <40–50%)</p> <p>Best possible ratings Class 2 CAD: Age ≤ 49: 225% 50–69: 200% 70–85: 150%</p> <p>Average ratings Class 2 CAD: Age ≤ 49: 225%–300% 50–69: 200% 70–85: 150–175%</p>
<p>Crohn's Disease A chronic inflammatory disease affecting any part of the GI tract. It has an unpredictable course and while complete remission can occur, the disease is generally chronic and relapsing and may require surgery.</p>	<ul style="list-style-type: none"> ■ Current age ■ Severity of the disease ■ Frequency of flare ups ■ Severity of symptoms ■ Medication ■ Hospitalization ■ Surgery ■ Weight stable or loss ■ Testing and follow up ■ Complications or concurrent impairments such as rheumatoid arthritis or other inflammatory disease ■ Any hospitalization ■ Any surgery ■ Extra-intestinal symptoms 	<p>Requirement: APS, colonoscopy – selectively</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Evidence of regular GI surveillance (colonoscopy) ■ Details of and frequency of flare ups or attacks ■ Stable weight ■ Active lifestyle 	<p>The younger the age at application and the more severe the course of the disease, the higher the rating. Severe symptoms currently may not be insurable until stabilized for 1 year</p> <p>Mild disease: standard is possible if stable course for 3 years</p> <p>Moderate disease (incl. steroid treatment): 200–225%</p> <p>Severe disease: 200–300% to postpone, depending on the age of client</p>

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
<p>Diabetes</p> <p>A group of metabolic disorders caused by inadequate production or use of insulin. It is a common disease affecting approximately 30 million people worldwide. Diabetes is usually irreversible, although controllable by diet, medication and exercise. Complications such as accelerated CAD, stroke and kidney disease result in reduced life expectancy.</p>	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis and age at onset ■ Type of diabetes ■ Treatment ■ Medication ■ Degree of control – blood sugar readings ■ Complications – nephropathy, neuropathy, retinopathy, cardiovascular disease ■ Current height and weight ■ Blood pressure ■ Smoking habits 	<p>Requirement: APS, blood tests including Hgb A1c, urine tests including microalbumin/creatinine ratio. If client ≥ 40: Obtain ECG</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of the doctor who has all records. Other doctors involved in treatment ■ Type of diabetes including age at onset ■ History of blood sugar control – copies of blood tests (incl. Hemoglobin A1c where possible) ■ Details of risk factor modification ■ Active lifestyle 	<p>For all diabetics: if currently smoking, then it's an individual consideration. Client could be declined.</p> <p>Type 1 also known as Insulin Dependent Diabetes (IDDM)</p> <p>Best case: (excellent control, no complications) 200%</p> <p>Typical case: 250%</p> <p>Worst case: (complications, poor or uncontrolled) decline</p> <p>Type 2 also known as Non-Insulin Dependent (NIDDM) or Adult Onset Diabetes</p> <p>Best case: (if \geq age 55, excellent control, no complications, treated by diet or oral medication, normal ECG) standard</p> <p>Typical case: 150%</p> <p>Worst case: decline</p>
Emphysema	Refer to Chronic Obstructive Pulmonary Disease		
Heart Attack	Refer to Coronary Artery Disease		
<p>Hypertension</p> <p>Primary, or essential hypertension is the most common type affecting 95% of people with hypertension. The cause is unknown but is thought to be the result of a complex interplay of factors which include demographic, family history and environmental factors. Secondary hypertension results from disorders of the kidney, endocrine or nervous system.</p>	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis ■ Type of hypertension (essential or secondary to another impairment) ■ Medication/treatment ■ Response to medication treatment ■ Current blood pressure readings and history of readings for past two years (demonstrate stable course) ■ Compliant with medical treatment and follow up ■ Any concurrent impairment (e.g. CAD, stroke, kidney disease, build) 	<p>Requirement: Vitals</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Record of blood pressure readings ■ Details of any cardiac investigation ■ Details of risk factor modification ■ Active lifestyle 	<p>Rating depends on severity of hypertension</p> <p>Most cases can be offered standard if well-controlled and compliant with medication</p>
Myocardial Infarction	Refer to Coronary Artery Disease		
<p>Pulmonary Nodule</p> <p>A small shadow found on chest X-ray which may be caused by a benign cyst, infection or abscess or granuloma.</p>	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis ■ Any treatment ■ Date treatment completed ■ Benign pathology ■ Reduced/eliminated risk factors (e.g. smoking) ■ Any concurrent impairment (e.g. emphysema or chronic bronchitis) 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of follow up ■ Demonstrated stability of lesion ■ Size of nodule if known 	<p>Pulmonary Nodule: can be due to a benign cause. The underwriter must investigate thoroughly</p> <p>Depending on the size of the nodule and the follow ups: standard to postpone</p>

Condition and description	Factors affecting the decision	Fast track the app	Likely underwriting decision
<p>Stroke Permanent (> 24 hrs.) damage to the brain caused by a vascular event, thrombosis or hemorrhage resulting in permanent neurological deficit.</p>	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis and age at onset ■ Current symptoms/extent of neurological deficit ■ Cause of stroke ■ Treatment ■ Medications ■ Number of strokes ■ Smoking history ■ Active lifestyle ■ Blood pressure and cholesterol readings ■ Any co-morbid conditions such as diabetes, hypertension, coronary disease, depression or other concurrent serious impairment 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of the doctor who has all records ■ Other doctors involved in treatment ■ Current function (how active) ■ Lifestyle modifications 	<p>Depending on severity, may not be able to consider until 6 to 12 months after stroke</p> <p>If currently smoking and less than age 50, decline, otherwise there would be an additional rating</p> <p>Multiple strokes: usually decline</p> <p>Average rating: for a well worked-up stroke, with minimal residuals, 150–200%</p> <p>The younger the applicant and the more recent the stroke, the higher the rating</p>
<p>Transient Ischemic Attack (TIA) An episode of neurological dysfunction lasting less than 24 hours and no permanent neurological deficit.</p>	<ul style="list-style-type: none"> ■ Current age ■ Date of diagnosis and age at onset ■ Any neurological deficit ■ Number of episodes ■ Treatment ■ Medications ■ Smoking history ■ Test results ■ Active lifestyle ■ Blood pressure and cholesterol readings ■ Any co-morbid conditions such as diabetes, hypertension, coronary disease, depression or other concurrent serious impairment 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of the doctor who has all records ■ Other doctors involved in treatment ■ Current function (how active) ■ Lifestyle modifications 	<p>Unable to consider until 6 months after the episode, and must have been investigated</p> <p>Depending on the age of the client and length of time since TIA, could be standard to 250% but average rating would be 150%</p>
<p>Ulcerative Colitis or Ulcerative Proctitis Chronic inflammatory ulceration of the colon (relapsing-remitting type disorder).</p>	<ul style="list-style-type: none"> ■ Current age ■ Severity of the disease ■ Frequency of flare ups ■ Severity of symptoms ■ Medication ■ Hospitalization ■ Surgery ■ Weight stable or loss ■ Testing and follow up ■ Complications or concurrent impairments (e.g. rheumatoid arthritis or other inflammatory disease) ■ Any hospitalization ■ Any surgery ■ Extra-intestinal symptoms 	<p>Requirement: APS</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Details of regular GI surveillance (colonoscopy), hospitalizations ■ Stable weight ■ Active lifestyle ■ Details and frequency of flare ups or attacks 	<p>The younger the age at application and the more severe the course of the disease, the higher the ratings</p> <p>Mild: depending on age and date of last attack, ranges from standard to 250%</p> <p>Moderate: Average rating would be 150%–200%</p> <p>Severe: Individual consideration if current attack otherwise average 175% to 300% depending on control and number of episodes</p>

Non-medical risks

Activity	Factors affecting the decision	Fast track the app	Likely underwriting decision
<p>Aviation: Commercial Certified air carriers and commuter airlines that are strictly regulated and have very good experience. Pilots who have a commercial license and fly smaller aircraft for a variety of purposes.</p>	<ul style="list-style-type: none"> ■ Current age ■ Commercial carrier ■ Where they fly ■ Type of aircraft flown ■ Type of flying ■ Medical conditions if any 	<p>Requirement: Aviation Questionnaire</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Overall experience ■ Hours/year ■ Flight ratings ■ Aircraft ■ Details of specialized flying 	<p>Pilot of commercial passenger air carrier may qualify for Healthstyle 1, 2 or 3</p> <p>Other types of aircraft or flying require ratings ranging from \$2.50–\$10/mil</p> <p>For example:</p> <ul style="list-style-type: none"> ■ Crop dusting and bush pilots \$5/mil ■ Air ambulance, power line inspection, traffic control \$3.50/mil <p>Aviation exclusion not offered when the insured's livelihood is from aviation, or when applying for survivorship or joint policies.</p>
<p>Aviation: Private Private pilots are those who are licensed as private pilots (whether they have IFR or not) and fly for recreational and business reasons. Business flying in this category refers to non-professional pilots (not flying for pay) flying for business purposes not aviation related.</p>	<ul style="list-style-type: none"> ■ Current age ■ Pilot experience including ratings ■ Medical history ■ Lifestyle ■ Where they fly ■ Type of aircraft flown ■ Type of flying ■ Driving history ■ Any history of incident 	<p>Requirement: Aviation Questionnaire</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Overall experience ■ Hours/year ■ Flight ratings ■ Aircraft ■ Details of specialized flying 	<p>Risk is based on annual hours flown</p> <p>300 hours/year: standard</p> <p>Pilots who fly over 300 hours annually would be ratable. Rating decreased to \$2.50/mil with IFR or ATP licensing.</p> <p>Aviation exclusion may be offered but only on individual policies and not on joint policies.</p> <p>A client over age 70 would have an exclusion (except for joint policies where we cannot exclude).</p> <p>A medical condition such as heart disease may warrant an exclusion (only on an individual basis, not on joint policies)</p>
<p>Aviation: Sport This covers a number of types of recreational flight activities, which include the use of non-conventional aircraft, competition or performances.</p>	<ul style="list-style-type: none"> ■ Current age ■ Pilot experience including ratings ■ Amateur or professional ■ Medical history ■ Lifestyle ■ Where they fly ■ Type of aircraft flown ■ Type of flying 	<p>Requirement: Ballooning/Hang Gliding/Ultralight Questionnaire</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Overall experience ■ Hours/year ■ Flight ratings ■ Aircraft ■ Details of specialized flying 	<p>Risk is based on the base aviation risk, where applicable, as well as the type of special risk</p> <p>Ratings range from \$2.50/mil–decline</p> <p>For example:</p> <ul style="list-style-type: none"> ■ Ballooning may be standard ■ Hang gliding may be \$5/mil ■ Paragliding \$2.50/mil <p>An exclusion may be offered but only on individual policies and not on joint policies.</p> <p>A client over age 70 would have an exclusion (except for joint policies where we cannot exclude).</p> <p>A medical condition such as heart disease may warrant an exclusion (only on an individual basis, not on joint policies)</p>

Activity	Factors affecting the decision	Fast track the app	Likely underwriting decision
Climbing: Rock, Mountain or Cliffs	<ul style="list-style-type: none"> ■ Current age ■ Frequency ■ Height of cliffs ■ Location: local area or elsewhere ■ Medical history ■ Lifestyle ■ Any solo climbing 	Requirement: Mountaineering Questionnaire Fast track: <ul style="list-style-type: none"> ■ Overall experience ■ Frequency ■ Type of terrain 	Depending on the height of cliffs and location, generally can offer standard coverage, otherwise \$2.50 to \$3.50/mil in general.
Climbing: Ice and/or Snow	<ul style="list-style-type: none"> ■ Current age ■ Frequency ■ Type of terrain: established trails ■ Altitude ■ Location: North America/Europe or elsewhere ■ Medical history ■ Lifestyle 	Requirement: Mountaineering Questionnaire, Foreign Travel Questionnaire (if applicable) Fast track: <ul style="list-style-type: none"> ■ Overall experience ■ Frequency ■ Type of terrain 	Rating of \$3.50/mil to decline, depending on location, type of terrain and height
Climbing: Trail Trekking	<ul style="list-style-type: none"> ■ Current age ■ Frequency ■ Type of terrain: established trails ■ Altitude ■ Location: North America/Europe or elsewhere ■ Medical history ■ Lifestyle 	Requirement: Mountaineering Questionnaire, Foreign Travel Questionnaire (if applicable) Fast track: <ul style="list-style-type: none"> ■ Overall experience ■ Frequency ■ Type of terrain 	Generally standard if activities within North America or Europe. Otherwise \$2.50/mil in addition to the foreign travel assessment
Driving Motor vehicle accidents are the primary cause of death at younger ages. Contributing factors to fatal accidents include alcohol and excessive speed. At older ages (> 65) it can be a flag for underlying cognitive degeneration.	<ul style="list-style-type: none"> ■ Current age ■ Types of infractions ■ Frequency of infractions ■ DUI (multiple) ■ Other suspensions and number of suspensions ■ Accident (at fault) ■ Risk taking avocations ■ Any medical conditions such as epilepsy, coronary artery disease, psychiatric disease, etc. ■ Alcohol or drug use 	Requirement: MVR Fast track: <ul style="list-style-type: none"> ■ Number and types of violations ■ Date of last violation ■ Date of last suspension, length of and reason for suspension 	DUI cannot be considered for a minimum of 6 months following completion of the suspension. If there are other infractions, cannot consider for 12 months Best case: standard if few, minor infractions Typical case: \$2.50 to \$5.00/mil Worst case: decline (multiple DUI)
Foreign Travel	<ul style="list-style-type: none"> ■ Which country and destination in the country ■ Frequency and duration of visit (total number of days/year in each country) ■ Purpose of travel ■ Age of applicant ■ Health of applicant ■ Any travel warning, advisory or public notice posted by the Canadian Government ■ Canadian Citizen or permanent resident 	Requirement: Foreign Travel Questionnaire Fast track: <ul style="list-style-type: none"> ■ Travel questionnaire outlining destination(s), frequency and duration of visits must be submitted with the initial documents 	Do not submit an application with any travel planned or expected in the next 30 days. In this case, wait until the applicant's return Best case: Healthstyle 1, 2 or 3 depending on country being visited for less than 8 cumulative weeks per year Typical case: Healthstyle 3 depending on country being visited for less than 8 cumulative weeks per year Worst case: decline

Activity	Factors affecting the decision	Fast track the app	Likely underwriting decision
Motor Vehicle Racing	<ul style="list-style-type: none"> ■ Current age ■ Type of vehicle/size of engine ■ Type of fuel ■ Frequency ■ Speeds attained (average, highest) ■ Type of course ■ Location (outside Canada or US) ■ Concurrent avocations 	<p>Requirement: Automobile Racing Questionnaire</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Type of racing and frequency ■ Speeds attained 	<p>Best case: standard</p> <p>Typical case: \$5/1000</p> <p>Worst case: \$10–\$15/1000–decline</p>
Scuba Diving	<ul style="list-style-type: none"> ■ Current age ■ Experience including certification ■ Depths and frequency of dives ■ Medical history ■ Lifestyle ■ Dive location (e.g. lake, open ocean, beaches) ■ Dive sites (e.g. wreck, salvage) ■ Diving activities (e.g. search and rescue, caves, ice) ■ Commercial diving ■ Certification level ■ Maximum depth ■ Solo diving ■ Alcohol or drug use 	<p>Requirement: Scuba Diving Questionnaire</p> <p>Fast track:</p> <ul style="list-style-type: none"> ■ Type of diving (location, site, activities) ■ Experience ■ Frequency ■ Certification 	<p>Most average, recreational divers are standard risks</p> <p>Rating \$2.50/1000–decline depending on the combination of depth (> 120 ft), experience and technical diving</p> <p>Scuba history combined with medical ratings \geq 200% due to CAD, cerebrovascular disease, obesity, respiratory disease, and psychiatric illness are usually declined</p>
Snow Sports: Skiing, Snowboarding or Snowshoeing	<ul style="list-style-type: none"> ■ Current age ■ Frequency ■ Type of terrain: resorts, 'in-bounds', 'out-of-bounds', backcountry ■ Altitude ■ Location ■ Medical history ■ Lifestyle 	<p>Requirement: Backcountry Snow Sport Questionnaire, Foreign Travel Questionnaire (if applicable)</p> <p>Fast Track:</p> <ul style="list-style-type: none"> ■ Overall experience ■ Frequency ■ Type of terrain 	<p>Most average, recreational, 'in-bounds' participants are standard risks.</p> <p>'Out-of-bounds' activities, including helicopter or CAT vehicle dropoffs etc., may require a rating \$2.50/mil–decline, and/or an Exclusion e.g. Avalanche.</p>
Snow Sports: Snowmobiling	<ul style="list-style-type: none"> ■ Current age ■ Frequency ■ Type of terrain: established trails or tracks, 'out-of-bounds', backcountry ■ Altitude ■ Speed ■ Location ■ Medical history ■ Lifestyle. 	<p>Requirement: Backcountry Snow Sport Questionnaire, Foreign Travel Questionnaire (if applicable)</p> <p>Fast Track:</p> <ul style="list-style-type: none"> ■ Overall experience ■ Frequency ■ Type of terrain ■ Speed 	<p>Most average, recreational, trail riders and racers are standard risks.</p> <p>Participation in Cross-country events in Alaska and Northern Canada, or the use of alternative fuels may require a rating \$2.50/mil–decline.</p> <p>Participation in activities such as high-marking, backcountry snowmobiling, etc., may require an Exclusion e.g. Avalanche.</p>
Snow Sports: Other e.g. bobsled, hockey, ice boating, luge	<ul style="list-style-type: none"> ■ Current age ■ Frequency ■ Type of terrain: marked, established, controlled ■ Speed ■ Location ■ Medical history ■ Lifestyle 	<p>Requirement: Backcountry Snow Sport Questionnaire, Foreign Travel Questionnaire (if applicable)</p> <p>Fast Track:</p> <ul style="list-style-type: none"> ■ Overall experience ■ Frequency ■ Type of terrain ■ Speed 	<p>Most average, recreational participants are standard risks.</p>

Smoking definition

Best class available	
Healthstyle 1 Non-Smoker	Meets the Healthstyle criteria and has not used any form of tobacco, nicotine or marijuana products within the last 10 years .
Healthstyle 2 Non-Smoker	Meets the Healthstyle criteria and has not used any form of tobacco, nicotine or marijuana products within the last two years .
Healthstyle 3 Standard Non-Smoker	No cigarette or tobacco use within the past 12 months and does not meet all healthstyle 1 or 2 criteria or is not available on the product. Marijuana users in the past 12 months are eligible for healthstyle 3, but users less than age 36 may need additional requirements.
Healthstyle 4 Smoker	Tobacco or nicotine products, other than cigarettes.
Healthstyle 5 Standard Smoker	Does not meet the Healthstyle criteria and uses cigarettes.

Occasional use of cigars (up to 12 cigars per year) may qualify for Healthstyle non-smoker if the individual otherwise meets the Healthstyles non-smoking definition and the microurinalysis is free of nicotine or its metabolites.

Note: Healthstyles applies to most Manulife Individual Life Insurance Products.

Build table – adults

The following build table shows the standard ranges for weight and height measurements.

	Avg	125%	137%	150%	165%	175%	200%	225%	250%	275%	300%	325%	350%
5'0"	128	179	186	194	201	206	218	226	236	242	247	252	256
5'1"	133	184	192	200	207	212	224	232	242	248	254	259	264
5'2"	138	189	197	206	216	221	230	238	248	255	261	267	272
5'3"	143	194	203	212	219	224	236	245	255	262	268	274	280
5'4"	147	199	208	218	225	230	243	252	262	269	276	282	288
5'5"	152	205	214	223	231	237	250	259	269	277	284	290	296
5'6"	156	210	219	229	238	244	257	266	276	284	292	298	304
5'7"	161	215	225	235	245	251	264	273	284	292	300	306	312
5'8"	165	221	231	242	252	258	271	281	292	300	308	314	320
5'9"	170	227	238	249	259	266	279	289	300	308	316	322	328
5'10"	174	232	243	255	266	273	286	297	308	316	324	330	336
5'11"	179	238	249	261	272	280	294	305	316	324	332	338	344
6'0"	184	244	255	267	279	287	302	313	324	332	340	346	352
6'1"	189	250	262	274	286	294	310	321	332	341	349	355	361
6'2"	194	257	269	282	294	302	318	329	340	349	357	363	368
6'3"	199	265	277	290	302	310	326	337	348	357	365	370	375
6'4"	204	273	285	299	310	318	334	345	356	365	373	378	383
6'5"	209	281	294	308	319	327	342	353	364	373	381	386	391
6'6"	215	292	303	314	327	335	350	361	372	380	388	394	399

Example

If you were 5'8" tall and weighed 270 pounds, you would be rated 200% for build.

This Build Table applies to all adults regardless of their age or gender, and shows the maximum weight for each rating category.

To understand how this chart relates to Healthstyles, please see the following Healthstyles Build Chart.

Healthstyles build chart (non-tobacco users)

Healthstyle 1		Healthstyle 2		Healthstyle 3	
Height (ins)	Weight (lbs)	Height (ins)	Weight (lbs)	Height (ins)	Weight (lbs)
56	120	56	140	56	173
57	125	57	143	57	176
58	129	58	146	58	180
59	134	59	149	59	184
60	138	60	153	60	186
61	143	61	157	61	192
62	148	62	161	62	197
63	152	63	165	63	203
64	157	64	170	64	208
65	162	65	175	65	214
66	167	66	182	66	219
67	172	67	189	67	225
68	178	68	196	68	231
69	183	69	204	69	238
70	188	70	211	70	243
71	194	71	218	71	249
72	200	72	225	72	255
73	205	73	230	73	262
74	210	74	235	74	269
75	216	75	240	75	277
76	222	76	245	76	285
77	228	77	250	77	294
78	234	78	255	78	303



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