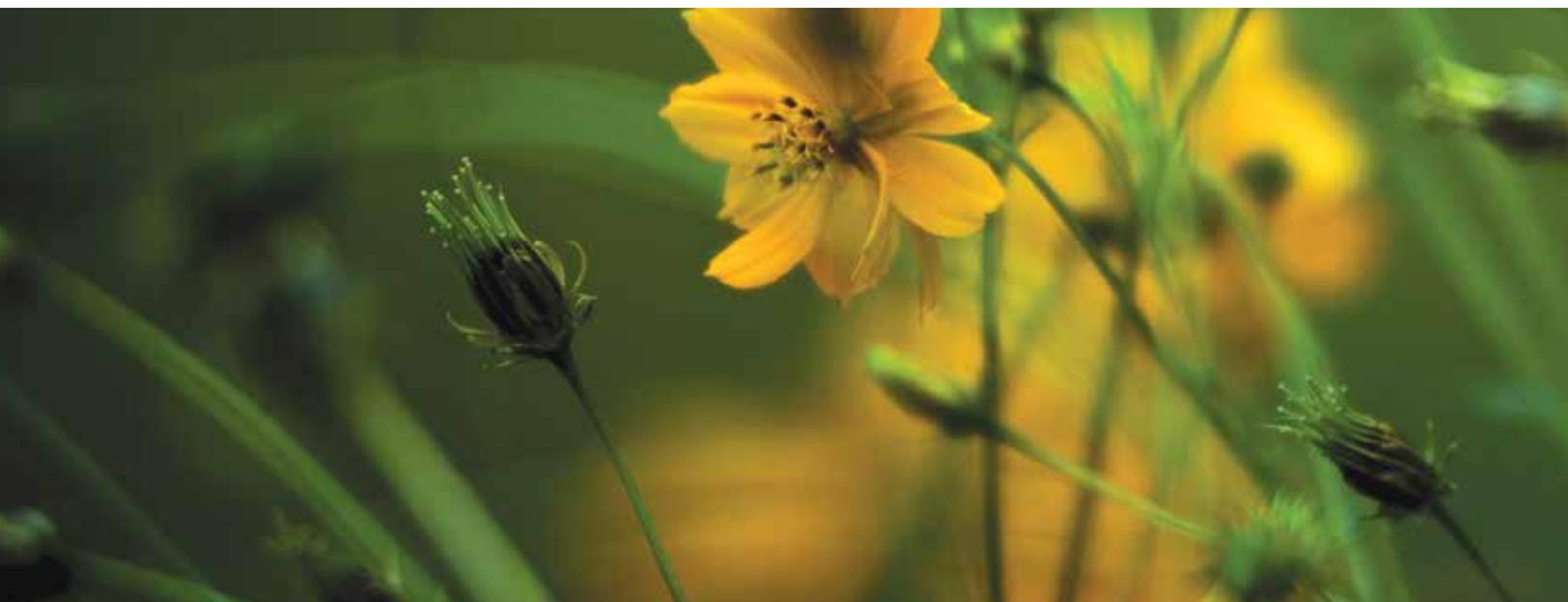




Underwriting handbook for advisors
Lifecheque®



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About this Handbook

When it comes to underwriting, setting reasonable expectations for your clients is critical. This Handbook can help. It's designed to give you a basic overview of the more common medical conditions and diseases seen in critical illness underwriting. It's an important tool that can help you, particularly when you're reviewing your client's medical history.

You will find brief descriptions of common impairments, along with the risk factors that influence an underwriter's final assessment and the likely underwriting ratings. The Handbook also gives you the background you need to gather details an underwriter will need to assess a specific condition. By providing this information upfront, you'll give 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 the Handbook provides a preliminary rating estimate only, because it's difficult to assess the risk without the complete picture. This means that the final offer from underwriting may differ, depending on all the facts. The Handbook 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 provides a comprehensive, but not exhaustive, list of medical conditions. The actions suggested are guidelines only and the actual offer may differ. Individual offers will depend on the merits of each case and other factors that may impact our medical decision.

The guide is organized into two major sections: medical conditions (impairments), and 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, a tentative assessment is provided, based on specific criteria.</p>

Legend	
Decline	Uninsurable
Exclude	Addition of a provision to the contract excluding a specific covered condition
Individual Consideration	Limited insurability, please submit as a Trial Application
Postpone	Deferral of medical decision until full investigation or for a specified period
Rated	Percentage increase in premium rates
Rated for Cause	Rated or modified, based on the underlying cause, if applicable
Standard	Standard medical offer without restrictions

Short Forms	
APS	Attending Physician's Statement
CPAP	Continuous Positive Airway Pressure
GI	Gastrointestinal
MVR	Motor Vehicle Report

Understanding Critical Illness Insurance Underwriting

Underwriting a critical illness insurance policy is different from underwriting a life insurance policy.

A critical illness claim is approved on *diagnosis* of a covered condition and *survival* of a waiting period (for most conditions Lifecheque covers, it's 30 days). Thanks to medical advances, doctors can diagnose medical conditions at very early stages and people are surviving critical illnesses that were once fatal; therefore there's significant risk that a client will make a claim on a critical illness policy.

Personal Medical History

When we underwrite a critical illness application, we pay significant attention to blood pressure, build, cholesterol, EKG results, smoking and other personal health factors. These are strong indicators of an applicant's risk of developing some critical illnesses, particularly heart disease and certain cancers – the two leading causes of critical illness claims. A personal medical history of any of Lifecheque's covered conditions often means your client will not be eligible for coverage.

When we underwrite life insurance, those factors are important but the emphasis is on *mortality* (life expectancy) rather than the *diagnosis* of a covered medical condition.

Family Medical History

Critical illness underwriters place a greater emphasis on family medical history than life insurance underwriters. Except in a few specific cases, family history only impacts a life underwriting decision in *combination* with a personal medical history risk factor that would impact life expectancy.

With critical illness insurance, a family history of certain covered conditions like those listed on the next page is a strong indicator that an applicant may be predisposed to developing a critical condition covered in the contract.

Although many ailments are not life threatening, they may increase the likelihood of a critical illness. Based on our assessment of a person's medical history, we may rate an applicant, offer coverage with exclusions, or deny coverage.

Family history

Family history is important. Your underwriter's decision will be based on your client's family history of most conditions. The decision will be affected by parents or siblings whose conditions were diagnosed prior to age 60. For this reason, you can fast track your case by providing complete family history and the age when family members were diagnosed.

Condition and Description	Likely Underwriting Decision
Breast cancer in family history	Male 1 family member: standard 2 family members: exclude Female 1 family member: standard to +50% 2 family members: +50 to +100% 3 or more family members: decline
Colon cancer in family history (other than familial polyposis)	1 family member: standard to +25% 2 family members: possible exclusion, possible rating of +50 to +100% 3 or more family members: decline
Ovarian cancer in family history	1 family member: standard to +25% 2 family members: +50 to +75% 3 or more family members: decline
Prostate cancer in family history	1 family member: usually standard 2 family members: +25 to +75% 3 or more family members: decline
Other cancers in family history	1 family member: usually standard 2 family members: standard to +75% 3 or more family members: individual consideration
Cardiovascular disease in family history	1 family member: usually standard 2 family members: +50% to +75% 3 or more family members: individual consideration

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Acromegaly Disease of pituitary gland. Chronic excessive secretion of growth hormone.</p>	<ul style="list-style-type: none"> • Cause • Treatment • Complications 	<p>Requirement: APS</p>	<p>Age 0-19: decline Age 20 and up Untreated or diagnosis suspected: decline Treated (surgery or medication), stable, minimal residuals, normal growth hormone (GH) levels: < 3 years: postpone 3-5 years: +50% > 5 years: standard</p>
<p>Addison's Disease Disease of adrenal gland, characterized by atrophy of adrenal cortex with hormone deficiency.</p>	<ul style="list-style-type: none"> • Cause • Acute or chronic • Treatment 	<p>Requirement: APS</p>	<p>Good control compliant with replacement therapy, asymptomatic Time since diagnosis or last symptoms 0-6 months: postpone 6 months to 3 years: +100% > 3 years: standard Complications or others: decline</p>
<p>AIDS – Acquired Immune Deficiency Syndrome Positive or indeterminate HIV findings. Viral disease of the immune system caused by the human immunodeficiency virus (HIV). HIV becomes AIDS when the immune system is seriously damaged.</p>			<p>HIV or AIDS diagnosis: decline Indeterminate findings: could review in 6 months</p>
<p>Affective Disorders: Depression and Bipolar Affective Disorder Excessive mood disturbance with symptoms varying from sadness to severe depression.</p>	<ul style="list-style-type: none"> • Date of diagnosis • Treatment and duration • Time lost from work • Recurrences • Family history of psychiatric illness • Physical symptoms such as headaches, fatigue, chest pain, palpitations, shortness of breath, stomach complaints, muscle, joint and back pain. • Underlying issues such as substance abuse, stress at work, financial problems, etc. • History of suicide attempts or hospitalizations. 	<p>Requirement: APS, Emotional Health Questionnaire Fast Track:</p> <ul style="list-style-type: none"> • Details of date of diagnosis and onset • Contributing factors to the onset • Type of treatment • Duration of treatment • Time lost from work • Recurrences • Family history of psychiatric illness • Names and titles of all practitioners consulted 	<p>Reactive Depression, depressed mood, minor depression, situational depression, symptomatic dysthymia Present Mild: standard Moderate to severe: postpone 6 months Asymptomatic > 6 months: standard</p> <p>Major Depression or Bipolar Affective Disorder Present, symptomatic: postpone 12 months Asymptomatic > 12 months: Single episode: standard Recurrent episodes: > 1 year since last episode: +25%</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Alcohol Excess</p> <p>Consumption considered as abuse, dependence, at risk and/or heavy use.</p>	<ul style="list-style-type: none"> • Current age • Amount declared • Any diagnosis of abuse or dependence • Any relapses • Member of self-help group • Treatment with medication • Any co-morbid conditions • Any medical complications • Occupational and financial stability • Driving record • Current or past drug use 	<p>Requirements: APS, Alcohol Use Questionnaire, Paramedical, blood test, MVR</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Details of treatment • Covering letter presenting favourable aspects of case (stable employment, attendance at self-help groups, etc.) 	<p>Previous alcohol dependence, abstainer no associated physical, social or mental impairments:</p> <p>< 3 years: decline</p> <p>3-5 years: +100%</p> <p>> 5 years: standard</p> <p>History of combined drug and alcohol abuse:</p> <p>< 5 years: decline</p> <p>5-7 years: +100%</p> <p>>7 years: standard</p> <p>Others: individual consideration</p> <p>Current alcohol excess: usually declined</p>
<p>Amputations</p> <p>Complete or partial loss of a limb. May be due to trauma, infection or disease.</p>	<ul style="list-style-type: none"> • Cause, degree of loss, which limbs 	<p>Requirement: APS</p>	<p>Traumatic amputation:</p> <p>Fingers, toes, single limb: standard</p> <p>Multiple limbs: exclusion for loss of limbs</p> <p>Non-traumatic amputations e.g. vascular, tumours, diabetes: decline</p>
<p>Amyotrophic Lateral Sclerosis (ALS)</p> <p>Lou Gehrig's Disease</p> <p>Rapidly progressive and fatal neuromuscular disease.</p>			<p>Decline</p>
<p>Anemia</p> <p>Iron Deficiency</p> <p>A reduction of the red blood cells in the blood (creating a deficiency of iron in the body) 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, if known • Treatment • Details of testing, referrals to specialists • Blood test results • Medications • Concurrent impairments 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Type and cause • Details of ongoing surveillance 	<p>Depending on cause</p> <p>Mild: standard to +75%</p> <p>Moderate: +100 to +150%</p> <p>Severe: decline</p> <p>Cause unknown: individual consideration</p>
<p>Angina Pectoris</p> <p>Chest pain, tightness, or discomfort caused by reduced blood flow to the heart due to coronary artery disease.</p>			<p>Decline</p>
<p>Anorexia Nervosa</p>	<p>Refer to Eating Disorders</p>		

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Arteriosclerosis / Atherosclerosis Hardening of the arteries. A generalized thickening of arteries where they become firmer, more tortuous, and less elastic. Arterial capacity is reduced, interfering with the free flow of blood. All arteries of the body may be affected. A normal part of the aging process but appearance at an early age is significant. When present with other cardiovascular impairments, cases are usually declined.</p>			Decline
<p>Arthritis: Osteoarthritis Inflammation of the joints. Arthritis is an inflammation of a joint or joints. Primarily due to trauma, infection, degeneration, toxic reaction or metabolic disorder. It may be the main feature of a disease (e.g. Rheumatoid Arthritis) or a secondary feature of a systemic illness (e.g. Inflammatory Bowel Disease). It is chronic in nature.</p>	<ul style="list-style-type: none"> Type Any deformity Degree of severity Joints involved Treatment Impact on occupational duties 	Requirement: APS	<p>Mild to moderate: standard Severe: standard to +50% depending on functional limitations Very severe: decline Surgery planned or completed: postpone 6 months</p>
<p>Arthritis: Rheumatoid including Psoriatic Arthritis and Still's disease / Juvenile Rheumatoid Arthritis Chronic systemic disease resulting in inflammatory changes in the joints causing pain, stiffness and inflammation.</p>	<ul style="list-style-type: none"> Type Any deformity Degree of severity Joints involved Treatment Impact on occupational duties 	<p>Requirement: APS Fast Track: Results of blood test with Rheumatoid Factor</p>	<p>Rheumatoid arthritis Mild: standard to +50% Moderate: +50 to 100% Severe: +100% to decline</p> <p>Psoriatic arthritis Mild to Moderate: standard Severe: decline</p> <p>Still's disease/Juvenile rheumatoid arthritis Present: decline In remission: Age 0-24: +100% Age 25 and up: rated as Rheumatoid Arthritis</p>
<p>Asthma Chronic inflammatory condition of the airways causing shortness of breath, triggered by allergens, irritants, cold air, or exercise.</p>	<ul style="list-style-type: none"> Current age Date of diagnosis Severity Frequency of attacks Type of medication Compliance with medication ER visits and hospitalizations Smoking history Concurrent impairments 	<p>Requirement: APS Fast Track:</p> <ul style="list-style-type: none"> Copy of a Pulmonary Function Test, hospitalizations Level of activity 	<p>Nonsmokers Mild to Moderate: standard Severe: +50 to +75% Very Severe: decline Smokers: add +50%</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Attention Deficit Disorder (ADD) / Attention Deficit Hyperactivity Disorder (ADHD)</p> <p>May be associated with increased risk-taking activities, accidental injuries related to impulsivity, employment difficulties.</p>	<ul style="list-style-type: none"> No definitive test Treated with medications (stimulants), as well as environmental modification No history of unprescribed drug use or alcohol abuse 	<p>Requirement: APS</p>	<p>No complications: standard</p> <p>Others: rated for complications</p>
<p>Basal Cell Carcinoma</p>	<ul style="list-style-type: none"> Dermatologic follow ups Availability of pathology report 	<p>Requirement: APS</p>	<p>Present: postpone until excised</p> <p>In history</p> <p>1 occurrence: standard</p> <p>> 1 occurrence: exclusion for malignant melanoma</p>
<p>Blindness</p>	<p>Refer to Eye Impairments</p>		<p>Exclude</p>
<p>Blood Pressure: Elevated</p> <p>Hypertension</p> <p>Primary (essential) hypertension is the most common type, affecting 95% of people with hypertension. Cause is unknown, but thought to be the result of a complex interplay of factors.</p> <p>Secondary hypertension results from kidney, endocrine or nervous system disorders.</p>	<ul style="list-style-type: none"> Essential or Secondary Age of onset Current age Medication / treatment Response to treatment Current and historical readings Compliance with treatment and follow up Concurrent impairments Build Presence of other cardiovascular complications and degree of target organ damage Smoking status Family history 	<p>Requirement:</p> <p>Paramedical, vitals</p> <p>Fast Track:</p> <ul style="list-style-type: none"> APS: record of historical readings Details of any cardiac or renal investigation Details of medication Active lifestyle 	<p>Ratings depend on the severity of the hypertension. Most cases can be standard if well controlled and compliant with medication/diet and no other risk factors.</p>
<p>Bowel Disorders: Crohn's Disease</p>	<p>Refer to Crohn's Disease</p>		

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Bronchitis</p> <p>Inflammation of the bronchial air passageways.</p> <p>Acute bronchitis is usually caused by an infection, but it can also result from inhaling irritants such as smoke or toxic gas. Common symptoms include cough, fever and sometimes chest pain. Inflammation is temporary, attacks are rarely disabling.</p> <p>Chronic bronchitis predisposes to frequent attacks of acute bronchitis.</p>	<ul style="list-style-type: none"> • Causes • Acute or chronic • Treatment • Complications 	<p>Requirement: APS</p>	<p>Mild, Acute: standard</p> <p>Chronic: Refer to Chronic Obstructive Pulmonary Disease (COPD)</p>
<p>Bulimia Nervosa</p>	<p>Refer to Eating Disorders</p>		
<p>Cancer</p> <p>A tumour that has the propensity to grow, invade surrounding tissues, and spread (metastasize) to other parts of the body.</p> <p>The leading cause of critical illness claims in Canada.</p>	<ul style="list-style-type: none"> • Type • Family history • Date of diagnosis • Pathology • Type of treatment • Confirmation completely excised • Recurrence • Staging 	<p>Requirement: APS</p> <p>Fast Track: Pathology report with staging and regular follow up</p>	<p>Typically decline</p> <p>Best case: individual consideration with specific cancer exclusion.</p>
<p>Cataract</p>	<p>Refer to Eye Impairments</p>		
<p>Celiac Disease</p> <p>Chronic intestinal malabsorption disorder caused by intolerance to gluten.</p>	<ul style="list-style-type: none"> • Weight stability • Family history • Complications • Compliance with diet 	<p>Requirement: APS</p>	<p>Well controlled, asymptomatic, compliant</p> <p>≤ 6 months since diagnosis: postpone</p> <p>> 6 months since diagnosis: standard</p> <p>Other: individual consideration</p>
<p>Chest Pain: Uncertain Origin</p> <p>Can be due to a wide variety of causes (hiatus hernia, lung disorders, panic attacks, muscular, cardiac, etc.). It is important to note the cause, frequency, duration and treatment.</p>	<ul style="list-style-type: none"> • Age • Cause of pain • Recurrence and frequency • Brought on by exercise/relieved by rest • Treatment 	<p>Requirement: APS, Chest Pain Questionnaire</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Past and current ECG • Cardiac investigation 	<p>Due to heart disease: decline</p> <p>Cause Unknown: individual consideration</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Cholesterol: Elevated or Hyperlipidemia</p> <p>Ideally measured following a 12-hour fast. High levels may be primary (genetic link) or secondary – associated with diet, activity level, and other factors. Linked to increased risk of coronary artery disease.</p>	<ul style="list-style-type: none"> • Current and historical readings • Medication • Compliance with medication • Build • Family history • Other coronary artery disease factors 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Fasting blood profile • Total Cholesterol, LDL and HDL levels 	<p>Controlled for at least 6 months, with normal elevations, no adverse associated findings or family history: standard</p> <p>Other: individual consideration</p>
<p>Chronic Fatigue Syndrome (CFS)</p> <p>Persistent/recurrent fatigue lasting over 6 months, severe enough to reduce daily activities by at least 50%, with other treatable diseases ruled out.</p>	<ul style="list-style-type: none"> • Evidence of a complete work up to rule out other diseases • Treatment • Amount of time lost from work 	<p>Requirement: APS</p>	<p>Present, well controlled, no depressive symptoms: standard</p> <p>Present, with depressive symptoms: Refer to Affective Disorders</p> <p>Full recovery: standard</p>
<p>Chronic Obstructive Pulmonary Disease (COPD)</p> <p>An obstruction of the airways. Often associated with a history of smoking.</p>	<ul style="list-style-type: none"> • Type • Severity • Smoking status 	<p>Requirement: APS</p>	<p>Non smokers</p> <p>Mild: +50%</p> <p>Moderate: +100 to + 150%</p> <p>Severe: decline</p> <p>Smokers</p> <p>Mild: +100%</p> <p>Moderate: decline</p>
<p>Cirrhosis of the Liver</p>			<p>Decline</p>
<p>Colitis: Ulcerative</p> <p>Chronic inflammation of the colon (bowel), of unknown cause. Symptoms include bloody diarrhea. Tendency to remission and exacerbations.</p>	<ul style="list-style-type: none"> • Current age and age at onset • Severity • Duration • Recurrence • Treatment including medication, surgery and hospitalization • Affected sites • Medical follow ups • Weight loss/stability • Complications and extracolonic manifestations 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Review of colonoscopy reports 	<p>All cases within 2 years of diagnosis: +150% to decline</p> <p>No surgery, time since disease flare up (symptoms)</p> <p>Mild: standard to +100%</p> <p>Moderate 0-5 years: +50 to +150%</p> <p>> 5 years: +50 to +75% and exclusion for colon cancer</p> <p>Severe: decline</p> <p>Surgical treatment with complete recovery, normal weight maintained</p> <p>< 1 year: postpone</p> <p>> 1 year: individual consideration</p>
<p>Colon Polyps</p> <p>A growth which is common and often asymptomatic in individuals over age 50. There are two common types: hyperplastic which are not at risk for cancer, and adenomatous, which may have a tendency to become malignant.</p>	<ul style="list-style-type: none"> • Type of polyp • Number of polyps • How recent • Colonoscopy and pathology reports • Family history of colon cancer 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Colonoscopy and pathology reports 	<p>Hyperplastic: standard</p> <p>Polyp present, any type: postpone until removed</p> <p>All polyps (hyperplastic, adenomatous or other types): standard to colon cancer exclusion</p> <p>Family history of colon cancer: possible rating in addition to information above. Please refer to “Family history” section</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
Concussion: Brain Transient post traumatic loss of consciousness with no serious neurological residual impairment.	<ul style="list-style-type: none"> Date Symptoms still present 	Requirement: APS	Minor concussion with full recovery: standard More severe or post-concussion syndrome < 1 year: postpone > 1 year: individual consideration
Connective Tissue Disorders: Discoid Lupus Skin lesions aggravated by sun exposure.	<ul style="list-style-type: none"> Consider exposure to sun Treatment 	Requirement: APS	< 6 months since diagnosis: postpone > 6 months: standard to +100%
Connective Tissue Disorders: Systemic Lupus Erythematosus (SLE) A rheumatic disease with multi-system involvement.			Decline
Coronary Artery Disease			Decline
Crest Disease Chronic disorder of the immune system characterized by diffuse fibroids of the skin and internal organs.			Decline
Crohn's Disease Chronic inflammatory disorder of the gastrointestinal tract. Generally first diagnosed in young adults. Complications include obstruction and increased cancer risk. Complications similar to Ulcerative Colitis. Surgery may be required.	<ul style="list-style-type: none"> Current age and age at onset Severity Duration Recurrence Treatment including medication, surgery and hospitalization Affected sites Medical follow ups Weight loss/stability Smoking Complications and extracolonic manifestations 	Requirement: APS	All cases within 2 years of diagnosis: +50% and exclude cancer of the small/large intestine Mild to moderate severity: likely standard, but may be rated for any complication such as weight loss, anemia, arthritis. Severe Without complications: +50% and exclude cancer of the small/large intestine With complications: +75% to a decline All severe and long-standing Crohn's: exclusion for cancer of the small/large intestine With surgery < 6 months: postpone > 6 months: standard if no complications

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Cushing's Disease or Syndrome</p> <p>Disease of adrenal gland. Usually result of a pituitary tumour.</p>	<ul style="list-style-type: none"> • Treatment • No sequels • Cause • No hypertension or Diabetes Mellitus • Build 	<p>Requirement: APS</p>	<p>Individual consideration</p>
<p>Cystitis</p> <p>Bacterial infection of the lower urinary tract.</p>		<p>Requirement: APS, Urinalysis</p>	<p>Single episode, present: standard</p> <p>Single episode, recovered: standard</p> <p>Recurrent episodes, depending on history: standard to +50%</p>
<p>Deafness</p>	<p>Refer to Ear Impairments: Deafness / Hearing Loss</p>		
<p>Deep Vein Thrombosis</p>	<p>Refer to Phlebitis</p>		
<p>Depression and Bipolar Affective Disorder</p> <p>Excessive mood disturbance with symptoms varying from sadness to severe depression.</p>	<p>Refer to Affective Disorders: Depression and Bipolar Affective Disorder</p>		
<p>Detached Retina</p>	<p>Refer to Eye Impairments</p>		
<p>Diabetes/ Gestational Diabetes</p> <p>Chronic metabolic disease caused by lack of insulin or lack of response to insulin, causing fluctuations in blood sugar.</p> <p>Type 1 or Insulin-Dependent Diabetes Mellitus (IDDM) Formerly known as "Juvenile Diabetes." Usually diagnosed prior to age 40. Usually quick onset of symptoms.</p> <p>Type 2 or Non-Insulin Dependent Diabetes Mellitus (NIDDM) Formerly known as "Adult Onset."</p> <p>Gestational Diabetes Glucose intolerance with onset during pregnancy – after pregnancy these women may remain diabetic, they may revert to a non-diabetic state, or may be at an increased risk to develop diabetes later.</p>	<ul style="list-style-type: none"> • Type • Age of onset • Treatment • Degree of control • Possible complications • Build • Blood pressure 	<p>Requirement: APS, Blood</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Full records with regular follow up, monitoring and control • Active lifestyle 	<p>Type 1: decline</p> <p>Type 2</p> <p>Age 50 and up, well controlled for at least 6 months, compliant with medication, no other risk factors (smoking, family history, build, blood pressure)</p> <p>Diagnosed <10 years ago: +50 to 75%</p> <p>Diagnosed >10 years ago: +100 to 150%</p> <p>Gestational Diabetes</p> <p>Currently pregnant or within 3 months of birth: postpone</p> <p>> 10 years, standard build: standard</p> <p>< 10 years, minimum 3 months post partum, standard build, normal blood sugar, no family history of diabetes</p> <p>Under age 40: +50%</p> <p>Age 40-49: +25%</p> <p>Age 50 and up: Standard</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Diverticulitis Inflammation of diverticular mucosa</p> <p>Diverticulosis Presence of pouches or pockets, particularly of the intestine</p>	<ul style="list-style-type: none"> • Complications • Treatment 	<p>Requirement: possible APS</p>	<p>Present: postpone</p> <p>In history with no complications: standard</p> <p>With complications</p> <p>< 6 months: postpone</p> <p>6 months-2 years: +50%</p> <p>> 2 years: standard</p>
<p>Dizziness</p>			<p>Rated for cause</p>
<p>Drug Use: Marijuana Cannabis, Hashish, Pot</p>	<ul style="list-style-type: none"> • Frequency • Employment and financial stability • Driving record • No other complaints 	<p>Requirement: Drug Use Questionnaire</p>	<p>Smoker rates if insurable</p> <p>Depending on frequency of use: standard to decline</p>
<p>Drug Use: Unprescribed, Narcotics Cocaine, Ecstasy, LSD, Heroin, etc.</p>	<ul style="list-style-type: none"> • When • Last use • Amount • Multiple drugs? • Evidence of occupational and financial stability 	<p>Requirement: Drug Use Questionnaire</p>	<p>Present use: decline</p> <p>Drug free minimum 3 years, otherwise good risk: individual consideration</p>
<p>Dysplastic Nevi</p>	<p>Refer to Skin Tumours</p>		
<p>Ear Impairments: Deafness/Hearing Loss Total or partial hearing loss due to trauma or disease. May be progressive.</p>	<ul style="list-style-type: none"> • Cause • Degree • Impact on occupational duties 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Audiometry results 	<p>Exclude Deafness</p>
<p>Ear Impairments: Mastoiditis Inflammation of mastoid bone – either acute or recurrent.</p>	<ul style="list-style-type: none"> • Recurrent • Hearing loss 	<p>Requirement: APS if within 2 years</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Audiometry results 	<p>No treatment or presently under treatment: postpone</p> <p>All others: rated for cause</p>
<p>Ear Impairments: Meniere's Disease Chronic recurrent syndrome of passing vertigo, tinnitus, hearing loss, nausea and vomiting.</p>	<ul style="list-style-type: none"> • Recurrent • Cause • Treatment 	<p>Requirement: APS</p>	<p>Exclude Deafness</p>
<p>Eating Disorders: Anorexia Nervosa Bulimia Nervosa Characterized by distorted body image.</p>	<ul style="list-style-type: none"> • Age at diagnosis • Weight stability • Treatment • Length of time since last episode 	<p>Requirement: APS</p>	<p>No treatment or presently under treatment: postpone</p> <p>All others: rated for cause</p>
<p>Emphysema</p>	<p>Refer to Chronic Obstructive Pulmonary Disease (COPD)</p>		

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Endometriosis</p> <p>Endometrial tissue is present in sites outside the uterine cavity.</p>		Requirement: APS	<p>Present, no complications with or without medication, or in history with no surgery for 2 years and well-controlled: standard</p> <p>Complicated or multiple surgeries: postpone</p>
<p>Epilepsy</p> <p>Brain disorder resulting in recurrent seizures.</p> <p>A seizure disorder characterized by recurrent, brief episodes of uncontrollable activity produced by an abnormal electrical stimulation in the brain.</p>	<ul style="list-style-type: none"> Type, treatment Number of attacks Frequency of attacks Time since last attack Occupation (driving and participation in some occupations and avocations may increase the accident risk). 	Requirement: APS	Individual consideration
<p>Eye Impairments: Blindness/Impaired Vision</p> <p>Vision loss can be caused by trauma or disease and can be acute or progressive.</p> <p>Legal blindness is vision of 20/200 or worse in the <i>better</i> eye.</p>	<ul style="list-style-type: none"> Cause Degree One or both eyes Impact on occupational duties 	Requirement: APS	<p>Congenital or due to trauma, blind in one eye and other eye normal or impaired: exclude Blindness</p> <p>Total Blindness: individual consideration – if insurable, will exclude Blindness</p> <p>Other causes: decline</p>
<p>Eye Impairments: Cataract</p> <p>Clouding of lens of eye.</p> <p>Most common form is a senile cataract. Others may be caused by trauma or arise from complications of diabetes or other medical problems.</p>	<ul style="list-style-type: none"> Cause Treatment Occupational duties 	Requirement: APS	<p>Present: exclude blindness</p> <p>If operated and no complications: standard</p>
<p>Eye Impairments: Glaucoma</p> <p>Increased pressure in eye.</p> <p>May be acute or chronic. If chronic and not properly managed, may lead to optic nerve damage and impaired vision. May be primary (genetic in origin) or secondary to trauma or other eye disorders.</p>	<ul style="list-style-type: none"> Type Treatment Vision loss Occupational duties 	Requirement: APS	<p>Present</p> <p>Treated, stable, no loss of vision: standard with exclusion for blindness</p> <p>Following corrective surgery: standard possible</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Eye Impairments: Iritis</p> <p>Inflammation of the iris. May be acute or chronic. May be due to infection or associated with underlying disease. Severe infection may lead to loss of vision.</p>	<ul style="list-style-type: none"> • Cause • Recurrent • Recovery • Loss of vision 	<p>Requirement: APS</p>	<p>Cause known: rate for cause</p> <p>Cause unknown:</p> <p>Single episode, resolved: usually standard</p> <p>Chronic or recurrent > 2 years: rated for complications and exclusion for blindness</p>
<p>Eye Impairments: Retinal Detachment</p> <p>A partial or total separation of inner layers of retina from pigment layer, requiring urgent treatment.</p>	<ul style="list-style-type: none"> • Cause • Treatment • Loss of vision 	<p>Requirement: APS</p>	<p>Cause known: rated for cause</p> <p>Cause unknown: exclusion for blindness</p>
<p>Fibrocystic Breast Disease</p> <p>Characterized by cyst formation causing pain and tenderness, differentiated by mammogram or biopsy.</p>	<ul style="list-style-type: none"> • Status • Family history of breast cancer 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Surgical report with pathology 	<p>Cysts present: exclusion for breast and ovarian cancer</p> <p>Stable at least one year: standard</p> <p>Fibroadenoma present: exclusion for breast and ovarian cancer</p> <p>Stable at least one year: standard</p>
<p>Fibromyalgia</p> <p>Fibrositis / Myofascial Pain Syndrome / Chronic Pain Syndrome</p> <p>Generalized aching and stiffness with characteristic "tender points". Mechanical neck and back pain, sleep impairment, and depression/anxiety are often complaints.</p> <p>The condition tends to be chronic (although it is NOT Chronic Fatigue Syndrome)</p>	<ul style="list-style-type: none"> • Date of onset • Type of treatment • Residual impairment • Other complaints 	<p>Requirement: APS</p>	<p>Other underlying disorders excluded: exclude LivingCare benefit</p> <p>Otherwise: decline</p>
<p>Fractures</p> <p>Break or rupture of the bone which may be simple (closed) or compound (open). Usually caused by trauma but may be secondary to other disease.</p> <p>Some fractures require installation of pins, screws, plates which may increase risk of infection or a need for further procedures to remove/replace.</p>	<ul style="list-style-type: none"> • Cause • Residual impairment 	<p>Requirement: APS</p>	<p>Traumatic: usually standard</p> <p>Pathological: rated for underlying disorder</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
Gall Bladder Stones Cholelithiasis	<ul style="list-style-type: none"> Definitive diagnosis Treatment 	Requirement: APS	Silent stones or single episode of colic: standard Recurrent episodes of colic, last episode within 3 years: +50% Surgery imminent: postpone
Gastroesophageal Reflux Disease (GERD) Varied complaints due to reflux of stomach and duodenal contents (acid and bile) into esophagus.		Requirement: APS	Standard If frequent symptoms and not fully investigated: postpone
Glaucoma	Refer to Eye Impairments		
Glomerulonephritis	Refer to Kidney Disorders		
Goiter	Refer to Thyroid Disorders		
Gout Characterized by elevated uric acid with attacks of acute arthritis and sometimes kidney stones. A metabolic disorder that predominantly affects middle-aged males. Hypertension and obesity often accompany gout.	<ul style="list-style-type: none"> Number of attacks Symptoms Build Blood pressure Other cardiovascular impairments 	Requirement: APS	Acute, less than 3 attacks per year: usually standard Chronic or severe: decline
Graves' Disease	Refer to Thyroid Disorders		
Headaches, Migraines	Refer to Migraines		
Heart Abnormalities: Angina Pectoris			Decline
Heart Abnormalities: Coronary Artery Disease			Mild asymptomatic, no complications, confirmed by echo: standard Moderate: +100% and exclude heart valve replacement Severe: decline
Heart Abnormalities: Enlarged Heart	<ul style="list-style-type: none"> Age Degree 	Requirement: APS Fast Track: <ul style="list-style-type: none"> EKG, X-ray 	Depending on age, degree and assuming no other cardiac or ECG abnormality, cause of enlargement: individual consideration (trial application)
Heart Abnormalities: Mitral Valve Prolapse Usually benign and asymptomatic.	<ul style="list-style-type: none"> Symptoms No other signs of cardiac disease 	Requirement: APS Fast Track: <ul style="list-style-type: none"> EKG, Echocardiogram 	No complications, mitral regurgitation absent or trivial: + 50% No complications with mild mitral regurgitation: exclude Valve Replacement Others: decline

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Heart Abnormalities: Murmur</p> <p>Abnormal heart sounds caused by blood flow.</p>	<ul style="list-style-type: none"> • Functional or Organic • Age • Level of investigation • Cause • Complications • Progression 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Echocardiogram 	<p>Functional/Innocent: standard</p> <p>Organic: individual consideration</p>
<p>Heart Abnormalities: Tachycardia</p> <p>Rapid pulse.</p>	<ul style="list-style-type: none"> • Evidence of cardiac disease • Other symptoms • Pulse • Recurrent 	<p>Requirement: APS</p>	<p>Cause known: rated for cause</p> <p>Cause unknown: individual consideration</p>
<p>Heart Attack</p> <p>Myocardial Infarction.</p>			<p>Decline</p>
<p>Hemochromatosis</p> <p>Disorder of iron metabolism leading to iron overload with deposition and damage to various tissues of the body.</p>	<ul style="list-style-type: none"> • Symptoms • Liver Function Tests 	<p>Requirement: APS</p> <p>Fast Track: APS with details of symptoms and Liver Function Tests</p>	<p>Best case: normal iron studies and liver enzymes, no symptoms: standard</p> <p>Others: individual consideration</p>
<p>Hepatitis</p> <p>Inflammation of the liver often evidenced by elevated liver enzymes.</p> <p>There are several causes and it may be acute or chronic. Several viruses may cause a short-term illness. Long-term chronic problems arise when a person fails to clear the offending virus from the body.</p>	<ul style="list-style-type: none"> • Type • Current level of liver enzymes 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Liver Function Tests • Hepatitis screen 	<p>Present, all types: postpone</p> <p>In history, with full recovery,</p> <p>Hepatitis A: standard</p> <p>Hepatitis B: standard</p> <p>Hepatitis B carrier: individual consideration</p> <p>Hepatitis C: individual consideration</p>
<p>Hernia: Inguinal, Hiatus, Umbilical</p> <p>Protrusion of tissues or organs. A protrusion of part or all of an organ or body structure through a weakness or defect in the wall of its normal confines. It is important to note the type and location.</p>	<ul style="list-style-type: none"> • Type • Treatment • Complications 	<p>Requirement: APS</p>	<p>Usually standard</p> <p>Investigations/Surgery pending: postpone</p>
<p>Herpes Zoster</p>	<p>Refer to Shingles</p>		
<p>Human Papilloma Virus (HPV)</p> <p>Virus spread by contact, often sexual. Causes warts and increases the risk of cervical cancer.</p>		<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • HIV test • PAP tests 	<p>Present: postpone</p> <p>In history, with negative HIV and PAP tests: standard</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
Hodgkins' Disease Enlarged lymphatic glands.			Decline
Huntington's Chorea A hereditary disease causing involuntary muscle movements.			Decline
Hypertension	Refer to Blood Pressure: Elevated		
Hypoglycemia Low blood sugar.	<ul style="list-style-type: none"> Diabetes Cause Control Treatment 	Requirement: APS	Functional, minimal symptoms: standard Others: individual consideration
Hyperthyroidism or Hypothyroidism	Refer to Thyroid Disorders		
Hysterectomy Surgical removal of the uterus.	<ul style="list-style-type: none"> Reason Recovery Complications 	Requirement: APS Fast Track: <ul style="list-style-type: none"> Pathology Report 	Rated for cause
Insomnia Difficulty initiating or maintaining sleep. Transient sleep disturbances are a normal part of life. Prolonged insomnia may indicate an underlying physical or adjustment disorder.	<ul style="list-style-type: none"> Degree Duration Treatment Interference with function Occupational duties 	Requirement: APS	Cause known: rated for cause Mild, cause unknown: standard Others: individual consideration – rated for cause
Kidney Disorders: Polycystic Disease Inherited disease in which numerous cysts gradually develop, eventually destroying normal kidney tissue.	<ul style="list-style-type: none"> Family history Fully investigated Client's age 	Requirement: APS Fast Track: <ul style="list-style-type: none"> Negative Ultrasound 	Decline Family history of Polycystic Kidney Disease, fully investigated, normal ultrasound: individual consideration
Kidney Disorders: Glomerulonephritis Including Bright's.	<ul style="list-style-type: none"> Acute Recurrent Chronic Stability Normal blood pressure 	Requirement: APS	Decline
Kidney Disorders: Nephrectomy Surgical removal of kidney.	<ul style="list-style-type: none"> Cause Status of other kidney No urinary system impairment No hypertension Not due to malignancy 	Requirement: APS Fast Track: <ul style="list-style-type: none"> Urinalysis Surgical report 	Due to congenital abnormality, trauma, benign tumour, cysts; remaining kidney normal; normal urinalysis; no current urinary system impairment or hypertension: standard Others: individual consideration

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Kidney Disorders: Renal Failure</p> <p>Impaired kidney function – may be acute following shock, crushing injuries, infection or poisons. Full recovery may occur or may become chronic.</p>	<ul style="list-style-type: none"> • Cause • Complete recovery • Single episode 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Urinalysis • Kidney function tests 	<p>Acute episode, complete recovery, normal urine, normal blood pressure, no sequels</p> <p>0-2 years: postpone</p> <p>>2 years: standard to + 50%</p> <p>Others: individual consideration</p> <p>Chronic, or requiring dialysis: decline</p>
<p>Kidney Disorders: Kidney Transplant</p>			<p>Recipient: decline</p>
<p>Kidney Stone</p>	<ul style="list-style-type: none"> • One or both kidneys • Single or multiple episodes • Normal kidney function tests 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • Urinalysis 	<p>Present, unilateral or bilateral</p> <p>No renal damage: standard</p> <p>Renal damage: individual consideration</p> <p>History, stone passed naturally or surgically: standard</p> <p>Staghorn Calculus</p> <p>Present: rated for abnormal labs, blood pressure, etc.</p> <p>Unilateral, removed: standard</p> <p>Bilateral: +25% and rated for abnormal labs, blood pressure, etc.</p>
<p>Lupus: Discoid, Systemic Lupus Erythematosus (SLE)</p>	Refer to Connective Disorders		
<p>Major Depression</p>	Refer to Affective Disorders		
<p>Marijuana, use of</p>	Refer to Drug Use		
<p>Mastoiditis</p>	Refer to Ear Impairments		<p>No treatment or currently under treatment: postpone</p> <p>Single episode, fully recovered and no residuals 3 months: standard</p> <p>Recovered with residuals: exclusion for deafness</p>
<p>Meniere's Disease</p>	Refer to Ear Impairments		<p>Exclude Deafness</p>
<p>Meningitis</p> <p>Inflammation of the brain or spinal cord.</p>	<ul style="list-style-type: none"> • Cause • Recovery • Complications 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> • HIV test 	<p>Present: postpone</p> <p>In history, no residuals: standard</p> <p>Residuals: individual consideration</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Migraine</p> <p>A severe vascular headache caused by alterations in the diameter of the blood vessels within and outside the head. Visual abnormalities (blind spots, flashing lights), difficulty speaking, paralysis, a severe pounding headache and nausea often characterize a migraine.</p>	<ul style="list-style-type: none"> Severity Frequency Cause 	<p>Requirement: APS</p>	<p>Migraine: standard</p> <p>Headaches, severe or persistent Cause known: rated for cause</p> <p>Cause unknown: < 1 year: postpone > 1 year: standard</p>
<p>Miscarriage</p> <p>Interruption of pregnancy before fetus is capable of living outside the uterus.</p>		<p>Requirement: APS</p>	<p>Standard</p>
<p>Mitral Valve Prolapse (MVP)</p>	Refer to Heart Abnormalities		
<p>Multiple Sclerosis</p>			<p>Decline</p>
<p>Myocardial Infarction</p> <p>Heart attack.</p>	Refer to Heart Attack		<p>Decline</p>
<p>Myositis</p> <p>Inflammation of muscles.</p>	<ul style="list-style-type: none"> Cause Recurrence Recovery Residual impairment Occupational duties 	<p>Requirement: APS</p>	<p>Standard</p>
<p>Narcolepsy</p> <p>Characterized by excessive daytime sleepiness leading to sleep attacks.</p>	<ul style="list-style-type: none"> Cause Frequency Response to medication Occupational hazards Motor vehicle offences 	<p>Requirement: APS</p>	<p>Cause known</p> <p>Infrequent episodes: possibly standard</p> <p>Frequent episodes: decline</p> <p>Cause unknown: individual consideration</p>
<p>Nephrectomy</p>	Refer to Kidney Disorders		
<p>Nephritis</p>	Refer to Kidney Disorders		
<p>Obesity</p>	Refer to Build Table		
<p>Osteoarthritis</p> <p>Acceleration of the normal aging process, leading to degenerative joint disease.</p>	Refer to Arthritis: Osteoarthritis		
<p>Ovarian Cysts</p>	<ul style="list-style-type: none"> Treatment Benign 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> Pathology Report 	<p>Benign: standard</p> <p>Others: decline</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Pancreatitis Inflammation of the pancreas.</p>	<ul style="list-style-type: none"> • Acute • Recurrent • Treatment • Complications • No alcohol offences 	<p>Requirement: APS</p>	<p>Acute, no alcohol offences <1 year: postpone 1+ years: +50 to +100% Others: decline</p>
<p>Parkinson's Disease A progressive, degenerative central nervous system disorder.</p>			<p>Decline</p>
<p>Phlebitis, Venous Thrombosis, Thrombophlebitis Inflammation of a vein, blood clot in a vein.</p>	<ul style="list-style-type: none"> • Recurrent • Treatment • Residuals • Complications 	<p>Requirement: APS</p>	<p>Superficial thrombophlebitis: standard Deep vein, single episode, recovered at least 3 months: standard Other: individual consideration</p>
<p>Pleurisy An inflammation of the membrane lining the inside of the chest wall and the surface of the lungs. It may be related to an acute pulmonary infection (eg. pneumonia, flu) or it may be associated with more serious illnesses (congestive heart failure, malignant tumours, pancreatitis, etc). Effusion refers to accumulation of fluid in pleural cavity.</p>	<ul style="list-style-type: none"> • Single attack • Recurrent 	<p>Requirement: APS Fast Track: <ul style="list-style-type: none"> • X-ray </p>	<p>Cause known: rated for cause Cause unknown Present: postpone Full recovery: standard Other: individual consideration</p>
<p>Pneumonia An acute lung infection caused by bacteria, viruses, or fungi.</p>	<ul style="list-style-type: none"> • Recurrence • Complications 	<p>Requirement: APS Fast Track: <ul style="list-style-type: none"> • Chest X-ray • Pulmonary function tests, if recent </p>	<p>Present: postpone Single occurrence with full recovery: standard Recurrent with residuals: individual consideration</p>
<p>Pneumonitis Lung disease secondary to inhalation of mineral or organic dust.</p>			<p>Present: postpone Acute, 1-2 episodes, pulmonary function tests and chest X-ray normal, complete recovery, no longer exposed to causative agent 0-6 months: standard Chronic re-exposure or with pulmonary fibrosis: individual consideration</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Pneumothorax Collapsed lung. May be spontaneous, due to trauma or artificially induced.</p>	<ul style="list-style-type: none"> • Cause • Recurrence • Full recovery 	<p>Requirement: APS Fast Track:</p> <ul style="list-style-type: none"> • X-ray 	<p>Spontaneous, no complications, complete recovery 1 episode: standard 2 episodes with successful treatment > 1 year ago: standard 2 episodes with successful treatment, 1 year ago: +50% 3 episodes within last 5 years: +75% Others: individual consideration</p>
<p>Pregnancy</p>	<ul style="list-style-type: none"> • Trimester • Previous complications • Current status 	<p>Requirement: APS Fast Track:</p> <ul style="list-style-type: none"> • Current status 	<p>No complications: standard With complications: postpone until 3 months post delivery</p>
<p>Prostate Disorder: Enlargement A gland surrounding the neck of the bladder and urethra in the male. Disorders may include inflammation (acute or chronic), enlargement, or cancer of the prostate.</p>	<ul style="list-style-type: none"> • Cause • Degree • Recurrence • Normal urine 	<p>Requirement: APS Fast Track:</p> <ul style="list-style-type: none"> • Blood test • Pathology report if done • Urinalysis 	<p>Not operated Normal PSA: standard Elevated PSA: postpone Operated Benign, no sequels, normal PSA: standard Others: individual consideration</p>
<p>Prostate Disorder: Prostatitis</p>	<ul style="list-style-type: none"> • Recurrent • Urinalysis • Absence of hematuria 	<p>Requirement: APS Fast Track:</p> <ul style="list-style-type: none"> • Urinalysis if within past year 	<p>One episode, full recovery: usually standard</p>
<p>Psoriasis</p>	Refer to Skin Disorders		
<p>Pyelitis</p>	Refer to Kidney Disorders		
<p>Pyelonephritis</p>	Refer to Kidney Disorders		
<p>Raynaud's Syndrome Disturbances of circulation in extremities, causing numbness and pallor.</p>		<p>Requirement: APS</p>	<p>Standard</p>
<p>Renal Calculus</p>	Refer to Kidney Stone		
<p>Renal Failure</p>	Refer to Kidney Disorders		
<p>Retinal Detachment</p>	Refer to Eye Disorders		
<p>Rheumatoid Arthritis</p>	Refer to Arthritis: Rheumatoid		

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Shingles Herpes zoster. Nerve infection with skin rash.</p>		<p>Requirement: APS</p>	<p>One episode, full recovery: standard</p>
<p>Skin Disorders: Dermatitis, Eczema, Psoriasis Most skin eruptions are transient and related to viral infection or an allergic reaction. It is important to note any impact the skin disorder may have on the client's occupation.</p>	<ul style="list-style-type: none"> • Acute • Recurrent 	<p>Requirement: APS</p>	<p>Standard</p>
<p>Skin Tumours: Benign, Non-melanoma, Melanoma Most common non-melanoma: basal cell carcinoma and squamous cell carcinoma. Non-melanoma rarely spreads. Melanoma: often characterized by a change in size, shape or colour. Less common but more aggressive.</p>	<ul style="list-style-type: none"> • Type • Family history of melanoma • Unusual/atypical moles • Date of diagnosis • Pathology • Type of treatment • Confirmation completely excised • Recurrence • Staging 	<p>Requirement: APS Fast Track:</p> <ul style="list-style-type: none"> • Pathology report with staging • Details of follow up 	<p>If no family history of Melanoma or Dysplastic Nevus Syndrome: Dysplastic nevus present: exclude Melanoma Single dysplastic nevus removed, and no other unusually/atypical moles: With annual checkup: standard No annual checkup: exclude Melanoma 2 or more dysplastic nevi or unusual/atypical moles: exclude Melanoma Dysplastic Nevus Syndrome, or with family history of it or melanoma: decline Dysplastic Nevus Syndrome: exclude Melanoma and +50% Basal Cell Carcinoma or Squamous Cell Carcinoma: Present: postpone for excision In history, one occurrence: standard In history, recurrence: exclude Melanoma Melanoma: decline</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Sleep Apnea</p> <p>Cessation of breathing during sleep. Causes daytime fatigue, leading to increased accident risk. Commonly associated with excess weight and alcohol excess. Diagnosis is made by a sleep study.</p>	<ul style="list-style-type: none"> Type Degree Treatment Response to/compliance with treatment Occupational hazard No driving offences Build Cardiac arrhythmia Smoker 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> Sleep Study 	<p>Obstructive, no cardiac arrhythmia, no treatment or treated with evidence of good response Mild: standard</p> <p>Moderate, treated with evidence of good response, no cardiac arrhythmia, non-smoker 0-1 year: +50% > 1 year: standard</p> <p>Moderate, no treatment or non-compliant with CPAP: decline</p> <p>Severe No treatment or non-compliant: decline</p> <p>Good response/compliant < 1 year: postpone to + 50% > 1 year: +50 to +100% Others: individual consideration</p>
<p>Splenectomy</p> <p>Removal of the spleen, usually due to trauma.</p>	<ul style="list-style-type: none"> Cause Complications 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> Chest X-ray Complete Blood Count 	<p>Due to injury, fully recovered, no residual: standard</p> <p>Other causes: rated for cause</p>
<p>Stomach Disorders: Gastritis</p> <p>Inflammation of the stomach.</p>	<ul style="list-style-type: none"> Acute Recurrent Cause 	<p>Requirement: APS</p>	<p>Acute, single attack: standard</p> <p>Chronic or recurrent, cause known: rated for cause</p> <p>Cause unknown: 0-1 years: postpone 1+ years: standard</p>
<p>Stomach Disorders: Ulcer</p> <p>Peptic, duodenal, gastric, etc.</p> <p>Peptic ulcer disease is a common impairment in which ulcerations develop in the esophagus, stomach, or duodenum. Previously the cause of ulcers was thought to be due to the secretions of stomach acid. Although this is still significant in ulcer formation, a bacteria called H. Pylori is thought to be the leading cause of ulcer disease. Antibiotics have proven to heal the ulcers and prevent recurrence. Another major cause of ulcers is the chronic use of anti-inflammatory medications.</p>	<ul style="list-style-type: none"> Type Treatment Complications Smoking status Symptoms Recurrence 	<p>Requirement: APS</p> <p>Fast Track:</p> <ul style="list-style-type: none"> Operative report Upper GI series 	<p>Malignancy ruled out, asymptomatic: standard</p> <p>Others: individual consideration</p>

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
<p>Stroke Diminished blood supply to brain causing a neurological deficit.</p> <p>Transient Ischemic Attack (TIA) Partial interference with diminished blood supply – symptoms last less than 24 hours.</p>			<p>Stroke: decline TIA: decline</p>
<p>Substance Abuse</p>	Refer to Alcohol Excess		
<p>Syncope Sudden transient loss of consciousness, of varying length and duration, not due to trauma or seizure.</p>	<ul style="list-style-type: none"> • Cause • Recurrence 	Requirement: APS	<p>Cause known: rated for cause Cause unknown, well investigated, cardiac and neurological disease ruled out 0-6 months: postpone > 6 months: standard Recurrent, severe or not well investigated: postpone</p>
<p>Systemic Lupus Erythematosus (SLE)</p>	Refer to Connective Tissue Disorders: Systemic Lupus Erythematosus (SLE)		
<p>Thalassemias Inherited anemia.</p>	<ul style="list-style-type: none"> • Type 	Requirement: APS	<p>Minor trait, definite diagnosis, normal blood count: standard Major trait: decline</p>
<p>Thyroid Disorders: Hyperthyroidism Gland is overactive in secreting a hormone that controls the body's metabolism.</p>	<ul style="list-style-type: none"> • Treatment • Control 	Requirement: APS	<p>Present, untreated: decline Still undergoing treatment, malignancy excluded. Time from onset of treatment: 0-1 years: postpone > 1 year: individual consideration</p>
<p>Thyroid Disorders: Hypothyroidism Gland is underactive in secreting a hormone that controls the body's metabolism.</p>	<ul style="list-style-type: none"> • Treatment • Control 	<p>Requirement: APS Fast Track:</p> <ul style="list-style-type: none"> • Lab reports 	<p>Treated, under control: standard Uncontrolled: postpone</p>
<p>Thyroid Disorders: Graves' Disease Over-activity of thyroid which enlarges into goiter. Refer to Hyperthyroidism</p>	Refer to Thyroid Disorders: Hyperthyroidism		

Medical Impairments

Condition and Description	Factors Affecting the Decision	Fast Track the App	Likely Underwriting Decision
Thyroid Disorders: Thyroid Nodule or Cyst	<ul style="list-style-type: none"> Treatment Pathology 	Requirement: APS	Thyroid Nodule/Cyst present Uninvestigated: postpone Fully Investigated (usually involves a fine needle biopsy) < 1 year: postpone > 1 year, with follow up, no change in size and benign pathology: exclusion for Thyroid Cancer No follow up, or increase in size, or malignant pathology: decline Thyroid Nodule/Cyst removed Benign pathology: exclusion for Thyroid Cancer Malignant pathology: decline
Triglycerides: Elevated	Refer to Cholesterol: Elevated		
Tuberculosis An infectious disease that is increasing in Canada due to immigration and HIV exposure. It can usually be controlled with proper medical treatment, although drug resistant strains have developed. It is important to note the number of sites and extent to which an organ is infected, the medication, progressions, and any complications.	<ul style="list-style-type: none"> Type Degree of involvement Complications 	Requirement: APS Fast Track: <ul style="list-style-type: none"> X-ray Pulmonary tests 	Present: decline Pulmonary, treated with full recovery and no residual impairment: standard
Underweight	Refer to Build Table		
Varicose Veins: Legs Abnormally enlarged veins with functionally insufficient valves. They may develop because of a benign disorder (obesity, pregnancy, frequent standing) or be the result of a serious disorder (cirrhosis, tumours, clots, etc.)	<ul style="list-style-type: none"> Location Cause Treatment Complications Occupational duties 	Requirement: APS	Standard
Vertigo			Rated for cause

Non-Medical Risks

Hazardous Occupations

Some occupations may increase the risk that a client will be diagnosed with one of the conditions covered in the Lifecheque contract such as: blindness, loss of limbs, paralysis, coma and severe burns. Some occupations that increase the risk of critical illness include:

- Professional athletes
- Chemical manufacturing
- Bridge construction
- Power line construction (where lines over 400,000 volts are handled)
- Coal and asbestos mining.

Applicants who work in a field considered high risk may be offered exclusions or ratings. Declines based solely on an applicant's occupation are rare.

Aviation

Aviation is not considered a special risk if the applicant is a passenger on commercial flights. Private and or commercial pilots may be offered standard coverage depending on their age, experience and annual flight time. Complete an Aviation Questionnaire in all cases.

Sports and Avocations

Most sports are not considered to increase the applicant's risk of critical illness. Examples of sports that would increase the risk are:

- Automobile and motorcycle racing
- Hang gliding
- Mountain/rock climbing
- Scuba diving
- Sky diving
- Wrestling.

Driving

Motor vehicle accidents increase the risk of comas, paralysis, loss of limbs and sight. For this reason, a Motor Vehicle Report may be requested for applicants with a history of moving violations.

Smoking Definition

Smoker Rates

Smoker rates will be charged if your client uses any tobacco product including cigarettes, marijuana, cigar, pipe, chewing tobacco, nicotine gum or patches.

Non-Smoker Rates

Non-smoker rates will be charged if your client has not used any form of tobacco, nicotine products or marijuana in the past 12 months.

An occasional cigar smoker may be considered a non-smoker if:

- use is 12 cigars or less per year, and
- smoking details are fully disclosed on the application, and
- urine tests show no cotinine, and
- the person is not rated substandard for a smoking-related impairment.

Build Table – Adults

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

Males and Females, Aged 18+			
Height	Weight (lbs)	Height	Weight (lbs)
4'8"	82-141	5'9"	125-215
4'9"	85-147	5'10"	129-222
4'10"	88-152	5'11"	132-228
4'11"	91-157	6'	136-234
5'	95-163	6'1"	140-241
5'1"	98-168	6'2"	144-248
5'2"	101-174	6'3"	148-254
5'3"	104-179	6'4"	152-261
5'4"	108-185	6'5"	156-268
5'5"	111-191	6'6"	160-275
5'6"	114-197	6'7"	164-282
5'7"	118-203	6'8"	168-290
5'8"	121-209	6'9"	172-297

For more information contact your advisor or visit manulife.ca



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