

Dignified Choice[®] Classic Series Final Expense Underwriting Guidelines



COLUMBIAN MUTUAL
LIFE INSURANCE COMPANY



COLUMBIAN LIFE
INSURANCE COMPANY

www.cfglife.com
800-305-1335

Underwriting Guidelines

Underwriting Requirements

This guide is intended to help you determine the right plan for your client, based on the information available to you at the time of application. Please call the Underwriting Team at 800-305-1335 extension 5904 if you have questions.

Dignified Choice® - Classic Elite Full Benefit

- All application health questions must be answered “no”
- Applicant must be within the height/weight limits for the plan (see page 5)
- Prescription drug check*
- MIB check
- Motor Vehicle Report is obtained for ages 25 - 35

Dignified Choice® - Classic Select Full Benefit

- Any Part 4 health question answered “yes”
- Applicant must be within the height/weight limits for the plan (see page 5)
- Doctor not seen in past 5 years if age 60 - 70
- Prescription drug check
- MIB check
- Motor Vehicle Report is obtained for ages 25 - 35

Dignified Choice® - Classic Advantage Graded Benefit

- Any Part 3 health question answered “yes”
- ***Two or more Part 4 questions answered “yes”***
- Applicant must be within the height/weight limits for the plan (see page 5)
- Prescription drug check
- MIB check

Dignified Choice® - Classic Security Graded Benefit

- Any Part 2 health question answered “yes”
- ***Two or more Part 3 questions answered “yes”***
- Doctor not seen in past 3 years if age 71+
- Applicant must be within the height/weight limits for the plan (see page 5)
- Prescription drug check
- MIB check

If the proposed insured has used any form of tobacco or nicotine or smoked marijuana in the past 12 months, tobacco premiums apply for the Classic Elite and Classic Select plans. If marijuana was ingested, tobacco premiums do not apply.

*Applicants age 71+ with no prescription drug history are ineligible for the Classic Elite plan. Columbian uses the industry leader, Milliman IntelliScript, to check the history. If Milliman does not find any prescription history for an applicant age 71+, we run an additional check through ExamOne. If this check also returns no history, we will attempt to contact the applicant to ask about their drug history. If we are unable to reach the applicant by phone, we will ask Aaptical to conduct a telephone interview to establish a prescription drug history. If a history can be established through any of these means, the applicant will not be declined for the Classic Elite plan based on an absence of prescription drug history.

Underwriting Guidelines

General Underwriting Guidelines

Application Health Questions

It is essential that you read each health question aloud, word for word, and take the time to be sure the Applicant understands each one. At times, an Applicant's diagnosis may fall under one of the general terms listed on the application, but may be known to the Applicant by another name. Several of the application health questions ask if the Proposed Insured has received treatment for the listed medical conditions. Prescription medicines are considered treatment. Use the medical information on pages 6 through 10 as a guide, and call the Underwriting Team at 800-305-1335 extension 5904 if you have questions.

Power of Attorney

The Proposed Insured **must** sign the application. Because the Proposed Insured must personally answer the health questions, a Power of Attorney signature will not be accepted.

MIB, Inc.

MIB, Inc. is a nonprofit membership organization of life insurance companies, providing an information exchange for its members. It maintains information of underwriting significance on policyholders and applicants as furnished to it by member companies. Columbian uses MIB to check underwriting information, but only as a guide to identify areas about which we might need additional information before reaching a final underwriting decision. Columbian does not rely, in whole or in part, on an MIB report in making a final underwriting decision.

When an application is entered into our system, it is run through MIB and Rx Rules. If we receive information that gives us reason to believe that the Proposed Insured would not qualify for the plan applied for, an additional Personal History Interview (PHI) may be needed to obtain further information. If the Rx Rules show a definite disease or medical condition, a decision will be made based on those records.

Motor Vehicle Report

A Motor Vehicle Report (MVR) will be run on all applicants age 25-35 who possess a driver's license and are applying for a Classic Elite or Classic Select Full Benefit plan. An MVR may be requested on applicants age 36-85 if the application question regarding moving violations or driving under the influence is answered "yes" or if we receive confidential information that indicates the question should have been answered "yes." Please see below for further information about driving issues.

Ages	Classic Elite	Classic Select	Classic Advantage
25-35	<ul style="list-style-type: none"> ▪ No DUI within 5 years ▪ ≤ 2 DUIs within 10 years ▪ ≤ 2 violations* within 5 years ▪ License not revoked within 5 yrs. 	<ul style="list-style-type: none"> ▪ No DUI within 5 years ▪ ≥ 3violations* within 3 years ▪ License not revoked within 3 years 	N/A
36-85	<ul style="list-style-type: none"> ▪ No DUI within 3 years ▪ ≤ 3violations* within 3 years 	<ul style="list-style-type: none"> ▪ No DUI within 3 years ▪ ≤ 3violations* within 3 years 	<ul style="list-style-type: none"> ▪ No DUI within 3 years ▪ ≤ 3violations* within 3 years

Violations considered:

1. Speeding over posted limit
2. Accident (at fault or fault unknown)
3. Reckless driving
4. Failure to yield
5. Disobeying stop signs, signal or other traffic device
6. Improper turn
7. Driving without a license, insurance, registration
8. Cell phone or text message violations

Underwriting Guidelines

General Underwriting Guidelines

Medical Records

Columbian does not require medical records as a routine underwriting tool for the Dignified Choice plans. There are situations where the routine underwriting requirements cannot provide a complete risk assessment of the applicant and a review of that individual's medical records appears to be the proper source for the needed information. In those instances, a letter will be sent to the applicant requesting the records be obtained by the applicant, at their expense, and forwarded to the Company. Upon receipt of said records, the underwriting evaluation is completed. If the records do not arrive within 60 days of the date of the request letter, the application will be closed due to incomplete information.

Graded Policies as a Percent of Business

Sales of Graded Benefit policies are limited as follows:

- Sales of **Classic Security** policies may not exceed 10% of the total number of Final Expense applications issued and paid within the past 365 days; and
- *The total number of* **Classic Advantage plus Classic Security** policies may not exceed 30% of the total number of Final Expense applications issued and paid within the past 365 days.

If you exceed either limit, we will notify you via email that you have 30 days in which to bring the percentage to an acceptable level or face suspension of the privilege to sell Graded Benefit policies. Your graded benefit business percentages are shown just below the Application History section of your Home Page at www.cfglife.com. Please monitor your percentage each time you access your reports in order to avoid corrective action.

Underwriting Guidelines

General Underwriting Guidelines

Ineligible Persons

You should not take an application on anyone who:

- answers “yes” to any of the questions in Part 1 of the Health History section.
- is institutionalized, including a penal institution or psychiatric facility.
- is mentally incompetent or lacks the legal capacity to contract.
- is not a U.S. resident. If the Applicant is a foreign national, he or she must be a legal immigrant and have a Social Security number. We will accept applications up to \$15,000 on foreign nationals who have a green card or tax ID number (TIN).

This is provided as a general guide and is not intended to be a complete list.

Policy Rescissions

A policy can be rescinded when death occurs during the contestable period and the insurer discovers information that would have caused the policy to be declined or issued other than as applied for had the information been known at the time of application. If we receive medical information from another provider that indicates that the application may have been completed incorrectly, *including tobacco use*, we will investigate and the policy will be rescinded if necessary. When a policy is rescinded, everyone loses:

- The family loses valuable benefits they had counted on.
- The insurer loses the cost of issuing the policy and the cost of the investigation.
- The agent loses all commissions from the policy, and if the case was obviously mishandled or a pattern of rescissions is evident, he or she could be terminated for cause.

Rescissions are a serious problem in the insurance industry and are taken seriously by Columbian. We meet monthly to review all agent activity, including an evaluation of rescinded policies for each agent. **We have been actively terminating agents, and will continue to do so if we discover evidence of mishandling or a pattern of rescissions for any agent, regardless of production.**

While we understand that you rely on the health-related answers provided to you by the proposed insured, there are some things you can do to help ensure the quality of the business you write:

- Use good judgment when meeting with the client. For example, you should not take an application from someone in hospice care.
- Use good observation when taking an application. For example, the presence of an oxygen machine or prescription drugs should lead you to ask further questions. Although prescriptions need not be listed on the application, it is important that you ask if medicine has been prescribed and for what reason.
- If you have suspicions regarding health issues, include a cover letter with the application. For example, if you noticed a wheelchair in the home but the applicant did not mention limited mobility, let us know. This does not mean that the policy will be declined, but does give us a chance to investigate further.

The success of our Final Expense program depends on protecting the viability and profitability of the line. Be our partner in that protection by taking extra care with the applications you write.

Underwriting Guidelines

Height and Weight

Eligibility for plans is based in part on the Proposed Insured's height and weight.

Male or Female Ages 25-44				
Height	Decline	Elite	Select	Decline
4'8"	<74	173	189	≥190
4'9"	<77	180	196	≥197
4'10"	<79	186	203	≥204
4'11"	<82	193	210	≥211
5'0"	<85	199	217	≥218
5'1"	<88	206	224	≥225
5'2"	<91	213	232	≥233
5'3"	<94	220	239	≥240
5'4"	<97	227	247	≥248
5'5"	<100	234	255	≥256
5'6"	<103	241	263	≥264
5'7"	<106	249	271	≥272
5'8"	<109	256	279	≥280
5'9"	<112	264	287	≥288
5'10"	<115	271	296	≥297
5'11"	<119	279	304	≥305
6'0"	<122	287	313	≥314
6'1"	<126	295	322	≥323
6'2"	<129	303	331	≥332
6'3"	<133	312	340	≥341
6'4"	<136	320	349	≥350
6'5"	<140	328	358	≥359
6'6"	<143	337	367	≥368
6'7"	<147	346	377	≥378
6'8"	<151	355	386	≥387
6'9"	<154	363	396	≥397

Male or Female - Ages 45 and up						
Height	Decline	Elite	Select	Advantage	Security	Decline
4'8"	<74	178	189	207	216	≥217
4'9"	<77	184	196	214	224	≥225
4'10"	<79	191	203	222	232	≥233
4'11"	<82	198	210	230	240	≥241
5'0"	<85	204	217	238	248	≥249
5'1"	<88	211	224	246	256	≥257
5'2"	<91	218	232	254	265	≥266
5'3"	<94	225	239	262	273	≥274
5'4"	<97	233	247	270	282	≥283
5'5"	<100	240	255	279	291	≥292
5'6"	<103	247	263	288	300	≥301
5'7"	<106	255	271	296	309	≥310
5'8"	<109	263	279	305	318	≥319
5'9"	<112	270	287	314	328	≥329
5'10"	<115	278	296	324	338	≥339
5'11"	<119	286	304	333	347	≥348
6'0"	<122	294	313	342	357	≥358
6'1"	<126	303	322	352	367	≥368
6'2"	<129	311	331	362	377	≥378
6'3"	<133	320	340	372	388	≥389
6'4"	<136	328	349	382	398	≥399
6'5"	<140	337	358	392	408	≥409
6'6"	<143	346	367	402	419	≥420
6'7"	<147	355	377	412	430	≥431
6'8"	<151	364	386	423	441	≥442
6'9"	<154	373	396	433	452	≥453

Underwriting Guidelines

Medical Definitions and Terms

These definitions and terms are provided only as a guide and are not intended as an all-inclusive list. Please contact Underwriting with any medical questions.

Alzheimer's Disease – A progressive neurological disease of the brain that leads to dementia. May also be called *Presenile Dementia* or *Senile Dementia*.

Amputation – Generally refers to removal of part or all of a body part enclosed by skin. The application question refers only to amputation which is caused by disease.

Aneurysm – A localized widening of an artery or localized bulging of the heart.

Black Lung Disease – Lung disease resulting from coal mining. Black lung disease is also called *coal worker's pneumoconiosis* or *asbestosis*.

Cancer – Cancer is not one disease; it is a group of more than 100 different and distinctive diseases involving an abnormal growth of cells. May also be called a *malignancy*, *malignant tumor*, *carcinoma* or *malignant neoplasm*.

Chronic Asthma - Refers to an underlying asthmatic problem in patients who have frequent exacerbations, hospital admission within a year, limited physical activity, and/or history of life-threatening attack. The asthma has become so persistent that clinically significant chronic airflow obstruction is present and may require multiple medications, including corticosteroids, for control.

Chronic Obstructive Pulmonary Disease (COPD) – Any disorder that persistently obstructs bronchial airflow, not including asthma. COPD is also called *chronic obstructive lung disease (COLD)*.

Congestive Heart Failure – Failure of the heart to pump blood with normal efficiency. Also may be present with *cardiomyopathy*, *congestive myopathy* and *restrictive myopathy*.

Diabetes – A chronic condition caused by insulin deficiency associated with abnormally high levels of sugar (glucose) in the blood. Glycosylated Hemoglobin (HbA1c) is the gold standard in determining diabetic control and should be less than or equal to 7.5. This should be measured every six months. If HbA1c is not available, Fasting Blood Sugar (FBS) should be less than or equal to 150. Readings over these ranges indicate that the proposed insured's diabetes is not under control with current treatment.

Heart Attack – The death of heart muscle due to the loss of blood supply. Also called *myocardial infarction* or *MI*.

Kidney Failure – Loss of kidney function. Also called *renal failure*.

Liver Disease – This term includes *cirrhosis*, *hepatitis*, *cholangitis*, *liver failure*, and other diseases of the liver.

Multiple Sclerosis – A disease that attacks the central nervous system causing a loss of control over the body, with symptoms ranging from numbness to paralysis and blindness.

Parkinson's Disease – A slowly progressive neurologic disease characterized by a fixed inexpressive face, a tremor at rest, slowing of voluntary movements, a gait with short accelerating steps, peculiar posture, and muscle weakness. Also called *paralysis agitans* and *shaking palsy*.

Stroke – The sudden death of brain cells due to a disruption of blood flow to the brain. Also called *CVA (cerebrovascular accident)* or *TIA (transient ischemic attack)*.

Treatment – Administration or application of remedies for disease or injury including, but not limited to, surgery, prescription drugs, oxygen use, x-ray, radiation therapy, chemotherapy, or physical therapy.

Underwriting Guidelines

Medical Impairments

Please use the chart below to help you determine which Dignified Choice plan best fits your client's medical history. If you need additional information regarding a particular medical history, please refer to the application or call Underwriting at 800-305-1335 extension 5904.

Condition	May be eligible for	Condition	May be eligible for
Acquired Immune Deficiency Syndrome (AIDS)	Not eligible	Human Immunodeficiency Virus (HIV)	Not eligible
AIDS Related Complex (ARC)	Not eligible	Huntington's Disease	Classic Security
Alcohol Abuse/Dependency (last 36 months)	Classic Advantage	Immune Deficiency Disorder	Not eligible
Alzheimer's Disease	Classic Security	Institutionalized	Not eligible
Amputation due to disease	Not eligible	Insulin Shock (last 36 months)	Classic Advantage
Aneurysm (last 24 months)	Classic Advantage	Insulin usage prior to age 50	Classic Advantage
Angina / cardiac chest pain including treatment in the last 24 months	Classic Advantage	Kidney transplant (no dialysis in the last 12 months)	Classic Advantage
Angioplasty (last 24 months)	Classic Advantage	Kidney Disease (last 36 months)	Classic Advantage
Assisted living resident	Not eligible	Kidney Failure (last 36 months)	Classic Advantage
Atrial Fibrillation	Classic Select	Leukemia (last 24 months)	Classic Security
Basal Cell Skin Cancer	Classic Elite	Leukemia (last 25 - 60 months)	Classic Select
Bed ridden	Not eligible	Liver Disease (last 36 months)	Classic Advantage
Black Lung Disease	Classic Advantage	Lou Gehrig's Disease (ALS)	Classic Security
Bone marrow transplant	Not eligible	Melanoma (last 24 months)	Classic Security
Brain tumor (last 36 months)	Classic Advantage	Melanoma (last 25 - 60 months)	Classic Select
Bypass surgery (last 24 months)	Classic Advantage	Mental disorder (hospital or institution in last 36 months)	Classic Advantage
Cancer (last 24 months)	Classic Security	Mental retardation	Classic Security
Cancer (last 25 - 60 months)	Classic Select	Multiple Sclerosis (last 36 months)	Classic Advantage
Cardiac defibrillator implant recipient	Classic Security	Muscular Dystrophy	Classic Security
Cerebral Palsy	Classic Security	Nephropathy (kidney) (last 36 months)	Classic Advantage
Chronic Asthma	Classic Select	Nervous disorder (hospital or institution in last 36 months)	Classic Advantage
Chronic Bronchitis	Classic Advantage	Neuropathy (nerve, circulatory) (last 36 months)	Classic Advantage
Chronic Hepatitis (last 36 months)	Classic Advantage	Nursing home	Not eligible
Chronic Lung Disease	Classic Advantage	Organ transplant	Not eligible
Chronic Obstructive Pulmonary Disease (COPD)	Classic Advantage	Oxygen usage (excluding sleep apnea)	Classic Advantage
Chronic Respiratory Disorder (not asthma or sleep apnea)	Classic Advantage	Pacemaker implant (last 24 months)	Classic Advantage
Congestive Heart Failure (CHF)	Classic Security	Parkinson's Disease (last 36 months)	Classic Advantage
Convalescent home currently	Not eligible	Parole (last 36 months)	Classic Advantage
Criminal conviction (last 36 months)	Classic Advantage	Peripheral Artery Disease (last 36 months)	Classic Advantage
Cystic Fibrosis	Classic Security	Peripheral Vascular Disease (last 24 months)	Classic Advantage
Dementia	Classic Security	Peripheral Vascular Disease (last 36 months)	Classic Advantage
Diabetes Complications (last 36 months)	Classic Advantage	Probation (last 36 months)	Classic Advantage
Diabetes not in control (last 36 months)*	Classic Advantage	Procedure for brain circulation (last 24 months)	Classic Advantage
Diabetic Coma (last 36 months)	Classic Advantage	Retinopathy (eye) (last 36 months)	Classic Advantage
Down's Syndrome	Classic Security	Sarcoidosis (last 36 months)	Classic Advantage
Driving Violations (3 or more in last 36 months)	See MVR section	Schizophrenia (last 36 months)	Classic Advantage
Drug Abuse/Dependency (last 36 months)	Classic Advantage	Sickle Cell Anemia	Classic Security
DUI - Alcohol or Drugs	See MVR section	Spina Bifida	Classic Security
Emphysema	Classic Advantage	Stent (last 24 months)	Classic Advantage
Enlarged Heart (last 24 months)	Classic Advantage	Stroke (last 24 months)	Classic Advantage
Heart Attack (within 6 months)	Classic Security	Surgery recommended or pending	Not eligible
Heart Attack (within 7-24 months)	Classic Advantage	Systemic Lupus (last 36 months)	Classic Advantage
Home health care recipient	Not eligible	Terminal illness	Not eligible
Hospice care	Not eligible	Transient Ischemic Attack (TIA) (last 24 months)	Classic Advantage
Hospitalized	Not eligible	Wheelchair confinement**	Not eligible

*Glycosylated Hemoglobin (HbA1c) is the gold standard in determining diabetic control and should be less than or equal to 7.5. This should be measured every six months. If HbA1c is not available, Fasting Blood Sugar (FBS) should be less than or equal to 150. Readings over these ranges indicate that the proposed insured's diabetes is not under control with current treatment.

**Wheelchair confinement due to illness, disease or quadriplegia.

Underwriting Guidelines

Prescribed Medicine

Several of the application health questions ask if the Proposed Insured has received treatment for the listed medical conditions. Prescription medicines are considered treatment. In order to help best assess eligibility, it is important that you ask if medicine has been prescribed and for what reason. The following list is provided to help you determine whether a client is eligible to be considered for a Classic Elite or Classic Select plan. This list is not all inclusive and is subject to change as new drugs become available and existing drugs are used for additional conditions.

Medication	Time Period	Medical Condition	Decision for Elite and Select Plans
Aggrenox	24 months	Stroke or TIA	Decline if stroke or TIA within 2 years
Amantadine HCL	36 months	Parkinson's	Decline
Ambisome	Ever	HIV Treatment likely	Decline
Anastrozole	Diagnosed or treated 24 months	Cancer	Decline if first fill within 2 years
Antabuse	Diagnosed or treated 36 months	Alcoholism	Decline
Aprepitant/Emend	Diagnosed or treated 24 months	Cancer induced nausea likely	Decline
Aptivus	Ever	HIV Treatment likely	Decline
Aranesp	36 months	Kidney Disease	Decline
Aricept	Ever	Alzheimers/Dementia	Decline
Armasin	Diagnosed or treated 24 months	Cancer	Decline
Arimidex	Diagnosed or treated 24 months	Cancer	Decline if first fill within 2 years
Atamet	36 months	Parkinson's	Decline
Atgam	Ever	Organ/Tissue Transplant likely	Decline
Atripla	Ever	HIV Treatment likely	Decline
Avenox	36 months	Multiple Sclerosis	Decline
Avonex/Rebif	36 months	Multiple Sclerosis	Decline
Baclofen	36 months	Multiple Sclerosis	Decline
Belimumab/Benlysta	36 months	Systemic Lupus likely	Decline
Benlysta	36 months	Systemic Lupus likely	Decline
Betaseron	36 months	Multiple Sclerosis	Decline
Bidil	Ever	Congestive Heart Failure likely	Decline
Calcijex	36 months	Kidney Disease	Decline
Calcitriol	36 months	Kidney Disease	Decline
Calcium Acetrate	36 months	Kidney Disease	Decline
Campath	Diagnosed or treated 24 months	Cancer	Decline
Campral	36 months	Substance Abuse	Decline
Carbidopa	36 months	Parkinsons	Decline
Carbidopa	36 months	Parkinson's likely	Decline
Carnitor	36 months	Kidney Disease	Decline
Carvedilol	Ever	Congestive Heart Failure possible	Decline if used for CHF
Casodex	Diagnosed or treated 24 months	Cancer	Decline
Chlorpromazine	36 months	Schizophrenia likely	Decline if used for Schizophrenia
Clopidogrel	24 months	Stroke or TIA	Decline if stroke or TIA within 2 years
Clozapine	36 months diagnosed or treated for schizophrenia	Schizophrenia	Decline
Clozaril	36 months	Schizophrenia	Decline
Cognex	Ever	Alzheimers/Dementia	Decline
Combivir	Ever	HIV treatment likely	Decline
Copaxone	36 months	Multiple Sclerosis	Decline

Underwriting Guidelines

Prescribed Medicine

Medication	Time Period	Medical Condition	Decision for Elite and Select Plans
Crofelemer/Fulyzaq	Ever	HIV treatment likely	Decline
Cyclosporine	Ever	Organ Transplant	Decline
Cystagon	36 months	Kidney Disease	Decline
Cytogam	Ever	Organ Transplant	Decline
Digoxin/Lanoxin	Ever	Congestive Heart Failure likely	Decline if used for CHF
Disufram	Diagnosed or treated 36 months	Alcoholism	Decline
Donepezil	Ever	Alzheimers/Dementia	Decline
Dornase alpha	Ever	Cystic Fibrosis	Decline
Emend	Diagnosed or treated 24 months	Cancer	Decline
Emtriva	Ever	HIV treatment likely	Decline
Epivir	Ever	HIV treatment likely	Decline
Esylate	Ever	Pulmonary Fibrosis likely	Decline
Exelon	Ever	Alzheimers/Dementia	Decline
Femara	Diagnosed or treated 24 months	Cancer	Decline if first fill within 2 years
Filgrastim/Neupogen	Diagnosed or treated 24 months	Cancer likely	Decline
Foscavir	Ever	HIV treatment likely	Decline
Flutamide	Diagnosed or treated 24 months	Cancer	Decline
Fosrenol	36 months	Kidney Disease	Decline
Furosemide	Ever or 36 months	CHF/Kidney Disease likely	Decline if used for CHF
Galantamine	Ever	Alzheimers/Dementia	Decline
Ganciclovir	Ever	HIV Treatment likely	Decline
Gengraf	Ever	Organ Transplant	Decline
Geoden	36 months	Schizophrenia likely	Decline if used for Schizophrenia
Haldol	36 months	Schizophrenia likely	Decline
Halperidol/Halperidone	36 months	Schizophrenia likely	Decline if used for Schizophrenia
Hectoral	36 months	Kidney Disease	Decline
Hydrea	Diagnosed or treated 24 months	Cancer	Decline
Hydroxyurea	Diagnosed or treated 24 months	Cancer	Decline
Interferon/Ribaviran	Diagnosed or treated 36 months	Hepatitis likely	Decline
Intron-A	24 or 36 months	Cancer or Hepatitis C	Decline
Invega	36 months	Schizophrenia likely	Decline if used for schizophrenia
Invirase	Ever	HIV treatment likely	Decline
Isosorbide & Hydralazine	Ever	Congestive Heart Failure likely	Decline if used in combination
Lamivudine-Zidowudine	Ever	HIV treatment likely	Decline
Lanoxin	Ever	Congestive Heart Failure possible	Decline if used for CHF
Laradopa/Levodopa	36 months	Parkinsons	Decline
Lasix	Diagnosed or treated 36 months	Heart/Liver/Kidney disease likely	Decline if used for CHF, liver or kidney disease
Lexiva	Ever	HIV treatment likely	Decline
Lupton	Diagnosed or treated 24 months	Cancer	Decline
Marijuana	36 months		May be eligible for all plans depending on reason prescribed
Mercaptopurine	Diagnosed or treated 24 months	Cancer	Decline
Methadone	Diagnosed or treated 36 months	Substance abuse possible	Decline
Namenda	Ever	Alzheimers/Dementia	Decline
Narcan/Naloxone/Naltrexone	Diagnosed or treated 36 months	Alcohol/Drugs	Decline

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Prescribed Medicine

Medication	Time Period	Medical Condition	Decision for Elite and Select Plans
Navene	36 months	Schizophrenia likely	Decline
Nintedanib	Ever	Pulmonary Fibrosis likely	Decline
Nitro-Dur/Nitroquick/Nitrostat	24 months	Angina/chest pain	Decline if used for chest pain/angina in the last 24 months
Nitroglycerin	24 months	Angina/Chest pain	Decline if used for chest pain/angina in the last 24 months
Norvir	Ever	HIV treatment likely	Decline
Ofev	Ever	Pulmonary Fibrosis likely	Decline
Olanzapine	36 months	Schizophrenia possible	Decline if used for Schizophrenia
Ondansetron	Diagnosed or treated 24 months	Cancer	Decline
Pegasys/Peg-Intron	36 months	Liver Disease	Decline
Prograf	Ever	Organ Transplant	Decline
Pulmozyme	Ever	Cystic Fibrosis	Decline
Quetiapine	36 months	Schizophrenia possible	Decline if used for schizophrenia
Rapamune	Ever	Organ Transplant	Decline
Razadyne	Ever	Alzheimers/Dementia	Decline
Rebif	36 months	Multiple Sclerosis	Decline
Reminyl	Ever	Alzheimers/Dementia	Decline
Renagel	36 months	Kidney Disease	Decline
Retrovir	Ever	HIV treatment likely	Decline
Ribapak	36 months	Liver disease	Decline
Ribasphere	36 months	Liver Disease	Decline
Ribavirin	Diagnosed or treated 36 months	Hepatitis C	Decline
Riluzole/Rilutek	Ever	ALS likely	Decline
Risperdal/Risperidone	36 months	Schizophrenia likely	Decline
Roferon	24 or 36 months	Cancer or Hepatitis C	Decline
Seroquel	36 months	Schizophrenia likely	Decline if used for schizophrenia
Spirivia	Ever	COPD likely	Decline
Spironolactone	Ever	Congestive Heart Failure possible	Decline if used for CHF
Stalevo	36 months	Parkinson's likely	Decline
Stelazine	36 months	Schizophrenia likely	Decline
Suboxone	Diagnosed or treated 36 months	Substance abuse possible	Decline
Sulfadiazine/Primasol	36 months	Kidney Disease	Decline
Sustiva	Ever	HIV treatment likely	Decline
Tamoxifen	Diagnosed or treated 24 months	Cancer	Decline if first fill within 2 years
Targretin	Diagnosed or treated 24 months	Cancer	Decline
Thorazine	36 months	Schizophrenia likely	Decline
Trilafon	36 months	Schizophrenia likely	Decline if used for Schizophrenia
Trizivir	Ever	HIV treatment likely	Decline
Truvada	Ever	HIV treatment likely	Decline
Viracept/Viramune/Viread	Ever	HIV treatment likely	Decline
Viracept/Viread	Ever	HIV treatment likely	Decline
Zyprexa	36 months	Schizophrenia possible	Decline if used for schizophrenia



**COLUMBIAN MUTUAL
LIFE INSURANCE COMPANY**

BINGHAMTON, NEW YORK 13902-1381



**COLUMBIAN LIFE
INSURANCE COMPANY**

HOME OFFICE: CHICAGO, IL
ADMINISTRATIVE SERVICE OFFICE: BINGHAMTON, NY

Columbian Life Insurance Company is not licensed in every state.

www.cfglife.com

800-423-9765

This guide is not intended for consumer use, nor is it intended to represent a legal contract. The information contained herein is designed to serve as a general reference source only. The Company procedures and practices outlined in this guide are subject to change due to legal compliance requirements or the needs of the business.

This refers to Policy Form 1F156, 1F156-CL, 1F157-CL, 1F158, 1F158-CL, 1F159, 1F159-CL or state variation. Product availability may vary by state.

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