

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 Aptical 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 |

Underwriting Guidelines

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
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BINGHAMTON, NEW YORK 13902-1381



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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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