

American - Amicable (Am-Am)

Senior Choice Medical Impairment Guide

The Medical Impairment Guide has been developed to assist you in determining a Proposed Insured's insurability. This Guide is not all-inclusive, and State specific applications may differ from the information provided. If you have any questions about medical conditions not listed here, or how a medical condition may affect a State specific application, please contact the Home Office for a Risk Assessment via our Online Chat or at <u>riskassess@aatx.com</u>. Underwriting reserves the right to make a final decision based on all factors of the risk.

Condition / Concern	Criteria	Plan to Apply For	Question on App*
Activities of Daily Living	Require assistance (from anyone) with bathing, dressing, eating, or toileting	No Coverage	1
AIDS / HIV	Medically treated or diagnosed by a medical professional as having	No Coverage	3
Alcoholism / Alcohol Abuse	Within the past 2 years abused alcohol, or been recommended to have, treatment or counseling for alcohol use or been advised to discontinue use of alcohol	Return of Premium	7d
Alzheimer's disease	Medically diagnosed	No Coverage	2
Amputation	Have had an amputation caused by disease	No Coverage	1
Amyotrophic Lateral Sclerosis (ALS) / (Lou Gehrig's Disease)	Medically diagnosed	No Coverage	2
Aneurysm	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7b
	Medically diagnosed or treated, or hospitalized within the past 3 years	Graded	8a
Angina (Chest Pain)	Medically diagnosed or treated within the past 2 years	Return of Premium	7a
	Medically diagnosed, treated, or hospitalized within the past 3 years	Graded	8a
Angioplasty	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7b
	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8a
Bed Confinement	Currently confined to a bed	No Coverage	1
Cancer (excluding basal cell skin cancer)	Currently have cancer or history of metastatic cancer	No Coverage	1
	More than one occurrence in a lifetime	Return of Premium	5
	Medically diagnosed, treated, or hospitalized for any form of cancer within the past 2 years	Return of Premium	7c
	Medically diagnosed, treated, or hospitalized for any form of cancer within the past 3 years	Graded	8b
Cardiomyopathy	Medically diagnosed, treated, or hospitalized for	Return of Premium	7a
Catheterization (Heart)	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7b
Chronic Bronchitis	See Chronic Obstructive Pulmonary Disease (COPD).		
Chronic Hepatitis	Medically diagnosed or treated within the past 2 years	Return of Premium	7a
Chronic Kidney Disease	Medically diagnosed, treated, or hospitalized for	Return of Premium	5
Chronic Pancreatitis	Medically diagnosed or treated within the past 2 years	Return of Premium	7a
Chronic Obstructive Pulmonary Disease (COPD)	Medically diagnosed or treated within the past 2 years	Return of Premium	7a
	Medically diagnosed, treated, or hospitalized for, taken medication for within the past 3 years	Graded	8b

Condition / Concern	Criteria	Plan to Apply For	Question on App*
Circulatory Surgery	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7b
	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8a
Cirrhosis of the Liver	Medically diagnosed or treated within the past 2 years	Return of Premium	7a
	Medically diagnosed, treated, or hospitalized within the past 3 years	Graded	8b
Congestive Heart Failure (CHF)	Medically diagnosed, treated, or hospitalized for	No Coverage	2
Coronary Artery Bypass Surgery	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7b
	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8a
Defibrillator	Inserted within the past 2 years	Return of Premium	7b
Dementia	Medically diagnosed, treated, or hospitalized for	No Coverage	2
Diabetes	Combined with any medical history of any of the following: Retinopathy, Nephropathy, Neuropathy	Return of Premium	4
	Taken Insulin shots prior to age 50	Return of Premium	4
	Treated for insulin shock or diabetic coma	Return of Premium	4
Diagnostic Testing, Surgery, or Hospitalization	Recommended within the past 2 years by a medical professional which has not been completed or for which the results have not been received	Return of Premium	6
Drug Abuse / Addiction	Used illegal drugs, abused drugs, had been recommended to have treatment or counseling for drug use or been advised to discontinue use of drugs within the past 2 years	Return of Premium	7d
Emphysema	See Chronic Obstructive Pulmonary Disease (COPD)		
Heart Attack	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7b
	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8a
Heart Surgery	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7b
	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8a
Hepatitis C	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7a
	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8b
Home Health Care	Currently receiving	No Coverage	1
Hospice Care	Currently receiving	No Coverage	1
Hospitalization	Currently hospitalized	No Coverage	1
Kidney Dialysis	Medically advised to have	No Coverage	2
Kidney Failure	Medically diagnosed, treated, or taken medication for	Return of Premium	5

(click on Risk Assessment) or email <u>riskassess@aatx.com</u>.

Condition / Concern	Criteria	Plan to Apply For	Question on App*
Liver Disease	Medically diagnosed, treated, or taken medication for liver failure	No Coverage	2
	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8b
Mental Incapacity	Medically diagnosed	No Coverage	2
Multiple Sclerosis (MS)	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8c
Muscular Dystrophy	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8c
Nursing Facility	Currently confined	No Coverage	1
Organ Transplant	Medically advised to have	No Coverage	2
Oxygen Equipment	Currently used to assist in breathing	No Coverage	1
	Required to use oxygen equipment to assist in breathing within the past 2 years	Return of Premium	7a
Pacemaker	Inserted within the past 2 years	Return of Premium	7b
Paralysis	Medically diagnosed, treated, or hospitalized for paralysis of 2 or more extremities within the past 3 years	Graded	8c
Parkinson's Disease	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8c
Renal Insufficiency	Medically diagnosed, treated, or taken medication for	Return of Premium	5
Respiratory Failure	Medically diagnosed, treated, or hospitalized for	No Coverage	2
Seizures	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8c
Stroke	Medically diagnosed within the past 2 years	Return of Premium	7a
	Medically diagnosed or hospitalized within the past 3 years	Graded	8a
Systemic Lupus (SLE)	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7a
Terminal Medical Condition or End Stage Disease	Medically diagnosed or treated for a condition that is expected to result in death in the next 12 months	No Coverage	2
TIA (Transient Ischemic Attack)	Medically diagnosed, treated, or hospitalized for within the past 2 years	Return of Premium	7a
	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8a
Ulcerative Colitis	Medically diagnosed, treated, or hospitalized for within the past 3 years	Graded	8b
Wheelchair Use	Currently confined to a wheelchair due to chronic illness or disease	No Coverage	1

* Applies to standard life application Form No. 9466 (AA, OL, PA, PS); Form GL213 (IAA). The question numbers on some state specific applications may vary. Refer to the State Specifics section of this Agent Guide for plan availability.