# life underwriting condensed guide/





# **AXA Equitable Underwriting Criteria — Preferred Guidelines**

All Applicants				
Term Series <sup>SM</sup> , Athena Universal Life <sup>SM</sup> Series 152, Athena Indexed Universal Life <sup>SM</sup> , Incentive Life Legacy® II and Incentive Life Optimizer® II	Preferred Elite Non-Tobacco	Preferred Non-Tobacco	Standard Plus Non-Tobacco Preferred Tobacco Use	
All Other Products	N/A	Preferred Plus Non-Tobacco	Preferred Non-Tobacco Preferred Tobacco Use	
Total Cholesterol & Chol/HDL Ratio	220 and 5.0 and HDL > 35 or 240 and 4.5 and HDL > 35	250 and 5.0 and HDL > 35 or 270 and 4.5 and HDL > 35	270 and 6.0 and HDL > 35 or 300 and 5.0 and HDL > 35	
Tobacco Use	No nicotine use past 5 years	No nicotine use past 3 years	No nicotine use for past 12 months to qualify for non-tobacco use rates	
Alcohol and/or Substance Abuse	No history	No history of abuse for 8 years	No history of abuse for 5 years	
Aviation (Private), Avocation and Occupation	Preferred ratings may be allowed. Permanent flat extra up to \$3.50 per thousand may be available for all products as applicable.			
Medical History/ Physical Condition	No personal history of cancer (except certain skin cancers), diabetes or heart disease, even if not ratable			

## AXA Equitable Underwriting Criteria — Preferred Guidelines Cont'd

Applicants 0-69					
Term Series <sup>SM</sup> , Athena Universal Life <sup>SM</sup> Series 152, Athena Indexed Universal Life <sup>SM</sup> , Incentive Life Legacy® II and Incentive Life Optimizer® II	Preferred Elite Non-Tobacco	Preferred Non-Tobacco	Standard Plus Non-Tobacco Preferred Tobacco Use		
All Other Products	N/A	Preferred Plus Non-Tobacco	Preferred Non-Tobacco Preferred Tobacco Use		
Medication	No Rx for HTN (no exceptions)	All Rx considered	All Rx considered		
Family History	No deaths from CAD, CVD, or Ca for M or F or S < 65	No deaths from CAD or Ca for M or F < 60	No more than 1 death from CAD for M & F < 60		
Blood Pressure	140/85 (150/90 ages 60-69)	145/90 (150/90 ages 60-69)	Non-ratable BP readings		
Driving History mv = moving violations	No DWI, Reckless Driving in past 5 years No > 1 mv past 3 years	No DWI or Reckless Driving in past 5 years No > 2 mv past 3 years	No DWI or Reckless Driving in past 3 years No > 3 mv past 3 years		

Applicants 70 and Over				
Medication	All BP and cholesterol Rx considered	All BP and cholesterol Rx considered	All BP and cholesterol Rx considered	
Family History	No criteria	No criteria	No criteria	
Blood Pressure	150/90	150/90	150/90	
Driving History mv = moving violations	No DWI, Reckless Driving in past 5 years No mv in past 2 years	No DWI, Reckless Driving in past 5 years No mv in past 2 years	No DWI, Reckless Driving in past 3 years No mv in past 2 years	

### Abbreviations are as follows:

Coronary Artery Disease (CAD), Cerebrovascular Disease (CVD), Cancer (Ca), Mother (M), Father (F), Siblings (S), Hypertension (HTN), Blood Pressure (BP), Medication (Rx).

## **BMI/Build Charts**

	BMI Ages up to 69				BMI Ages 70 and up	,
	Eminação ap to oo			DIVILINGUS TO UNU UP		
Term Series <sup>SM</sup> , Athena Universal Life <sup>SM</sup> , Athena Indexed Universal Life <sup>SM</sup> , Incentive Life Legacy <sup>®</sup> II and Incentive Life Optimizer <sup>®</sup> II	Preferred Elite Non-Tobacco	Preferred Non- Tobacco	Standard Plus Non-Tobacco	Preferred Elite Non-Tobacco	Preferred Non- Tobacco	Standard Plus Non-Tobacco
All Other Products	N/A	Preferred Plus Non-Tobacco	Preferred Non- Tobacco, Preferred Tobacco Use	N/A	Preferred Plus Non-Tobacco	Preferred Non- Tobacco, Preferred Tobacco Use
Height	Maximum Weight BMI 28	Maximum Weight BMI 29.5	Maximum Weight BMI 31	Maximum Weight BMI 30	Maximum Weight BMI 31.5	Maximum Weight BMI 33
4' 6"	116	122	129	125	131	137
4' 7"	121	127	133	130	136	142
4' 8"	125	131	138	134	141	147
4' 9"	130	136	143	139	146	153
4' 10"	134	141	148	144	151	158
4' 11"	139	146	154	149	156	164
5' 0"	144	151	159	154	161	169
5' 1"	148	156	164	159	167	175
5' 2"	153	161	170	165	172	181
5' 3"	158	166	175	170	178	186
5' 4"	163	171	181	175	184	192
5' 5"	168	179	186	180	189	198
5' 6"	174	183	192	186	195	205
5' 7"	179	188	198	192	201	211
5' 8"	184	194	204	197	207	217
5' 9"	190	200	210	203	213	223
5' 10"	195	205	216	209	220	230
5' 11"	201	211	222	215	226	237
6' 0"	207	218	229	221	232	243
6' 1"	212	223	235	227	239	250
6' 2"	218	229	241	234	245	257
6' 3"	224	236	248	240	252	264
6' 4"	230	242	255	246	259	271
6' 5"	236	248	261	253	266	278
6' 6"	242	255	268	260	273	285
6' 7"	249	262	275	266	280	293
6' 8"	255	268	282	273	287	300
6' 9"	261	275	289	280	294	308
6' 10"	268	282	296	287	301	315
6' 11"	274	289	304	294	309	323
7' 0"	281	296	311	301	316	331

1 BMI = Body Mass Index

Note: Chart is unisex, maximum weight is in pounds.

#### Life Underwriting Requirements Ages 0–50

(See Notes Section on Page 6 for Definitions and Additional Requirements.)

Face Amounts		Issue Ages			
race Amounts	0-15	16-30	31-35	36-40	41-50
\$0 to \$99,999		Non-Med <sup>2</sup>			
\$100,000			Blo		Non-Med <sup>2</sup> , HOS, Blood, (MVR: Term products only)
\$100,001 to \$249,999	Non-Med <sup>2</sup>	Non-Med², HOS, Blood, MVR  Blood pro  Para		Paramed, HOS, Blood, (MVR: Term products only)	
\$250,000	Non med			Paramed, HOS, Blood, MVR	
\$250,001 to \$500,000				OS, Blood, MVR	
\$500,001 to \$1,500,000					
\$1,500,001 to \$1,999,999		Paramed, HOS, Blood, MVR			
\$2,000,000		Paramed, HOS, Blood, APS, MVR			
\$2,000,001 to \$5,000,000	Non-Med <sup>2</sup> , APS	Paramed HIIN BIOOD APN MAR		Paramed, HOS, Blood, EKG, APS, MVR	
Over \$5,000,000		Paramed, HOS, Blood, APS, MVR Paramed, HOS, Blood, EKG, APS, I		PS, MVR	

#### Life Underwriting Requirements Ages 51 and Above

(See Notes Section on Page 6 for Definitions and Additional Requirements.)

Face Amounts			Issue Ages		
race Amounts	51-60	51-60 61-65		70-75	76 & Over
\$0 to \$50,000		Paramed <sup>2</sup>		Parame	d², APS
\$50,001 to \$99,999	Para	med <sup>2</sup>		Paramed <sup>2</sup> , APS	
\$100,000 to \$249,999	Paramed, HOS, Blood, (MVR: Term products only)	Paramed, HOS, Blood, APS, (MVR: Term products only)  Paramed,		Paramed, HOS, I	Blood, APS, MVR
\$250,000		Paramed, HOS,		Blood, APS, MVR	
\$250,001 to \$499,999	Paramed, HOS, Blood, MVR	Paramed, HOS,		med, HOS, Blood, EKG, APS, MVR	
\$500,000		Blood, APS, MVR			
\$500,001 to \$10,000,000	Paramed, HOS, Blood, EKG, APS, MVR				
Over \$10,000,000	Paramed, HOS, Blood, EKG, APS, MVR, (Treadmill EKG: Tobacco Users or diabetics only)  Paramed, HOS, Blood, EKG, APS, M			od, EKG, APS, MVR	

<sup>2</sup> Preferred Rate Classes Additional Requirements — Paramed Exam is required if Proposed Insured seeks Preferred Elite NT or Preferred NT rates on Term Series<sup>SM</sup>, Athena Universal Life<sup>SM</sup> Series 152, Athena Indexed Universal Life<sup>SM</sup>, Incentive Life Legacy<sup>®</sup> II and Incentive Life Optimizer<sup>®</sup> II, or Preferred Plus on all other products. MVR, Full Blood Profile and HOS are required if applicant seeks any Preferred rate, including the Standard Plus NT rate for Term Series<sup>SM</sup>, Athena Universal Life<sup>SM</sup> Series 152, Athena Indexed Universal Life<sup>SM</sup>, Incentive Life Legacy<sup>®</sup> II and Incentive Life Optimizer<sup>®</sup> II. For all ages, including Juveniles (0−17), refer to the Product Guides for age and Face Amount limits or specific product guidelines for the Preferred rating.

# Financial Underwriting Requirements (See Notes Section on Page 6 for Definitions.)

Face Amounts	Age 69 and Below	Ages 70 and Above	
\$1,000,000-\$1,999,999	N/A	· For Trusts: Complete Trust Document	
\$2,000,000 \$2,000,001-\$4,999,999		Financial Questionnaire     Inspection Report     For Trusts: Complete Trust Document	
\$5,000,000	· Financial Questionnaire	Financial Questionnaire     Inspection Report with Third-Party     Verification of Net Worth     For Trusts: Complete Trust Document	
\$5,000,001-\$10,000,000		Financial Questionnaire     Inspection Report with Third-Party     Verification of Net Worth     Documentation of Net Worth     For Trusts: Complete Trust Document	
\$10,000,001 +	Financial Questionnaire     Inspection Report with Third-Party Verification of Net Worth     Documentation of Net Worth     Prior year's federal income tax statement     Third-Party Documentation of Net Worth	Financial Questionnaire     Inspection Report with Third-Party     Verification of Net Worth     Documentation of Net Worth     For Trusts: Complete Trust Document     Prior year's federal income tax statement     Third-Party Documentation of Net Worth	

# **AXA Equitable Approved Vendors**

<u>Exams</u>				
APPS	ExamOne	EMSI	Portamedic/Hooper Holmes	
1-800-635-1677 www.appsnational.com	1-877-933-9261 www.examone.com	1-800-872-3674 www.emsinet.com	1-800-782-7373 www.portamedic.com	

APS Retrieval		
EMSI	Source Access	
1-800-472-0454	1-800-550-3781	
www.emsinet.com www.1sourceaccess.com		

Inspections		
E M S I	Infolink	
1-800-821-3879	1-800-443-1417	

#### **Notes:**

- Face Amount is defined as all life insurance in force and applied for with AXA Equitable, MONY and/or affiliates within the past 12 months from the date of the application. This includes ultimate death benefit amounts of any policy or rider (e.g., ROPR). For Survivorship, order requirements on ½ the Face Amount, except for financial underwriting document requirements (such as trust documents, Financial Supplements or federal income tax statements), order on the full Face Amount.
- Applicants Age 70 and Above: Paramed exams include a Senior Questionnaire with Cognitive/Frailty tests.
- 17 Jurisdictions CA, CT, DC, DE, FL, GA, IL, LA, MA, MD, NJ, NY, PA, PR, SC, TX, and VA require HOS for applicants over age 15 applying for \$50,000 to \$99,999.
- HOS (Home Office Specimen or Urine Specimen).
- Paramedical Exams and Laboratory Test Results are valid up to 12 months for Proposed Insureds under age 70; otherwise, up to 6 months.
- MVR (Motor Vehicle Report) will be ordered by the Home Office.
- **EKG** (Electrocardiogram): Resting EKG completed within 12 months or a Treadmill EKG completed within the past 24 months may be borrowed in lieu of a current test. Actual tracings (not the EKG report) are required.
- Treadmill EKG should not be requested if there is a history of coronary disease or chest pain. Treadmill EKG is required at ages 51–69, over \$10 million if the Proposed Insured is a tobacco user, diabetic or no APS is available.
- APS (Attending Physician Statement) is required, as indicated on the Life Underwriting Requirements charts, if the Proposed Insured had a checkup within the past year or as needed to verify the Proposed Insured's medical history. Additional Note: An APS is always required at the following Ages/Amounts: 16–50 / >\$5 million; 51–60 / >\$5,000,000; 61–65 / >\$1,000,000; 66–69 / >\$1,000,000; 70+ / All amounts.
- Prescription History and Other Pharmaceutical Data Searches (e.g., Script Check, Check Rx) will be ordered by Home Office.
- Inspection Report: A telephone interview with the Proposed Insured by our preferred vendor to confirm information provided on the application and questionnaires about the Proposed Insured's personal data, habits, insurance activity, health, finances, etc. An additional telephone interview with the Proposed Insured's accountant, attorney or banker will be conducted by our preferred vendor at Face Amounts greater than 10 million for all ages or Face Amounts 5 million or above, at ages 70 and above to verify financial information.
- Internal Data Verification will be obtained by the Home Office for applications over \$2,000,000 up to \$10,000,000 at ages under 70.
- **Documentation of Net Worth by Independent Third Party:** Balance sheets, profit & loss statements, other pro forma documents are examples of acceptable forms of documentation.

## Financial Underwriting Guidelines (See Notes Section on Page 6 for Definitions.)

Purpose	Requirements	Amounts
Personal		
		Growth Potential
	Working Individual — All sources of earned income, including salary, bonus	Maximum Ages
	or other deferred compensation or Gross Annual Earned Income	30 x income 18–40
	Non-Working Spouse, Co-Breadwinner, and Other	25 x income 41-45
Income Replacement	Dependent Adults — To determine if any amount is available,	20 x income 46–55
moome Replacement	require income information and amount of insurance on breadwinner	15 x income 56-60
	Unemployed — To determine if any amount is available, require	10 x income 61-70
	information regarding past earnings, current assets, past and future	5 x income 71–79
	occupation contemplated	Individual 80 and up consideration
Estate Planning	Need clear figure of net worth	50–75% life expectancy x appropriate estate growth factor x applicable tax rate
	· Equal amounts on all children	
Juvenile	<ul> <li>Provide coverage information on application — Total life insurance in force or pending in all companies on the juvenile and on the applicant or child's parent AND reason if there are any other children in the family insured for a lesser amount</li> </ul>	¼ to ½ amount on parent or payor. Special rules apply in NY
Debt Repayment	Copy of loan agreement	Loan duration at least 5 years — 100% of loan amount
Charitable	Cover letter explaining past interest in the charity and how the amount was determined	Replacement of past contributions
	· Donor must be age 75 or older	
	· Cover letter containing estate planning details	Countly water factors was to 2 FW factors
Future Inheritance	<ul> <li>Applicable trust documents, will, or other third-party verification of expected inheritance</li> </ul>	Growth rate factor up to 3–5% for a maximum of 10 years
	· Verification of net worth of parent(s) or bequeather(s)	
Business		
	· Insured percentage of ownership in business	
Duy Call	· Cover letter regarding buy-sell arrangement	Percent ownership x market value
Buy-Sell	· Confirmation that buy-sell agreement has been executed, information regarding business partners applied in like manner	of business
Key Person	Cover letter describing how amount was determined	10 x compensation (salary plus bonus)
Employee Benefit	Cover letter describing how amount was determined, who is covered, formula for determining coverage amount, and size of company	Individual consideration
Debt Repayment	Cover letter regarding amount of loan, loan duration, date loan committed, name of lender and collateral pledged to secure loan	Loan duration at least 5 years — 100% of loan amount x percent ownership of business

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