Diabetes Guidelines

Carrier	Comments
American National As of 12/2023	**Diabetes** – NS – dx < 5 years – age < 50 - Table 3 – 8 **Diabetes** – NS – dx < 5 years – age ≥ 50 - Standard – Table 4 **Diabetes** – NS – dx > 5 years – age < 50 - Table 4 - Decline **Diabetes** – NS – dx > 5 years – age ≥ 50 - Table 2 – 6 **Gestational diabetes** – not currently pregnant and normal labs - Standard **Type 2 diabetics'** ages 50+ with good control and optimal control of other risk factors (blood pressure, lipids, build) may receive Standard Plus rates on any permanent product.
Corebridge Financial As of 06/2023 (Under Carrier Review)	**All our diabetes cases are handled on a case-by-case basis.** Automatically declined if Diabetes is significantly complicated (i.e., amputation, etc.) or very poor control. Do not routinely order an APS Diabetes Type 1: usually requires an APS

John Hancock
As of 12/2023
	The younger the age at application and the more severe the course of the disease, the higher the ratings
	
	Gestational diabetes may be Preferred if insulin is not required, and pregnancy has no complications.
	
	Type 1 (also known as IDDM)
	  Best Case: Excellent control, no complications: 150% over age 50
	  Typical Case: 200% depending on the age and control.
	  Worst Case: Complications, poor or uncontrolled: Decline
	
	Type 2 (also known as NIDDM or Adult-Onset Diabetes)
	  Best Case: Standard Plus if age 50 and over, excellent control, no complications and treated by diet and oral medication only.
	  Best Case: Preferred if age 60 and over, excellent control, no complications, and treated by diet or oral medication only.
	  Typical Case: Standard to 150%
	  Worst Case: Decline

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Legal & General America As of 12/2023	**Diabetes mellitus (adult onset) -** We look for the best possible impaired risk for clients with **Type I.** Depending on each case, clients can be anywhere from a Standard Plus to a Decline **Type II Diabetes** - Clients with controlled - Standard Plus Consideration *Note:* The base rate varies on type (I or II) along with the age of onset. Credits available for favorable A1c and lipid values. Best possible offer on any diabetes history is *Standard Plus.*
Lincoln Financial As of 12/2023	**All cases will be looked at on an individual basis.** Things taken into consideration are age of onset, level of control (A1C) and if any related complications or comorbid issues exist, such as, obesity, smoking, CAD, etc. Allow coverages at diagnosis starting at age 10, though highly rated. Any diagnosis under age 10 is "individual consideration" and based upon a variety of factors (actual diagnosis age, level of control, current age, other risk factors, etc.)

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Lumico As of 12/2023	**Simplified Issue Final Expense (SIFE)** **Modified risk if:** **Protect Now Term (PNT)**

Simplified Issue Final Expense (SIFE)

Modified risk if:

Medical Condition	Time Frame
Diabetes diagnosed prior to 40	Current
Diabetes with heart disease	Current
Diabetes, >40 units of insulin	Current

Protect Now Term (PNT)

Condition	Favorable Factors	Unfavorable Factors
Diabetes	• Regular follow-ups with MD • Well controlled (usually A1c less than 8%) • Older Age (50 and up)	• Poorly controlled (usually A1c of greater than 10%, persistent elevations of A1c, microalbuminuria / proteinuria etc.) • Younger Age (less than 40) • Poor follow-up with MD • Unknown status of condition • Presence of Co-morbid conditions • History of ketoacidosis

- **Co-Morbid Diabetes conditions that could lead to Silver/Bronze rating or possible declines:**
    - Diabetes & Heart Disease
    - Diabetes & Kidney Disease
    - Diabetes & Cerebrovascular disease (stroke)
- **Diabetes Declines:**
    - Diabetes with complications such as heart disease
    - kidney disease
    - peripheral vascular disease

MassMutual
As of 12/2023

Diabetics are reviewed on a case-by-case scenario – no better than Standard

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Diabetes Guidelines

Carrier	Comments
Nationwide As of 12/2023	**We follow the Hannover Ascent manual. Normally the best-case scenario is Standard.** If the proposed insured meets the following parameters, Preferred Non-Tobacco rates may be considered if otherwise qualifies: Type 2 only, non-insulin dependent Age of onset > 65 Recent onset and diagnosis made at MD office within last 3 years HgA1c < 7.0 at diagnosis and since; well managed by diet, exercise and/or metformin *only* Must be on treatment with a statin unless LDL is < 100 Negative screening by CAC scan (CAC <10) or CT angiogram No evidence of end organ damage BMI <30 or >18.5 Non-tobacco BP average for last year is ≤120/80 **Gestational Diabetes** Women with a history of Gestational Diabetes, with no indications of diabetes after pregnancy, normal serum and urine glucose and normal A1c , Preferred is best rating. Consideration for a better class possible, ten years after last pregnancy, no indications of diabetes in APS(if reviewed) and in Rx report, normal serum and urine glucose and normal A1c (< 6.0).
North American As of 12/2023	Please refer to North American Underwriting Guide found on www.northamericancompany.com
OneAmerica As of 12/2023	**Type 1 — Insulin dependent,** with no coronary/vascular history - Will consider with full underwriting. **Type 2 — Non-insulin -** Will consider for expedited underwriting.
Pacific Life As of 12/2023	Possible Underwriting Decision: **Most Favorable Class Available for Non–nicotine Users:** Varies by severity and control. Standard may be available for **type 2** if over age 50 with optimal control and no complications. **Decline Probable:** Pregnant and has gestational diabetes (For gestation diabetes may order supplemental health history questionnaire in lieu of an APS). APS Required for all cases (not required if probable decline)

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Carrier	Comments

Protective Life
As of 12/2023
	Diabetes rate classification depends on **Type I** or **Type II,** age of onset, current age, medication, measure of control historically and currently with review with review of medical records and current labs to include HgbA1C and combination of any diabetic complications i.e.: tobacco use, build, hypertension, proteinuria, neuropathy, nephropathy, retinopathy, peripheral vascular disease, cerebrovascular disease, or cardiovascular disease.
	
	Older age applicants, onset age of 5 or less years ago, A1C can be up to 6.9 for possible standard.
	    Good control with no complications may qualify for Standard.
	    Moderately controlled diabetics may warrant low to moderate substandard ratings.
	    Poorly controlled diabetics with or without complications may warrant highly substandard ratings or decline.

Prudential As of 12/2023	Please refer to Prudential's Underwriting Guide found on www.pruxpress.com.
SBLI As of 12/2023	Swiss Re Manual is used
Securian Financial As of 12/2023	o All diabetic risks require full underwriting. Swiss Re manual is utilized for basic diabetes classification. On a case-by-case basis, Non-Tobacco Plus or Preferred may be available and are dependent upon age, type, date of onset, history of control, and other factors. o Gestational: GDM and currently pregnant is a postpone. Otherwise, Standard up to Preferred-Select may be available and is dependent upon age, number of instances, measured height and weight, family history, and other factors.

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Carrier	Comments
Symetra As of 12/2023	All cases are reviewed on a case-by-case basis. Age of onset, level of control, smoker status, and medical history may impact the ultimate assessment. Control credits may be available for favorable A1C. The GLR program can be applied for IUL products only, ages 20 – 70, if otherwise meets GLR criteria.
Transamerica As of 12/2023	**All products** Factors include current age, age at diagnosis, level of control, associated complications.
United of Omaha As of 12/2023	**Type I**, over age 20 – Table 2 – 8 **Type II,** over age 20 – Standard - Table 8 **All products -** Factors include current age, age at diagnosis, level of control, associated complications.

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