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Get your case off to a great start with the

# Life Underwriting Requirements Guide.

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**As you get started underwriting your case, we want to keep things simple wherever possible, so you can focus on your producers and their clients' needs. One way we do that is by offering you this underwriting requirements guide, which includes the key information you're likely to need.**

Another way we keep things simple is by asking you to call your underwriter directly. Just go straight to the source with your questions. We know most companies won't let you do that. But it works, so we use it. And we hope you will, too.

**Nationwide® Life Underwriting:  
1-888-767-7373, option 3**

• Not a deposit • Not FDIC or NCUSIF insured • Not guaranteed by the institution • Not insured by any federal government agency • May lose value

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# Medical requirements

## For all products except Nationwide YourLife® Single Premium UL

Requirements are based on the age of the proposed insured at time of application.

AMT <sup>1</sup> /AGE	0 - 17	18 - 39	40 - 50	51 - 60
\$0 - \$49,999	Nonmedical	Urine HIV	Urine HIV	Paramed, Urine HIV
\$50,000 - \$99,999	Nonmedical	Urine HIV	Urine HIV	Paramed, Urine HIV
\$100,000 - \$499,999	Nonmedical	Paramed, BCP, HOS, MVR	Paramed, BCP, HOS, MVR	Paramed, BCP, HOS, MVR
\$500,000 - \$1,000,000	IC	Paramed, BCP, HOS, MVR	Paramed, BCP, HOS, MVR	Paramed, BCP, HOS, EKG, MVR
\$1,000,001 - \$5,000,000	IC	Paramed, BCP, HOS, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS
\$5,000,001 - \$10,000,000	IC	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS
\$10,000,001 and Up	IC	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS

**APS**=Attending Physician Statement  
**BCP**=Blood Chemistry Profile  
**RX Check**=Pharmacy Database Check

**HOS**=Home Office Urine Specimen  
**IC**=Individual Consideration  
**MVR**=Motor Vehicle Report

<sup>1</sup> When determining the medical requirements for age and amount, "REQUIREMENTS" are based on current age, and "AMOUNT" is equal to the amount of insurance applied for currently with Nationwide, plus any amount of insurance placed in force within the past three years with Nationwide.

**Note:** Medical requirements on those age 69 and younger may be used for up to 12 months from date completed.

**Note:** If a survivorship policy with a specified amount greater than \$1 million is applied for, to determine "AMOUNT" use half of the new survivorship's specified amount, the full amount of any other insurance policies applied for currently with Nationwide, plus the full amount of any individual or survivorship policies placed in force within the past three years with Nationwide.

**Note:** For ages 0 to 17 at all specified amounts, each case is considered individually.

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61 - 70	71 - 80	81+
Paramed, BCP, HOS	Paramed, BCP, HOS, MVR, APS	Paramed, BCP, HOS, MVR, APS
Paramed, BCP, HOS	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS
Paramed, BCP, HOS, MVR	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS
Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS
Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS
Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS
Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS	Paramed, BCP, HOS, EKG, MVR, APS

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# Nonmedical requirements

## Client direct interview inspections

Issue age	Specified amount
18 - 70	\$5,000,000 or more
71 - 80	\$500,000 or more
81+	All specified amounts

A client direct interview (CDI) is conducted over the phone by a specially trained associate who contacts the customer directly to gather the additional information we need.

## Financial supplements

Personal Life Financial Supplement	Age 18 - 70 and amounts of \$1,000,001 - \$10,000,000* Age 71+ and amounts of \$100,001 - \$10,000,000*
Business Life Financial Supplement	Amounts of \$500,001 or more*
Third-party Financials	All ages and amounts of \$10,000,001 or more*

We reserve the right to request additional financial information if the applicant is outside of these parameters. For example, we may ask the applicant to fill out IRS Form 4506-T Request for Transcript of Tax Return so that we can verify the income stated on the life application. The applicant completes a short, one-page authorization form during the application process. Our underwriting department submits it to the IRS, and we receive the transcript within about 48 hours.

\* Amount is equal to the amount of insurance applied for currently with Nationwide, plus any amount placed in force in the past three years with Nationwide.

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# Financial underwriting requirements

## Income replacement

As you help your clients select life insurance that meets their needs, you may have questions about typical coverage amounts. Use our guidelines for some common life insurance scenarios to help answer them. Please keep in mind, though, that we may consider your clients for amounts outside these guidelines on an individual basis. Also, remember that we reserve the right to adjust these guidelines at any time.

Age	Income multiplier (maximum)
20 - 30	30x
31 - 40	25x
41 - 50	20x
51 - 60	15x
61 - 70	10x
71+	5x

## Estate protection

We base coverage levels for estate protection on applicable state and federal estate and inheritance taxes. At rates of 55% and higher, with future taxes likely to increase, you may calculate the amount of insurance necessary using reasonable estate growth projections:

- Time horizons of up to 15 years (or your client's life expectancy if it's less)
- Current interest rates of up to 8%

Keep in mind, however, that you should value all estate assets on a current or near-current basis for older clients.

## Key person

For key person protection, the maximum amount of coverage is typically five to 10 times the individual's annual salary. We may consider a higher amount if you attach a full explanation of the need. Additional information you may want to include is the business's net worth, the proposed insured's monetary contribution to the business and the in-force coverage on other key personnel.

## Buy/sell agreements

Important partners or shareholders should be insured based on their relative worth to the business. Of course, the overall value for all insureds must be realistic in relation to their respective roles and percentage of ownership of the business. We'll base the amount of insurance coverage on the reasonable appraised value of the business and the proposed insured's share of it. Typically, the amount of coverage for operating entities is up to 10 times the net income amount.

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# Factors and conditions

We consider the following conditions and factors when evaluating each proposed insured. As you review this list, remember that it's just a quick reference and does not include everything that could affect our final underwriting decision. Also, some rated classifications may qualify for the Placement Improvement Program, depending on the product, so please contact your underwriter for more details.

## Preferred Plus/Preferred risk guidelines

(For all products except Nationwide YourLife Single Premium UL. For age and amount limitations, see product specifications.)

Ages: 18 – 70	Nontobacco Preferred Plus	Nontobacco Preferred	Tobacco Preferred
<b>Nicotine/tobacco use</b>	No use within past 5 years	No use within past 12 months	Use within past 12 months
<b>Blood pressure readings</b>	Not to exceed 140/80 age ≤ 55 Not to exceed 140/90 age > 55	Not to exceed 145/90 age ≤ 55 Not to exceed 150/90 age > 55	
<b>Blood pressure treatment</b>	No treatment	Treated blood pressure acceptable if well controlled for at least one year	
<b>Total cholesterol and HDL ratio</b>	Treated cholesterol acceptable ≤ 210 and ≤ 4.5 ≤ 220 and ≤ 4.0 ≤ 230 and ≤ 3.5	Treated cholesterol acceptable ≤ 230 and ≤ 6.5      ≤ 260 and ≤ 5.0 ≤ 240 and ≤ 6.0      ≤ 270 and ≤ 4.5 ≤ 250 and ≤ 5.5	
<b>Moving violations</b>	No more than 1 in the past 3 years	No more than 2 in the past 3 years	
<b>DUI/DWI</b>	No DUI/DWI conviction in the past 5 years		
<b>Drug/alcohol abuse</b>	No history of abuse	No history of abuse within 10 years	
<b>Family history</b>	No death due to cardiovascular disease or cancer in either parent or sibling prior to age 60		
<b>Felony conviction</b>	No history of felony conviction		
<b>Aviation/avocation/foreign travel</b>	No rating for aviation, hazardous avocation risk or foreign travel/residence risks <ul style="list-style-type: none"> <li>• Civil exclusion can be used, if available in the state the application was signed, with possible consideration for Preferred and Preferred Plus if rest of case qualifies</li> <li>• Any aviation (excluding commercial pilots) or hazardous avocation risk is not eligible for Preferred Plus</li> </ul>		
<b>Personal history</b>	No history of coronary artery disease, diabetes, stroke or cancer (except basal cell-skin)		
<b>Build</b>	See chart on next page		

  

Ages: 71 and Older	Nontobacco Preferred Plus	Nontobacco Preferred	Tobacco Preferred
<b>Nicotine/tobacco use</b>	No use within past 5 years	No use within past 12 months	Use within past 12 months
<b>Blood pressure readings</b>	Not to exceed 140/90	Not to exceed 150/90	
<b>Blood pressure treatment</b>	No treatment	Treated blood pressure acceptable if well controlled for at least one year	
<b>Total cholesterol and HDL ratio</b>	Treated cholesterol acceptable ≤ 270 and ≤ 4.5 Must be ≥ 160 unless treated	Treated cholesterol acceptable ≤ 280 and ≤ 6.5 Must be ≥ 160 unless treated	
<b>Serum albumin</b>	≥ 4.2	≥ 4.0	
<b>Functional</b>	Has the ability to perform all activities of daily living and instrumental activities of daily living		
<b>Cognitive</b>	No evidence of impairment by testing		
<b>Moving violations</b>	No more than 1 in the past 3 years	No more than 2 in the past 3 years	
<b>DUI/DWI</b>	No DUI/DWI conviction in the past 5 years		
<b>Drug/alcohol abuse</b>	No history of abuse	No history of abuse within 10 years	
<b>Felony conviction</b>	No history of felony conviction		
<b>Aviation/avocation/foreign travel</b>	No rating for aviation, hazardous avocation risk or foreign travel/residence risks <ul style="list-style-type: none"> <li>• Civil exclusion can be used, if available in the state the application was signed, with possible consideration for Preferred and Preferred Plus if rest of case qualifies</li> <li>• Any aviation (excluding commercial pilots) or hazardous avocation risk is not eligible for Preferred Plus</li> </ul>		
<b>Personal history</b>	No history of coronary artery disease, diabetes, stroke or cancer (except basal cell-skin)		
<b>Build</b>	See chart on next page		

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# Build chart

(For all products except Nationwide YourLife Single Premium UL)

Height	Preferred Plus	Preferred	Standard or better	Table B	Table C	Table D	Table E	Table F	Table H	Table J	Table L	Decline
5'0"	152	161	192 or less	193 - 199	200 - 207	208 - 217	218 - 222	223 - 227	228 - 238	239 - 243	244 - 248	249 +
5'1"	156	165	198 or less	199 - 206	207 - 214	215 - 224	225 - 230	231 - 235	236 - 246	247 - 251	252 - 256	257 +
5'2"	161	170	205 or less	206 - 213	214 - 221	222 - 232	233 - 237	238 - 243	244 - 254	255 - 259	260 - 265	266 +
5'3"	166	175	211 or less	212 - 220	221 - 228	229 - 239	240 - 245	246 - 251	252 - 262	263 - 268	269 - 273	274 +
5'4"	171	180	218 or less	219 - 227	228 - 235	236 - 247	248 - 253	254 - 259	260 - 270	271 - 276	277 - 282	283 +
5'5"	175	185	225 or less	226 - 234	235 - 243	244 - 255	256 - 261	262 - 267	268 - 279	280 - 285	286 - 291	292 +
5'6"	180	190	232 or less	233 - 241	242 - 250	251 - 263	264 - 269	270 - 275	276 - 288	289 - 294	295 - 300	301 +
5'7"	185	195	239 or less	240 - 249	250 - 258	259 - 271	272 - 277	278 - 284	285 - 296	297 - 303	304 - 309	310 +
5'8"	190	200	246 or less	247 - 256	257 - 266	267 - 279	280 - 286	287 - 292	293 - 305	306 - 312	313 - 318	319 +
5'9"	195	205	253 or less	254 - 264	265 - 274	275 - 287	288 - 294	295 - 301	302 - 314	315 - 321	322 - 328	329 +
5'10"	200	210	261 or less	262 - 271	272 - 282	283 - 296	297 - 303	304 - 310	311 - 324	325 - 331	332 - 338	339 +
5'11"	205	216	268 or less	269 - 279	280 - 290	291 - 304	305 - 311	312 - 319	320 - 333	334 - 340	341 - 347	348 +
6'0"	211	222	276 or less	277 - 287	288 - 298	299 - 313	314 - 320	321 - 328	329 - 342	343 - 350	351 - 357	358 +
6'1"	218	229	284 or less	285 - 295	296 - 306	307 - 322	323 - 329	330 - 337	338 - 352	353 - 360	361 - 367	368 +
6'2"	224	236	292 or less	293 - 303	304 - 315	316 - 331	332 - 338	339 - 346	347 - 362	363 - 369	370 - 377	378 +
6'3"	231	243	300 or less	301 - 312	313 - 324	325 - 340	341 - 348	349 - 356	357 - 372	373 - 380	381 - 388	389 +
6'4"	238	250	308 or less	309 - 320	321 - 332	333 - 349	350 - 357	358 - 365	366 - 382	383 - 390	391 - 398	399 +
6'5"	244	257	316 or less	317 - 328	329 - 341	342 - 358	359 - 366	367 - 375	376 - 392	393 - 400	401-408	409+
6'6"	251	264	324 or less	325 - 337	338 - 350	351 - 367	368 - 376	377 - 385	386 - 402	403 - 411	412 - 419	420 +
6'7"	258	272	332 or less	333 - 346	347 - 359	360 - 377	378 - 386	387 - 395	396 - 412	413 - 421	422 - 430	431 +
6'8"	266	280	341 or less	342 - 355	356 - 368	369 - 386	387 - 395	396 - 405	406 - 423	424 - 432	433 - 441	442 +
6'9"	274	288	349 or less	350 - 363	364 - 377	378 - 396	397 - 405	406 - 415	416 - 433	434 - 443	444 - 452	453 +

## Nonmedical conditions

Condition	Factors considered	Best possible class
Aviation	Experience Yearly hours logged Total solo hours logged	Type of flying Aircraft flown
Racing (e.g., cars, trucks, motorcycles and boats)	Speed Location (type/class)	Frequency
Scuba Diving	Depth of dives Frequency Location (type/class)	Experience

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## Medical conditions

Condition	Factors considered	Best possible class
Alcohol/Drug abuse	Treatment Relapses Length of abstinence (decline if within three years)	Nontobacco Preferred
Arthritis	Treatment Type	Nontobacco Preferred Tobacco Preferred
Asthma*	Treatment Hospitalization Smoking	Nontobacco Preferred Nontobacco Standard
Basal Cell Skin Cancer	Single episode Location Time since event Grade/staging	Nontobacco Preferred Plus
Cancer* — includes skin cancer (except basal cell skin cancer) and all other internal types (e.g., melanoma or breast cancer)	Single episode Location Time since event Grade/staging	Nontobacco Standard
Cholesterol	Cholesterol/HDL ratio Medication	Nontobacco Preferred Plus Nontobacco Preferred Tobacco Preferred
Diabetes*	Treatment Age at onset Control	Nontobacco Standard (non-insulin-dependent diabetes) Table B (age > 50 insulin-dependent diabetes)
Epilepsy	Treatment Date of last episode	Nontobacco Standard
Heart Attack/Bypass/Angioplasty*	Age Number of vessels Time since event	Table B (age > 50)
Hypertension (high blood pressure)	Control	Nontobacco Preferred Tobacco Preferred
Mental Illness	Treatment Hospitalization (decline if within two years) Loss of work	Nontobacco Preferred (anxiety) Nontobacco Standard (depression) Table B (all others, including depression/bipolar)
Sleep Apnea	Treatment and control	Nontobacco Preferred
Stroke	Age Time since event (decline if within one year) Residuals	Nontobacco Standard

\* For these medical conditions, please note the additional questions on the next page that you can ask to help further clarify the risk.

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Common medical conditions and questions to ask:

<b>Asthma</b>
Date of diagnosis and last attack?
Type of asthma (e.g., seasonal, allergic, exercise or cold-induced)?
What type of symptoms do you experience?
Current medications used for asthma or related symptoms?
Dates of hospitalizations or emergency room visits for asthma or asthma-related symptoms?
Have you ever used tobacco in any form (type and when used)?
Have you ever been diagnosed as having any other respiratory disorder or disease (e.g., chronic bronchitis, emphysema, sleep apnea or recurring pneumonia)?
Has a pulmonary function test (breathing test) ever been done? (If yes, please list the most recent results)
Name, address and phone number of physician(s) consulted?
<b>Cancer</b>
Date of diagnosis?
Type or location of tumor?
How was the cancer treated (surgery, chemotherapy, radiation therapy or other)?
Time since treatment last ended?
What was the grade and stage?
Any metastasis or nodal involvement? (Please give details)
Any recurrence? (Please give details)
Are you currently taking any medications? (Please give details)
Do you have any other major health problems? (Please give details)
Name, address and phone number of physician who has complete records, including operative and pathology reports?
<b>Diabetes</b>
Date of diagnosis?
How are you being treated (diet, oral medication or insulin)? (Please list medication and dosage)
What is your most recent blood glucose reading and glycosylated hemoglobin (HgA1c)?
Do you monitor your own blood sugar readings?
Have you experienced any medical complications related to diabetes (e.g., vision concerns, skin ulcers, kidney problems, diabetic coma, insulin shock)? (Please explain)
Have you experienced any symptoms of, or been diagnosed with, hypertension, coronary artery disease, stroke or peripheral vascular disease? (Please provide dates and details)
Have you smoked cigarettes in the last 12 months? (Please list type and date last used)
How often do you see your physician? (Please list date of late visit)
Name, address and phone number of physician who has your complete medical records?
<b>Heart attack/bypass/angioplasty</b>
Date chest pain first occurred?
What was the final diagnosis (e.g., heart attack, ischemia)?
What tests were performed (e.g., stress EKG, thallium stress EKG, stress echo)? (Please list the results)
Was a cardiac catheterization completed? (Please list details and results)
Was a surgical procedure performed? (Please list the type — angioplasty, bypass, atherectomy — number of vessels involved and date performed)
Are you currently taking any medications? (Please give details)
Have you had any recurrent chest pain or shortness of breath? (Please provide date and details)
Any medical history of diabetes, high blood pressure, high cholesterol or family history of heart disease?
Have you ever used tobacco in any form? (Please note type and date last used)
Name, address and phone number of physicians and hospitals consulted? (Please include dates you saw them and why)

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## Celebratory cigar program

Some clients are going to celebrate with a cigar every once in a while. We understand that, and we don't think it should keep them from getting Nontobacco Preferred rates if they're otherwise healthy and qualify.

### Occasional cigar smokers can still get Nontobacco Preferred rates if:

- They don't smoke more than one cigar a week or five cigars a month
- They disclose their cigar use on the application
- They test negative for tobacco use

Please note that these guidelines apply to cigar use only. No other form of tobacco use is eligible.

## Wellness credits

For your customers who maintain a healthy lifestyle, our wellness credits could result in a better underwriting classification and price for their life insurance. Here's how the program works:

- We automatically review all cases to see if they're eligible for wellness credits; when one meets the criteria listed below, we automatically apply the credits — there are no forms to submit
- An insured may be credited up to one classification, including from Preferred to Preferred Plus, and wellness credits can improve substandard ratings

### Wellness credits are available for insureds with favorable:

Build/BMI	Blood pressure readings	Cardiac testing
Stress test/exercise capacity	Family history	Lab results

### The wellness credit program is open to:

- All ages
- All face amounts
- All Nationwide YourLife products except Nationwide YourLife Single Premium UL

### The wellness credit program has the following restrictions:

- It's not available for insureds with known or suspected cardiovascular disease, chronic obstructive pulmonary disease, coronary artery disease, peripheral arterial/vascular disease, cerebrovascular disease, renal disease, diabetes mellitus, connective tissue disorders, progressive muscular disorders or progressive neurological disorders
- It's not applicable for alcohol or drug risks
- No credits may be applied against permanent or temporary flat extras
- It's not available for avocation, criminal, foreign national or driving risks
- It's not available on the long-term care rider, waiver rider or accidental death benefit rider
- Cases already using Nationwide's Placement Improvement Program are not eligible for wellness credits

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# Placement Improvement Program (PIP)

We can help you place a greater number of your cases with our Placement Improvement Program. With it, proposed insureds who would be rated a Table C or better with traditional company underwriting procedures can receive a Standard rating on select permanent products.

## The Placement Improvement Program is open to:

- Insureds ages 15 to 70
- Policies with specified amounts totaling between \$100,000 and \$10 million
- Policy increases where the original policy was issued at a Table C or better
- Available on the following Nationwide YourLife products only: Whole Life series, Accumulation VUL, Protection VUL and Survivorship VUL

## The Placement Improvement Program has the following restrictions:

- Any offer obtained from reinsurance on a facultative basis
- Any case in which the customer already has in-force coverage with Nationwide that was obtained through facultative reinsurance
- Any risk rated with a flat extra (flat extras cannot be converted to table ratings to qualify)
- Risks involving ratable avocations and aviation
- Foreign risks that are ratable
- Reissued cases, conversions, internal exchanges or any situations in which full underwriting is not required
- Re-evaluation for rating reductions
- Any cases utilizing PIP will not be eligible for preferred underwriting
- Cannot be used in conjunction with wellness credits

# Reinsurance automatic and jumbo limits

Large and complex cases can be difficult to manage, but we stand ready to make them easier for you with our strong automatic binding and jumbo limits.

## Automatic binding limits

Individual and survivorship life cases	
Issue ages	Standard – Table C
0 – 24	\$25,000,000
25 – 70	\$50,000,000
71 – 75	\$15,000,000
76 – 80	\$5,000,000
81+	\$1,000,000

## Jumbo limits

Individual products		Survivorship products	
Issue ages	Jumbo limit	Issue ages	Jumbo limit
0 – 24	\$30,000,000	All ages	\$65,000,000
25 – 75	\$65,000,000		
76 – 80	\$35,000,000		
81+	\$15,000,000		

Call us directly at 1-888-767-7373, option 3.

# International underwriting guidelines

## Resident aliens, foreign nationals, foreign residence and foreign travel of U.S. citizens and non-U.S. citizens

Nationwide products are priced based on mortality experience, cultural factors, medical care, geography, demographic factors and other relevant assumptions for U.S. citizens living in the United States. Life exposure risks in other parts of the world may be different. Consequently, foreign nationals and resident aliens may present risk profiles not assumed in our pricing.

Each risk is unique and will be assessed on an individual basis. The application must be taken in the U.S. in the state where the producer is licensed. It is preferable that the underwriting process (examination requirements, interviews, inspections, etc.), as well as the final decision, be completed while the proposed insured is in the U.S. or a U.S. territory where the producer is licensed.

Occasionally, it may be necessary for the medical examination requirements to be completed elsewhere, in which case, we will allow those done at a U.S. consulate, military base or U.S.-sponsored enclave. Exam One has a foreign program and can assist with any requirements outside the U.S.

The Foreign Travel and Residence Supplement must be submitted with the application when there is travel outside the U.S. or Canada, or when the proposed insured's citizenship is other than the U.S. or Canada.

It is important to remember that current events in the world could change Nationwide's guidelines before we are able to update our guidelines. If a current event in or with a specific country may have changed the risk for that country, please contact Nationwide Underwriting for guidance.

Please note the additional requirements and guidelines that apply for individuals who fall within the following categories:

1. U.S./Canadian citizens and permanent residents (green card holders)
2. Individuals residing in the U.S. with acceptable visa types (not traveling outside the U.S. or Canada)
3. Individuals residing in an "A" country
4. Individuals residing in a "B" country
5. Individuals residing in "C" or "D" countries
6. Individuals traveling outside the U.S. or Canada
  - 6a. U.S./Canadian citizens or permanent residents (green card holders)
  - 6b. Individuals residing in the U.S. with acceptable visa types as noted in Section 2
  - 6c. Individuals residing in an "A" country
  - 6d. Individuals residing in a "B" country
  - 6e. Individuals residing in a "C" or "D" country
7. Additional consideration regarding international underwriting guidelines

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## 1. U.S./Canadian citizens and permanent residents (green card holders)

We'll handle applications on permanent residents the same as citizens of the U.S. or Canada, with the following limitations:

<b>Time in the U.S.</b>
Must have resided in the U.S. a minimum of 12 months; if not, the individual will be handled as a foreign national residing in his or her country of origin. See Section 3, 4 or 5 based on country/jurisdiction of origin. To determine the country code/jurisdiction of an individual, please refer to the country code list.
<b>Additional requirements</b>
Complete Foreign Travel and Residence Supplement Foreign amendment(s) are required for application; all forms and documents if the individual cannot understand English You are responsible for ordering, obtaining and paying for Attending Physician Statements and other necessary requirements needed from the country of origin; if the policy is placed in force, we will reimburse up to our normal and customary APS fee Any requirements received from the country of origin must be translated into English at your expense; there will be no reimbursement for translation into English
<b>Amount limits and product specifications</b>
Normal underwriting limits, rules and product specifications apply
<b>Underwriting classifications for older ages</b>
Individuals over age 70 who have resided in the U.S. for less than two years must have a personal physician in the U.S. to be considered on an individual basis
<b>Traveling outside the U.S. or Canada</b>
For individuals meeting the above guidelines, but traveling outside the U.S. or Canada, see Section 6

## 2. Individuals residing in the U.S. with acceptable visa types

For these individuals, we'll base our decision to accept the case on a variety of factors, with the key factor being evidence that they will stay in the U.S. and not travel outside the U.S. or Canada. Canadian citizens are considered the same as U.S. citizens for underwriting purposes.

<b>Acceptable visa types</b>
Individuals with one of the following visa types will be considered for coverage, based on the country of origin: H1B: Specialty workers H2B: Nonagricultural workers H1C: Nurses H4: Spouses and children (if the spouse holds a H1B or H1C visa) E1/E2: Treaty trader/treaty investor K1/K2: Fiancee or fiance of U.S. citizen/child of K1 L1/L2: Intercompany transferee/spouse or child of L1 O: Temporary worker with extraordinary ability V1/V2: Spouse/child of a legal permanent resident Any others will be considered on an individual basis
<b>Time in the U.S.</b>
Must have resided in the U.S. a minimum of 12 months; if not, the individual will be handled as a foreign national residing in his or her country/jurisdiction of origin. See Section 3, 4 or 5 based on country/jurisdiction of origin. To determine the country code/jurisdiction of an individual, please refer to the country code list.
<b>Amount limits and classification; resided in U.S. minimum 12 months; no travel outside the U.S.</b>
Underwriting classification will be based on the country/jurisdiction of origin (see country code list) A Country: Autobind up to \$10 million, possible Preferred if available on product B Country: Autobind up to \$5 million, Standard (possible Preferred in select countries if otherwise qualifies for Preferred Plus) C/D Country: individual consideration basis
<b>Product specifications</b>
No supplemental benefits (e.g., Waiver, ADB, Child rider or LTC)
<b>Additional requirements</b>
Complete Foreign Travel and Residence Supplement Social Security number, tax ID number or W-8BEN Foreign amendment(s) are required for application; all forms and documents if the individual cannot understand English You are responsible for ordering, obtaining and paying for Attending Physician Statements and other necessary requirements needed from the country of origin; if the policy is placed in force, we will reimburse up to our normal and customary APS fee Any requirements received from the country of origin must be translated into English at your expense; there will be no reimbursement for translation into English
<b>Underwriting classifications for older ages</b>
Individuals over age 70 who have resided in the U.S. for less than two years must have a personal physician in the U.S. to be considered on an individual basis
<b>Traveling outside the U.S. or Canada</b>
For individuals meeting the above guidelines, but traveling outside of the U.S. or Canada, see Section 6

Call us directly at 1-888-767-7373, option 3.

### 3. Individuals residing in an “A” country

U.S. citizens (green card holders)/Canadians/citizens of “A” countries residing outside the U.S. in an “A” country

Acceptability will be based on the factors listed below.

Country/jurisdiction	
“A” country code only To determine the country code/jurisdiction of an individual, please refer to the country code list	
Product specifications	
Permanent coverage No supplemental benefits (e.g., Waiver, ADB, Child rider or LTC)	
Age limits	
18 – 70*	
Classification	
Rating Table D or less*	
Best underwriting class available	
Preferred if available on product*	
Auto binding	
Up to and including \$10 million*	
Jumbo	
Up to and including \$20 million*	
Travel	
Travel to U.S., Canada or “A” countries only*	
Proposed insured specifications	
Occupation should be technical, professional or executive in nature Should have a pattern of visiting the U.S. or should own property, have a business or investment interests or be an employee of a U.S.-based company and show a need for a U.S.-based policy	
Unacceptable proposed insured	
Missionaries Judges, politicians, union leaders or foreign government employees Journalists	Military personnel, police or security Professional athletes or other high-profile occupations Private pilots
Premium	
The premium must be paid in U.S. dollars.	
Requirements	
Application must be taken in the U.S. state where you are licensed to do business Foreign amendment is required for application; all forms and documents if the individual cannot understand English A clear copy of a current passport must accompany the application A Foreign Travel and Residence Supplement is required Social Security number, tax ID number or W-8BEN If owner is a business, a tax ID number must be provided. If owner is a trust or LLC, a copy of the trust agreement or LLC agreement must be provided. Medical exams should be completed on U.S. soil, including Guam or Puerto Rico; individuals living abroad should have medical exams completed at a U.S. embassy, consulate or paramedical company approved by Nationwide You are responsible for ordering, obtaining and paying for Attending Physician Statements and other necessary requirements needed from the foreign country; if the policy is placed in force, we will reimburse up to our normal and customary APS fee All requirements from a foreign country must be translated into English at your expense; there will be no reimbursement for translation into English	

\* Individual consideration will be given if outside these limits.

Call us directly at 1-888-767-7373, option 3.



## 4. Individuals residing in a “B” country

U.S. citizens (green card holders)/Canadians/citizens of “B” countries residing outside of the U.S. in a “B” country

Acceptability will be based on the factors listed below.

<b>Country/jurisdiction</b>	
“B” country code only To determine the country code/jurisdiction of an individual, please refer to the country code list	
<b>Product specifications</b>	
Permanent coverage No supplemental benefits (e.g., Waiver, ADB, Child rider or LTC)	
<b>Age limits</b>	
18 – 70*	
<b>Classification</b>	
Rating Table D or less*	
<b>Best underwriting class available</b>	
Standard** (possible Preferred in select countries if otherwise qualifies for Preferred Plus)	
<b>Auto binding</b>	
Up to and including \$5 million*	
<b>Jumbo</b>	
Up to and including \$20 million*	
<b>Proposed insured specifications</b>	
Occupation should be technical, professional or executive in nature Should have a pattern of visiting the U.S. or should own property, have a business or investment interests or be an employee of a U.S.-based company and show a need for a U.S.-based policy	
<b>Unacceptable proposed insured</b>	
Missionaries Judges, politicians, union leaders or foreign government employees Journalists	Military personnel, police or security Professional athletes or other high-profile occupations Private pilots
<b>Premium</b>	
The premium must be paid in U.S. dollars	
<b>Requirements</b>	
Application must be taken in the U.S. state where you are licensed to do business Foreign amendment is required for application; all forms and documents if the individual cannot understand English A clear copy of a current passport must accompany the application A Foreign Travel and Residence Supplement is required Social Security number, tax ID number or W-8BEN If owner is a business, a tax ID number must be provided. If owner is a trust or LLC, a copy of the trust agreement or LLC agreement must be provided. Medical exams should be completed on U.S. soil; individuals living abroad should have medical exams completed at a U.S. embassy, consulate or paramedical company approved by Nationwide You are responsible for ordering, obtaining and paying for Attending Physician Statements and other necessary requirements needed from the foreign country; if the policy is placed in force, we will reimburse up to our normal and customary APS fee All requirements from a foreign country must be translated into English at your expense; there will be no reimbursement for translation into English	
* Individual consideration will be given if outside of these limits.	
** Possible Preferred underwriting class for individuals who otherwise qualify for Preferred Plus in Brazil, China, Israel and Mexico. Other “B” countries may qualify for Standard.	

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## 5. Individuals residing in “C” or “D” countries

Any individual residing outside the U.S. in “C” or “D” countries, regardless of country of origin

To determine the country code/jurisdiction of an individual, please refer to the country code list.

Proposed insured specifications	
Occupation should be technical, professional or executive in nature	
Should have a pattern of visiting the U.S. or should own property, have a business or investment interests or be an employee of a U.S.-based company and show a need for a U.S.-based policy	
Unacceptable proposed insured	
Missionaries	Military personnel, police or security
Judges, politicians, union leaders or foreign government employees	Professional athletes or other high-profile occupations
Journalists	Private pilots
Product specifications	
Permanent coverage only	
No supplemental benefits (e.g., Waiver, ADB, Child rider or LTC)	
Country/jurisdiction	
These cases will be considered on an individual basis	
Premium	
The premium must be paid in U.S. dollars and billed to a U.S. bank or other institution with a U.S. address	
Requirements	
Application must be taken in the U.S. state where you are licensed to do business	
Foreign amendment is required for application; all forms and documents if the individual cannot understand English	
A clear copy of a current passport must accompany the application	
A Foreign Travel and Residence Supplement is required	
Social Security number, tax ID number or W-8BEN	
Medical exams should be completed on U.S. soil, including Guam or Puerto Rico; individuals living abroad can have medical exams completed at a U.S. embassy or consulate	
You are responsible for ordering, obtaining and paying for Attending Physician Statements and other necessary requirements needed from the foreign country; if the policy is placed in force, we will reimburse up to our normal and customary APS fee	
All requirements from a foreign country must be translated into English at your expense; there will be no reimbursement for translation into English	

Call us directly at 1-888-767-7373, option 3.

## 6. Individuals traveling outside the U.S. or Canada

Travel outside the U.S. is assessed by how the individual is documented to be in the U.S., the country(ies) of travel, length of stay in each country, total time outside the U.S., amounts of consideration, ratings and age of individual. Please see appropriate sections below for each proposed insured. For country/jurisdiction, please refer to the country code list.

### A. Travel for U.S./Canadian citizens or permanent residents (green card holders)

#### Less than 60 days a year, amounts up to auto bind limit or less, age 18 – 70 or rating Table D or less\*

Country/jurisdiction	Best underwriting classification if available on product
A	Preferred Plus
B	Preferred Plus

#### Less than 60 days a year, amounts \$5 million or less, age 18 – 70 or rating Table D or less\*

Country/jurisdiction	Best underwriting classification if available on product
C	\$2.00 flat extra for all "C" countries except where otherwise indicated in the country code list
D	Individual consideration

#### Greater than 60 days but less than or equal to 6 months a year, amounts \$5 million or less, age 18 – 70 or rating Table D or less\*

Country/jurisdiction	Best underwriting classification if available on product
A	Preferred
B	Standard
C, D	Individual consideration

#### Greater than 6 months a year, any amount, any age, any class or rating

Country/jurisdiction	Best underwriting classification if available on product
A, B, C, D	Individual consideration

### B. Travel for individuals residing in the U.S. with acceptable visa types as noted in Section 2

#### Less than or equal to 6 months a year, amounts \$5 million or less, age 18 – 70 or rating Table D or less\*

1. Determine the initial underwriting classification based on the country/jurisdiction of origin as noted in Section 2
2. If traveling outside the U.S. or Canada, use the following criteria to determine if the initial underwriting classification is affected by the travel to the applicable country/jurisdiction

Country/jurisdiction	Best underwriting classification if available on product
A	Preferred
B	Standard
C, D	Individual consideration

#### Greater than 6 months a year, any amount, any age, any class or rating

Country/Jurisdiction	Best underwriting classification if available on product
A	Standard
B, C or D	Individual consideration

\* Individual consideration will be given if outside these limits.

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### C. Travel for individuals residing in an “A” country

Less than 60 days a year, amounts \$10 million or less, age 18 - 70 or rating Table D or less\*

Country/jurisdiction	Best underwriting classification if available on product
A	Preferred
B, C, D	Individual consideration

### D. Travel for individual residing in a “B” country

Less than 60 days a year; amounts \$1 million or less; age 18-70; or rating Table D or less\*

Country/jurisdiction	Best underwriting classification if available on product
A	Standard (possible Preferred in select countries if otherwise qualifies for Preferred Plus)
B, C, D	Individual consideration

### E. Travel for individual residing in a “C” or “D” country

Any duration, amount, age, class or rating

Country/jurisdiction	Best underwriting classification if available on product
A, B, C, D	Individual consideration

\*Individual consideration will be given if outside these limits.

## 7. Additional considerations regarding international underwriting guidelines

Initial premium should not be collected on individuals traveling outside the U.S. or Canada within the next 60 days

For quoting purposes only; each case will be individually underwritten and assessed

Country list and/or ratings will change as world conditions change

Insured's foreign residence should be in a major metropolitan area

Foreign nationals ideally should have financial ties or obligations to the U.S.

A tax ID number, Social Security number or W-8BEN should be provided

We generally will not offer coverage to individuals residing in, or traveling to, countries or jurisdictions under a current U.S. State Department travel warning

Countries or jurisdictions or any risks not covered by these guidelines will be considered on an individual basis

Past travel is not considered

Additional requirements may be necessary

### Additional guidelines when resident alien does not speak or understand English:

Procedure to be used when producers are not multilingual or write an occasional application on a non-English speaking insured:

An interpreter must assist in the completion of the application. The interpreter must read the application and the supplement questions to the proposed insured and owner in their primary language, record the answers to any questions and review the prospectus and the terms of the temporary insurance agreement with them. An interpreter must also be present at the time of the examination and provide the answers to any questions asked by the examiner, or a bilingual medical examiner may be employed. A bilingual inspector may also have to be used by the inspection company.

Each individual serving as an interpreter must complete a foreign amendment denoting this process has been completed. The interpreter's signature must be witnessed and submitted with the application and exam. This amendment will be provided to you by the underwriting department. If multiple interpreters are used on a case, then each interpreter must complete the foreign amendment for the part of the process that they were the interpreter for and the special amendment should be forwarded to underwriting with the item that they interpreted.

If an examination is required and a bilingual examiner is not available, an interpreter (note: we will accept a family member as the interpreter) must be present at the time the examination is completed and act as an interpreter. By countersigning and dating the front of the examination form below the examiner's signature, the interpreter is attesting to the fact that the proposed insured understood and answered the medical exam questions. If the exam form is not countersigned by the interpreter, then the foreign amendment needs to be completed.

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## Country classification list

Country/Jurisdiction	Rating Code	Country/Jurisdiction	Rating Code	Country/Jurisdiction	Rating Code	Country/Jurisdiction	Rating Code
Afghanistan	D	Denmark	A	Kyrgyzstan	C	Rwanda	D
Albania	B	Djibouti	D	Laos	C	Saint Kitts	A
Algeria	C	Dominica	A	Latvia	A	Saint Lucia	A
American Samoa	A	Dominican Republic	B	Lebanon	C	Saint Vincent and the Grenadines	A
Andorra	A	East Timor	D	Lesotho	D	Samoa	B
Angola	D	Ecuador	B	Liberia	D	San Marino	A
Anguilla	A	Egypt	C	Libya	D	Sao Tome and Principe	D
Antarctica	D	El Salvador	C	Liechtenstein	A	Saudi Arabia	B
Antigua	A	Equatorial Guinea	D	Lithuania	A	Senegal	D
Argentina	A	Eritrea	D	Luxembourg	A	Serbia	B
Armenia	B	Estonia	A	Macau	A	Seychelles	B
Aruba	A	Ethiopia	D	Macedonia	B	Sierra Leone	D
Australia	A	Falkland Islands	A	Madagascar	D	Singapore	A
Austria	A	Federated States of Micronesia	B	Malawi	D	Slovakia	A
Azerbaijan	B	Fiji	B	Malaysia	B	Slovenia	A
Bahamas	visiting: residing: A	Finland	A	Maldives	B	Solomon Islands	C
Bahrain	C	France	A	Mali	D	Somalia	D
Bangladesh	C	French Guiana	B	Malta	A	South Africa	C
Barbados	A	French Polynesia	A	Marshall Islands	A	South Sudan	D
Barbuda	A	Gabon	D	Martinique	A	Spain	A
Belarus	B	Gambia	D	Mauritania	D	Sri Lanka	C
Belgium	A	Gaza	D	Mauritius	C	Sudan	D
Belize	B	Georgia	B	Mexico	B	Suriname	B
Benin	D	Germany	A	Moldova	B	Swaziland	D
Bermuda	A	Ghana	D	Monaco	A	Sweden	A
Bhutan	C	Greece	A	Mongolia	B	Switzerland	A
Bolivia	C	Greenland	A	Montenegro	B	Syria	D
Bosnia	B	Grenada	A	Montserrat	A	Taiwan	A
Botswana	C	Guadeloupe	A	Morocco	B	Tajikistan	C
Brazil	B	Guam	A	Mozambique	D	Tanzania	D
British Virgin Islands	A	Guatemala	C	Myanmar	D	Thailand	C
Brunei	B	Guinea	D	Namibia	D	Tobago	B
Bulgaria	B	Guinea Bissau	D	Nauru	C	Togo	D
Burkina Faso	D	Guyana	C	Nepal	C	Tonga	C
Burma	D	Haiti	D	Netherlands	A	Trinidad	B
Burundi	D	Honduras	C	Netherlands Antilles	A	Tunisia	B
Caicos	A	Hong Kong	A	Nevis	A	Turkey	B
Cambodia	D	Hungary	A	New Caledonia	A	Turkmenistan	C
Cameroon	D	Iceland	A	New Zealand	A	Turks	A
Canary Islands	A	India	C	Nicaragua	C	Tuvalu	C
Cape Verde	B	Indonesia	C	Niger	D	Uganda	D
Cayman Islands	A	Iran	D	Nigeria	D	Ukraine	B
Central African Republic	D	Iraq	D	Niue	B	United Arab Emirates	A
Chad	D	Ireland	A	Northern Mariana Islands	A	United Kingdom	A
Chile	A	Ireland (Northern)	A	Norway	A	Uruguay	A
China	B	Israel	B	Oman	B	U.S. Virgin Islands	A
Colombia	C	Italy	A	Pakistan	C	Uzbekistan	C
Comoros	D	Ivory Coast/Cote d'Ivoire	D	Palau	A	Vanuatu	C
Congo	D	Jamaica	visiting: residing: B	Panama	B	Vatican City	A
Congo, Democratic Republic of	D	Japan	A	Papua New Guinea	D	Venezuela	C
Cook Islands	A	Jordan	B	Paraguay	C	Vietnam	C
Costa Rica	B	Kazakhstan	B	Peru	B	Virgin Islands	A
Cote d'Ivoire	D	Kenya	D	Philippines	C	West Bank	C
Croatia	B	Kiribati	C	Poland	A	Western Sahara	D
Cuba	D	Korea, North	D	Portugal	A	Yemen	D
Curacao	A	Korea, South	A	Puerto Rico	A	Zaire	D
Cyprus	A	Kosovo	B	Qatar	B	Zambia	D
Czech Republic	A	Kuwait	B	Romania	A	Zimbabwe	D
				Russian Federation	B		

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# Long-term care (LTC) rider

Underwriting long-term care coverage differs greatly from general life insurance underwriting. Underwriting decisions are based on the medical conditions indicated. If a proposed insured has multiple medical conditions (termed co-morbidities), the long-term care risk may be compounded, and that risk may be rated or be unacceptable. The quality of recovery from an impairment, proper control and level of stability are weighed heavily when determining these risks. The long-term care rider is available only on cases rated Table E or better, and Underwriting reserves the right to ask for additional information at any time.

The long-term care rider may be known by different names in different states and may not be available in every state. Please check the product specifications for the details of the availability of this rider.

## The long-term care underwriting process

### At the time of the original life policy application

1. Submit a long-term care supplemental application along with the life application.
2. Medical requirements for the rider are identical to those listed for the life policy (based upon age and amount).
3. If we need more medical information to evaluate your case, we'll let you know what we need.
4. We conduct routine follow-ups and notify you of any status change.

### After the life policy is in force

1. Submit a supplemental application (available through our website) along with the policy adjustment application.
2. Submit any needed authorizations to obtain medical records.
3. For applicants age 51 and over, we'll require a current paramedical exam and urine specimen if the policy adjustment application and supplemental application are dated six months after the date of the life application or the date of the exam for the life policy. For applicants age 50 and below, we reserve the right to obtain additional medical requirements based on the medical history.
4. Please submit a \$200 processing fee for the application.

### For applicants ages 71 and over

1. Must have been examined by a physician within the last two years prior to the application date.
2. Or, must have a complete physical examination, including lab values, at their own expense.
3. After the exam, must send us the application, and we'll request the medical records.

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## Factors that are unique to long-term care underwriting

- **Cognitive impairment** — a deficiency in short- or long-term memory; person, place and time orientation; deductive or abstract reasoning; or safety awareness judgment (other factors include nervous or mental disorders of organic origin, including Alzheimer's or senile dementia, determined by clinical diagnosis or tests)

- **Functional capacity** — the ability to perform activities of daily living (ADLs):

- |   |  |
|---|--|
| • Bathing                               | • Transferring out of bed/chair            |
| • Dressing                              | • Eating                                   |
| • Control of bowel/bladder (continence) | • Ambulating/mobility (inside and outside) |
| • Using the toilet                      |  |

- **Mobility** — osteoporosis, falls and fractures
- **Multiple medications used**
- **Frailty** — relatively minor accidents and illnesses may cause serious disabilities
- **Co-morbid**s — more significance is attached to multiple medical problems than to each individual problem (e.g., overweight and diabetes are co-morbid of heart disease)
- **Chronological vs. physiological age** — the applicant may seem much younger or older than his or her actual age

- **Favorable factors in maintaining personal independence:**

- |   |  |
|---|--|
| • Working, either full or part time               | • The ability to travel and visit independently        |
| • A spouse in good health                         | • Exercising several times a week                      |
| • Participating in hobbies and outside activities | • Family member or friend living in the same household |
| • The current ability to drive                    |  |

## Automatic uninsurability situations

Some situations will automatically lead us to declare a customer uninsurable for the long-term care rider. They include, but are not limited to:

- Deficits in activities of daily living (ADLs) — for either physical or cognitive reasons, the individual requires help from another person to perform any one of the following ADLs:
  - Bathing
  - Dressing
  - Control of bowel/bladder (continence)
  - Using the toilet
  - Transferring out of bed/chair
  - Eating
  - Ambulating/mobility (inside and outside)
- Deficits in instrumental activities of daily living (IADLs) — for either physical or cognitive reasons, the individual requires help from another person to perform two or more of the following IADLs:
  - Using the telephone
  - Managing finances
  - Handling transportation
  - Shopping
  - Laundry
  - Housework
  - Taking all medications
  - Preparing meals/cooking
- Currently using long-term care services — the individual currently requires assisted living, home health care, nursing care or adult day care
- Currently receiving long-term disability payments, Social Security disability income or Medicaid benefits
- Currently granting power of attorney to another individual
- Currently using durable medical equipment (DME) including:
  - Walker
  - Hospital bed
  - Stair or chair lift
  - Wheelchair
  - Hoyer lift
  - Ventilator/respirator/oxygen equipment (does not include CPAP — continuous positive airway pressure)
  - Four-pronged (quad) cane
  - Motorized cart

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## Uninsurable conditions

The following uninsurable conditions have a high risk of future health deterioration leading to deficits in activities of daily living (ADLs). Please note that this list is not all-inclusive.

Acquired immune deficiency syndrome (AIDS)	Dialysis	Neurogenic arthropathy
Acromegaly	Down's syndrome	Neurogenic bladder
Acute transverse myelitis	Esophageal varices	Organic brain syndrome
AIDS-related complex (ARC)	Fall, unexplained	Oxygen use
Alzheimer's disease	Frailty	Paraplegia
Amputations — multiple limbs or due to disease	Giant cell arteritis	Parkinson's disease
Amyotrophic lateral sclerosis (ALS)/ Lou Gehrig's disease	Heart attack — multiple	Peripheral neuropathy
Ankylosing spondylitis	Heart transplant	Polyarteritis nodosa
Arteritis	HIV-positive status	Progressive muscular atrophy
Ascites	Hunter's syndrome	Pulmonary hypertension
Ataxia (unstable gait)	Huntington's disease/chorea	Quadriplegia
Atrophy (brain)	Hydrocephalus	Renal disease — end stage
Autonomic insufficiency	Ileitis	Rheumatoid arthritis
Autonomic neuropathy	Incontinence	Schizophrenia
Berger's disease	Kidney failure or transplant	Senility — all forms
Bowel incontinence	Liver transplant	Sickle cell anemia
Chronic organic brain disease	Leukemia — acute lymphocytic and acute/chronic myelogenous	Spinal cord atrophy
Chronic pain	Lou Gehrig's disease	Spinal cord injury/myelitis
Cirrhosis of the liver	Lymphoma — non-Hodgkin's	Spinal muscle atrophy
Cognitive impairment	Mental retardation	Surgery — pending
Congestive heart failure	Mixed connective tissue disease	Systemic lupus erythematosus (SLE)
Connective tissue disease	Mobility impairment with ADL or IADL limitations	Thalassemia major
Cor pulmonale	Multiple myeloma	Uremia
CREST syndrome	Multiple sclerosis	Varices — esophageal
Cystic fibrosis	Muscular dystrophy	Vasculitis — all forms
Decubitus ulcers	Myasthenia gravis	Von Recklinghausen's disease
Defibrillator	Myelofibrosis	Von Willebrand disease
Dementia	Nephrosclerosis	Walker use
Demyelinating disease	Nephrotic syndrome	Wheelchair confined
	Neurofibromatosis	Whipple's disease

Call us directly at 1-888-767-7373, option 3.

## Impairments frequently encountered

The following guide will help you determine our potential underwriting decision for the long-term care rider based on some common impairments:

<b>Arthritis/Osteoarthritis</b>	
Asymptomatic, treatment free, no ADL or IADL limitations	Standard
History of joint replacement, treatment free, no assistive devices, minimal six months after surgery	Individual consideration
History of physical therapy or occupational therapy or compression fracture	Individual consideration
Symptomatic, multiple intra-articular injections, severe or chronic treatment	Not insurable
<b>Rheumatoid Arthritis</b>	
Completely asymptomatic, normal range of motion, in remission for 12 months	Individual consideration
Treatment with history of joint replacement, severe joint deformity	Not insurable
Juvenile rheumatoid arthritis	Not insurable
<b>Cancer — with full pathology report(s)</b>	
Breast, uterine or ovarian — after 60 months, no recurrence, no metastases	Individual consideration
Bladder, cervical, colon, testicle or thyroid — after 36 months, no recurrence, no metastases	Individual consideration
Liver, lung — after 60 months, no recurrence, no metastases	Individual consideration
Pancreas, esophagus, lymphoma — after 48 months	Individual consideration
Melanoma — length of time since surgery	Individual consideration
Melanoma in situ (definite diagnosis with full pathology)	Standard
Metastatic (spread from original site)	Not insurable
Recurrent cancer (same organ or site)	Not insurable
Skin cancer (basal cell or squamous)	Standard
Prostate with prostatectomy	Individual consideration
<b>Depression</b>	
Situational, no medical treatment, minimal six month recovery, no ADL or IADL limitations	Standard
Chronic, stable with minimal six months of successful medical treatment, no ADL or IADL limitations	Individual consideration
History of hospitalization for psychiatric care, minimum of two years under control	Individual consideration
Suicide attempt — after 60 months	Individual consideration
Uncontrolled	Not insurable

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<b>Manic Depressive Disorder</b>	
Mild — controlled, no attacks in last three years, not confined to home, no functional impairment, no hospitalization or suicide attempts in last five years	Individual consideration
Moderate to severe	Not insurable
<b>Diabetes</b>	
Newly discovered — after six months	Individual consideration
Adult onset — well controlled for at least six months	Individual consideration
Juvenile diabetes	Not insurable
History of nephropathy, neuropathy, blindness, amputation or neuropathic ulcers	Not insurable
Uncontrolled	Not insurable
<b>Heart Attack (myocardial infarction)</b>	
Single heart attack after minimal 12-month recovery, stable, no ADL or IADL limitations	Individual consideration
Multiple heart attacks	Not insurable
<b>Hypertension (high blood pressure)</b>	
Well controlled for at least six months	Individual consideration
Untreated, poorly controlled or newly discovered	Not insurable
<b>Osteoporosis</b>	
Mild to moderate, minimal 24 months of stable bone density tests, no history of fractures, no ADL or IADL limitations	Individual consideration
Severe, history of fractures, abnormal bone density tests (T-score -2.5 or greater)	Not insurable

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## LTC rider height and weight guide (for men and women)

An applicant with functional or physical impairment complicated by being overweight or underweight is considered a high risk for the LTC rider. Because of that, applicants falling above or below the height and weight guide may be considered at higher rates or may be uninsurable if they also have other co-morbid impairments.

Height	Minimum weight	Maximum weight
4' 8"	74	169
4' 9"	76	176
4' 10"	79	182
4' 11"	82	188
5' 0"	84	195
5' 1"	87	201
5' 2"	90	208
5' 3"	93	215
5' 4"	96	221
5' 5"	99	228
5' 6"	102	235
5' 7"	105	243
5' 8"	109	250
5' 9"	112	257
5' 10"	115	265
5' 11"	118	272
6' 0"	122	280
6' 1"	125	288
6' 2"	129	296
6' 3"	132	304
6' 4"	136	312
6' 5"	139	320
6' 6"	143	329

# Nationwide Life Underwriting

## Common Acronyms and Abbreviations

The insurance industry is fond of its acronyms, and we've been known to use a few at Nationwide, so we thought you might find this list of common acronyms helpful.

<b>A1c</b>	Glycohemoglobin A1c	<b>CLL</b>	Chronic lymphocytic leukemia
<b>AAA</b>	Aortic abdominal aneurysm	<b>CML</b>	Chronic myelogenous leukemia
<b>ADHD/ADD</b>	Attention deficit hyperactivity disorder	<b>CNS</b>	Central nervous system
<b>ADL</b>	Activities of daily living	<b>COPD/COLD</b>	Chronic obstructive pulmonary/lung disease
<b>AER</b>	Aviation Exclusion Rider	<b>CPAP</b>	Continuous positive airway pressure
<b>AFIB</b>	Atrial fibrillation	<b>CPE</b>	Complete physical exam
<b>AIDS</b>	Acquired immune deficiency syndrome	<b>CRI</b>	Chronic renal insufficiency
<b>ALS</b>	Amyotrophic lateral sclerosis	<b>CRL</b>	Clinical Reference Laboratory
<b>APPS</b>	American Para Professional Systems (paramed)	<b>CTS</b>	Carpal tunnel syndrome
<b>APS</b>	Attending physician's statement	<b>CVA</b>	Cerebrovascular accident (stroke)
<b>APR</b>	Attending physician's report	<b>CVD</b>	Cerebrovascular disease
<b>ARC</b>	AIDS-related complex	<b>CXR</b>	Chest X-ray
<b>ASD</b>	Atrial septal defect	<b>DDD</b>	Degenerative disk disease
<b>ASHD</b>	Arteriosclerotic heart disease	<b>DJD</b>	Degenerative joint disease
<b>ATP</b>	Airline Transport Pilot Certificate	<b>DM</b>	Diabetes mellitus
<b>BCC</b>	Basal cell carcinoma	<b>DME</b>	Durable medical equipment
<b>BCP</b>	Blood chemistry profile	<b>DUI/DWI</b>	Driving under the influence/ Driving while impaired
<b>BP</b>	Blood pressure	<b>DVT</b>	Deep vein thrombosis
<b>BHP</b>	Benign prostatic hypertrophy	<b>Dx</b>	Diagnosis
<b>BUN</b>	Blood urea nitrogen	<b>EBCT</b>	Electron beam computed tomography (calcium score)
<b>Bx</b>	Biopsy	<b>EEG</b>	Electroencephalogram
<b>CABG</b>	Coronary artery bypass graph	<b>EF</b>	Ejection fraction
<b>CAD</b>	Coronary artery disease	<b>EFT</b>	Electronic funds transfer
<b>CDI</b>	Client direct interview	<b>EGD</b>	Esophagogastroduodenoscopy
<b>CBC</b>	Complete blood count	<b>EIS</b>	Express Imaging Services
<b>CFS</b>	Chronic fatigue syndrome	<b>EKG/ECG</b>	Electrocardiogram
<b>CHF</b>	Congestive heart failure	<b>EMSI</b>	Exam Management Services Inc. (paramedical vendor)
<b>CHOL</b>	Cholesterol	<b>ER</b>	Emergency room

*Continued on Page 28*

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<b>ETT</b>	Exercise treadmill test	<b>NIDDM</b>	Non-insulin-dependent diabetes mellitus
<b>FBS</b>	Fasting blood sugar	<b>NIGO</b>	Not in good order
<b>FH</b>	Family history	<b>NHL</b>	Non-Hodgkin's lymphoma
<b>GAD</b>	Generalized anxiety disorder	<b>OA</b>	Osteoarthritis
<b>GERD</b>	Gastroesophageal reflux disease	<b>OCD</b>	Obsessive-compulsive disorder
<b>GFR</b>	Glomerular filtration rate	<b>OSA</b>	Obstructive sleep apnea
<b>GI</b>	Gastrointestinal	<b>OTC</b>	Over the counter
<b>GU</b>	Genitourinary	<b>PAD/PVD</b>	Peripheral arterial/vascular disease
<b>HBP, HTN</b>	High blood pressure, hypertension	<b>Path</b>	Pathology report
<b>HDL</b>	High-density lipoprotein	<b>PFT</b>	Pulmonary function test
<b>HIPAA</b>	Health Insurance Portability and Accountability Act	<b>PIP</b>	Placement Improvement Program
<b>HOS</b>	Home office specimen (urinalysis)	<b>PKD</b>	Polycystic kidney disease
<b>IADL</b>	Instrumental activities of daily living	<b>PMR</b>	Percutaneous myocardial revascularization
<b>IBS</b>	Irritable bowel syndrome	<b>PP</b>	Postpone
<b>IC</b>	Individual consideration	<b>PSA</b>	Prostate specific antigen
<b>IDDM</b>	Insulin-dependent diabetes mellitus	<b>PTCA</b>	Percutaneous transluminal coronary angioplasty
<b>IFG</b>	Impaired fasting glucose	<b>PUD</b>	Peptic ulcer disease
<b>IFR</b>	Instrument flight rating	<b>PVD</b>	Peripheral vascular disease
<b>IGT</b>	Impaired glucose tolerance	<b>RA</b>	Rheumatoid arthritis
<b>INIF</b>	Issued not in force	<b>RAD</b>	Reactive airway disease (asthma)
<b>KFT</b>	Kidney function test	<b>RNA</b>	Risk not acceptable
<b>LFS</b>	Life financial supplement	<b>Rx</b>	Medication, treatment, therapy, prescription
<b>LFT</b>	Liver function test	<b>SCC</b>	Squamous cell carcinoma
<b>LTC</b>	Long-term care	<b>SLE</b>	Systemic lupus erythematosus
<b>LVH</b>	Left ventricular hypertrophy	<b>Sx</b>	Symptoms
<b>MD</b>	Muscular dystrophy	<b>TB</b>	Tuberculosis
<b>MDD</b>	Major depressive disorder	<b>TIA</b>	Temporary insurance agreement
<b>MI</b>	Myocardial infarction (heart attack)	<b>TM</b>	Exercise treadmill test
<b>MIB</b>	Medical Information Bureau	<b>UC</b>	Ulcerative colitis
<b>MRI</b>	Magnetic resonance imaging	<b>UGI</b>	Upper gastrointestinal x-ray series
<b>MS</b>	Multiple sclerosis	<b>URI</b>	Upper respiratory infection
<b>MVA</b>	Motor vehicle accident	<b>UTI</b>	Urinary tract infection
<b>MVP</b>	Mitral valve prolapse	<b>VFR</b>	Visual flight rating
<b>MVR</b>	Motor vehicle report	<b>VSD</b>	Ventral septal defect
<b>NI</b>	Not insurable	<b>WNL</b>	Within normal limits

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# Notes

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**Regular mail:**

Nationwide Life Insurance Company  
Attn: Life Underwriting  
P.O. Box 182835  
Columbus, OH 43218-2835

**Express mail — fixed life applications:**

Nationwide Financial Life Operations  
Attn: Life Underwriting  
5100 Rings Road, RR1-04-D4  
Dublin, OH 43017-1522

**Fax: 1-888-677-7393**

(For faster processing, include “Attn: Life Underwriting,” the applicable policy number and the insured’s full name on your cover sheet)

**Call us if you want help**

Underwriting: 1-888-767-7373, option 3  
Sales Support: 1-888-767-7373, option 1

**Check on your pending cases at [nationwide.com/bga](http://nationwide.com/bga):**

- Get real-time status updates
- Search by policy number or client name



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