

Friends Provident medical underwriting guide for advisers

For advisers only. Not for use with customers.

Introduction


The aim of this guide is to better equip you to deal with some of the most common medical disclosures, and give an indication of what terms may be possible. It is a companion to our existing [Underwriting Guide for Financial Advisers](#).

Please note that the suggested decisions reflected in this document are only a guideline. Our final decision may be better or worse depending on the application form and any evidence collected during the underwriting process. The suggested decisions do not account for a combination of illnesses, or additional risk factors such as lifestyle, occupation, hazardous sports or overseas travel.

Our underwriting philosophy may change without notice due to changes in market practice, medical and technological advances, or from our own claims experience.

Friends Provident will provide an efficient and professional service while applying an underwriting philosophy that supports our ethical reputation.

Contact us

 If you would like to speak to one of our experienced underwriters about pre-sales or technical underwriting queries, our helpline number is **0845 600 8969** (eSelect) or **0845 757 3036**

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Or please visit us at

<http://www.friendsprovident.co.uk/common/layouts/subSectionLayout.jhtml?pageld=ifa/SitePageHTML%3AUnderwriting/UnderwritingHome#>

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Glossary

BMI = Body Mass Index

Cardiovascular = relating to the heart, lungs, and the blood-vessels or overall circulatory system

CI = Critical Illness

ECG = Electrocardiogram (heart check)

GPR = General Practitioner Report

IP = Income Protection

MER = Medical Examiner Report

NSE = Nurse Screening Examination

Pulmonary = of the lung

WOP = Waiver of Premium

Suggested underwriting decisions

- Where a rating is indicated, the table below indicates the likely impact on the underwriting decision. Please note this is only a guide. If you require any further help, please contact an underwriter.

Life cover ratings	Light	Moderate	Heavy
Extra mortality	50 – 75%	100 – 175%	200% upwards

CI/IP/WOP ratings	Light	Moderate	Heavy
Extra morbidity	50%	75 – 100%	125% upwards

- Critical illness ratings apply to the individual benefit. For life or earlier critical illness, please see the separate benefit tables.

Angina

Definition

Angina means ‘pain in the chest’ and is a temporary lack of blood and oxygen supply to the heart. This can result in pain, breathlessness and fatigue. It is caused by narrowing of the arteries which supply blood to the heart itself, and this process of narrowing is called atherosclerosis. It can be caused by a number of factors that the underwriter will consider during their assessment of the application.

Potential underwriting decisions

	Stable for 5 years, no other risk factors, good exercise tolerance	Diagnosis within last 5 years	Poor control, complications or multiple negative features
Life cover	Moderate (Light – moderate if age > 60 at diagnosis)	Moderate > age 50 Heavy age 41 – 49	Heavy to decline
Critical illness	Decline	Decline	Decline
Income protection	Moderate rating	Moderate to heavy	Decline
Waiver of premium	Moderate rating	Moderate to heavy	Decline

Evidence required:

- **GP report**

Factors to consider:

- Age at diagnosis – under 40 usually decline
- Smoker status
- Results of angiography – number of arteries affected
- Treatment
- BMI
- Frequency of episodes or angina attacks
- Blood pressure and cholesterol readings
- Family history of heart disease

Positive features:

- ✓ Well documented, regular follow up and monitoring
- ✓ Good compliance to treatment regime
- ✓ Normal ECG
- ✓ Lifestyle modifications
- ✓ Stable angina

Negative features:

- Younger lives
- Smoking and alcohol consumption
- Overweight
- Raised blood pressure
- Frequent episodes or attacks
- Unstable angina (postpone or can be declined)

Arthritis

Definition

The main types of arthritis are:

Osteoarthritis: Often associated with ageing and affecting single joints. Common symptoms are pain, stiffness and swelling of the joint but may lead to damage to the joint and surrounding tissues.

Rheumatoid Arthritis: An autoimmune disease that is usually more severe. In addition to the above symptoms there may be fatigue, weight loss, poor sleep or organ damage (heart, lungs, nerves, eyes). Multiple joints around the body are often affected. Short term risks: pain, reduction in mobility.

Long term risks: Severe pain, insomnia or depression, joint destruction, paralysis, organ damage.

Potential underwriting decisions

	Minor infrequent symptoms and treatment	Recurrent symptoms of moderate severity	Longstanding condition, ongoing problems or complications
Life cover	Standard	Mild to moderate rating	Heavy to decline
Critical illness	Standard	Moderate rating and/or exclusion	Heavy rating and/or exclusion to decline
Income protection	Exclusion or light rating	Moderate rating and/or exclusion to decline	Decline
Waiver of premium	Exclusion or light rating	Moderate rating and/or exclusion to decline	Decline

A premium increase may also be applied where an exclusion cannot cover all the risks, such as complications not affecting the joints or long term treatments which may themselves carry a risk.

Evidence required:

- **Generally underwritten from the customer's disclosures on the application form**
- **A customer questionnaire may be issued where more detail is required**
- **GP report required where symptoms/treatment indicate condition is severe or complications have arisen**

Factors to consider:

- Severity of symptoms
- Frequency of symptoms
- Degree of restriction of mobility
- Type of treatment required
- Time off work
- Time off work

Positive features:

- ✓ Minor symptoms of short duration
- ✓ Minor injury with full recovery
- ✓ No time off work
- ✓ Long period without further symptoms
- ✓ No complications such as eye problems, circulation problems, organ damage

Negative features:

- Recurrent or constant symptoms
- Severe symptom or treatment
- Overweight
- Reduced mobility
- Manual occupation
- Associated depression

Asthma

Definition

Inflammation and spasm of the airways and over secretion of mucus causing reversible pulmonary (lung) obstruction causing chest tightness, shortness of breath and wheezing.

Short term risks: Status asthmaticus, which can be fatal.

Long term risks: Chronic Obstructive Pulmonary Disease.

Treatment ranges from bronchodilators (inhalers) to systemic or oral steroids and nebuliser or oxygen.

Pulmonary function tests can also be an indication of severity.

Potential underwriting decisions

	Good control, no complications or adverse features	Occasional attacks, slight impact on activities	Frequent attacks, use of steroid tablets or hospitalisation
Life cover	Standard	Light to moderate rating	Moderate rating
Critical illness	Standard	Standard	Moderate rating
Income protection	Standard	Light to moderate rating	Decline
Waiver of premium	Standard	Light to moderate rating	Decline

Evidence required:

- **Respiratory Questionnaire (from customer) or GP report**

Factors to consider:

- Age at diagnosis
- Smoker status
- Frequency of attacks
- Treatment required and response to treatment
- Pulmonary function between attacks
- Any other complications, for example Chronic Obstructive Pulmonary Disease
- BMI
- If asthma is exacerbated by occupation

Positive features:

- ✓ Smoking <20 cigarettes per day
- ✓ Well documented, regular follow up
- ✓ Treatment with bronchodilators
- ✓ No hospital admissions in the past 5 years
- ✓ Normal lung function between attacks
- ✓ No time off work

Negative features:

- Smoking >20 cigarettes per day
- Frequent use of steroid tablets
- Frequent hospital admissions
- Symptoms requiring use of nebuliser
- Reduced pulmonary function between attacks
- Affecting sleep or usual activities

Back and joint pain

Definition

Back or joint pain can be caused by an injury or as a result of a medical condition.

Symptoms can be acute (one short episode) or chronic (recurrent).

Short term risks: pain, reduction in mobility. Long term risks: chronic pain causing insomnia and depression, joint destruction. Surgical treatment and/or significant time off work may be required.

Potential underwriting decisions

	Minor symptoms of short duration, full recovery, no symptoms for 5 years	Recurrent symptoms, moderate severity, or recent onset	Ongoing symptoms, significant time off work or associated complications
Life cover	Standard	Standard	Light to moderate rating
Critical illness	Standard	Exclusion of relevant condition	Exclusion of relevant condition to decline
Income protection	Standard	Exclusion of relevant condition or light rating	Exclusion of relevant condition to decline
Waiver of premium	Standard	Exclusion of relevant condition	Exclusion of relevant condition to decline

Evidence required:

- Generally underwritten from the customer's disclosures on the application form
- A customer questionnaire may be issued where more detail is required
- GP report required where symptoms/treatment indicate condition is severe or complications have arisen

Factors to consider:

- Severity of symptoms
- Frequency of symptoms
- Whether it has affected their mobility
- Type of treatment required
- Time off work
- Nature of occupation

Positive features:

- ✓ Minor symptoms
- ✓ Short duration
- ✓ Minor injury with full recovery
- ✓ No time off work
- ✓ No restriction of movement
- ✓ No complications

Negative features:

- Recurrent or constant symptoms
- Severe symptoms or treatment
- Overweight
- Reduced mobility
- Significant time off work
- Manual occupation

Blood pressure / cholesterol

Definition

High blood pressure (hypertension) and high cholesterol (hyperlipidaemia) are defined as a sustained elevation above that which is considered average for a person's age and gender. Blood pressure increases with age but is generally considered normal if it remains below 120/80. Cholesterol is considered abnormal if the total cholesterol is above 6.5mmol/l. As blood pressure or cholesterol increase so do the risks of long term problems such as heart disease or stroke. Both are largely symptom free and the raised measurement is often the only clinical sign.

Potential underwriting decisions

	Good control, no complications or adverse features	Less than optimal control or minor negative features	Poor control, complications or multiple negative features
Life cover	Standard	Light to moderate rating	Heavy rating to postpone
Critical illness	Standard	Light to moderate rating	Postpone*
Income protection	Standard	Light to moderate rating	Heavy rating to postpone
Waiver of premium	Standard	Light to moderate rating	Heavy rating to postpone

Evidence Required:

- **Targeted questionnaire (from GP) or GP report**

Factors to consider:

- Time since diagnosis – it can take time for control of blood pressure or cholesterol to become established on medication, which can often be changed until the optimum regime is found.
*If readings are found to be high, we may postpone cover until customer has consulted GP and readings have improved over a sustained period
- Age at diagnosis
- Smoker status
- BMI
- Any other complications for example diabetes or renal disease
- Any other health history for example ischaemic heart disease (angina/heart attack)
- Family history of cardiovascular disease
- 'White coat' hypertension can attract a rating as blood pressure can still be persistently elevated

Positive features:

- ✓ Well documented, regular follow up and monitoring
- ✓ Good compliance to treatment regime
- ✓ Readings within the normal range on treatment
- ✓ No family history of heart disease or stroke

Negative features:

- Smoking and alcohol consumption
- Overweight
- Longstanding poor control
- Complications such as other cardiovascular risk factors

Cancer

Definition

A malignant tumour, arising from the growth and division of abnormal cells which can also spread to other parts of the body through the lymphatic system. There are over 200 different types of cancer.

(Benign growths and cysts are not included in this section.)

Potential underwriting decisions

As there are so many different types of cancer, it is impossible to give an indication for every scenario. Generally, we need to postpone within the first few years of the diagnosis. After this time, terms will depend on the type, size and histology of the tumour. If terms are possible, Life cover and income protection will usually attract a high loading for a temporary period – to reflect the risk of early recurrence. Critical illness will either have a specific cancer exclusion applied, or be declined. If they have had chemotherapy and/or radiotherapy, this also means that critical illness cover will be declined.

If you have a specific query we would encourage you to contact one of our underwriters to discuss it further. The more information your client can provide about the below factors, the better indication we can give you.

Evidence Required:

- **Tumour questionnaire (from GP) or GP report**

Factors to consider:

- Site of cancer (for example, breast) or type of cancer (for example, Hodgkins Lymphoma)
- The size of the tumour and the clinical grade & stage (histology). This is key in deciding what terms can be offered
- Whether it spread to the lymph nodes or spread to other areas within the body (metastases)
- Did the treatment include chemotherapy and/or radiotherapy, if yes, when did this finish
- Length of time in remission
- Age at diagnosis
- Whether the cancer has caused any other health problems, for example if a tumour was removed from the eye, has this led to blindness

Positive features:

- Small, localised tumour
- Discharged from follow-up
- Diagnosis over 5 years ago
- Otherwise good health

Negative features:

- Recent diagnosis (likely postpone)
- Spread through lymph nodes
- Metastases to other areas of body
- Recurrence of cancer
- Smoker

Diabetes mellitus

Definition

Insufficient insulin production, or a resistance to the action of insulin in the body's cells.

Short term risks: diabetic coma resulting in organ failure.

Long term risks: increased risk of heart disease, vascular disease, kidney dysfunction, eye disease, nerve damage, infections, gangrene.

Type 1 diabetes is insulin dependent and usually starts at an earlier age. Type 2 is non-insulin dependent diabetes. HbA1c readings provide a reliable indication of longer term diabetic control and the NICE target is set between 6.5-7.5%. Poor control is > 10%.

Potential underwriting decisions

	Good control, no complications or adverse features	Less than optimal control or minor negative features	Poor control, complications or multiple negative features
Life cover	Light rating	Moderate rating	Heavy rating to decline
Critical illness	Decline	Decline	Decline
Income protection	Moderate rating	Heavy rating	Decline
Waiver of premium	Moderate rating	Heavy rating	Decline

Evidence Required:

- **Diabetic questionnaire (from GP) or GP report**

Factors to consider:

- Age at diagnosis
- Smoker status
- Blood pressure
- BMI
- Level of control (HbA1c/blood sugar: treatment compliance)
- Any other complications, for example retinopathy
- Any other relevant medical history, for example angina, heart attack, stroke will be a decline
- Family history of heart disease

Positive features:

- ✓ Well documented, regular follow up and monitoring
- ✓ Good compliance to treatment regime
- ✓ Blood sugar readings with normal range on treatment
- ✓ No time off work

Negative features:

- Smoking and alcohol consumption
- Overweight
- Raised blood pressure
- Complications such as eye problems, circulation problems, organ damage
- Longstanding diabetes (complications more likely after many years)

Family history

Definition

Family history relates to first-degree blood relatives (parents, brothers or sisters) diagnosed with a specific disease before the age of 60.

Potential underwriting decisions

There are many different types of family history illnesses. Generally, acceptance terms are dependent on the relatives who have been affected, their age at diagnosis, and the specific illness they have been diagnosed with.

The following family histories are those considered during the underwriting process:

Alzheimer's disease, cancer, cardiomyopathy, diabetes, heart disease, Huntington's disease, motor neurone disease, multiple sclerosis, muscular dystrophy, Parkinson's disease, polycystic kidney disease, polyposis of the colon, raised cholesterol, stroke, any other hereditary disorder.

If you have a specific query we would encourage you to contact one of our underwriters to discuss it further. The more information your client can provide about the below factors, the better indication we can give you. Some examples follow.

Evidence required:

- **A GP report may be requested depending on the type of family and age of the affected relatives**

Factors to consider:

- Type of disease the family member had
- Which family members were affected
- The age at diagnosis of the family member
- For a family history of cancer – the site and type

Positive features:

- ✓ Single relative affected
- ✓ Relatives diagnosed in later life

Negative features:

- Multiple relatives affected
- Relatives diagnosed at young age
- Associated personal risk factors, for example family history of heart disease where client is overweight/smoker

Examples of common family history disclosures

Breast or ovarian cancer (applies to female lives only)

	1 relative diagnosed at age 50 or over	1 relative diagnosed between ages 40 and 50	2 relatives diagnosed at age 40 or over
Life cover	Standard	Standard to light rating	Moderate rating
Critical illness	Standard	Standard to moderate rating	Moderate to heavy rating or exclusion
Income protection	Standard	Light rating	Moderate to heavy rating or exclusion
Waiver of premium	Standard	Light rating	Moderate to heavy rating or exclusion

Heart disease or stroke (Heart disease refers to coronary artery disease such as angina and heart attack)

	1 relative diagnosed at age 46 or over	1 relative diagnosed at age 45 or under	2 relatives diagnosed between ages 40 and 65
Life cover	Standard	Standard	Light rating
Critical illness	Standard	Light rating	Light to moderate rating
Income protection	Standard	Standard	Light to moderate rating
Waiver of premium	Standard	Standard	Light to moderate rating

(Standard ratings assume no personal cardiovascular risk factors, for example overweight, smoker, raised cholesterol, raised blood pressure)

Bowel or colon cancer

	2 relatives diagnosed after age 60	1 relative diagnosed before age 60	2 relatives diagnosed before age 60
Life cover	Standard	Standard	Light rating
Critical illness	Standard	Light rating	Exclusion
Income protection	Standard	Standard	Exclusion
Waiver of premium	Standard	Standard	Exclusion

Diabetes

	1 relative diagnosed at any age	2 relatives diagnosed at any age
Life cover	Standard	Standard
Critical illness	Standard	Light rating
Income protection	Standard	Light rating
Waiver of premium	Standard	Light rating

Multiple sclerosis

	1 or more first degree relative diagnosed at any age
Life cover	Standard
Critical illness	Standard to light rating or exclusion
Income protection / Waiver of premium	Standard to light rating or exclusion

(Decisions based on factors including age and sex. For a more specific decision, please contact our underwriting team)

Heart attack

Definition

A heart attack or myocardial infarction is the death of a portion of heart muscle caused by a lack of blood and oxygen supply to the heart. This is usually the result of a clot or thrombus occurring in one or more of the arteries which supply blood to the heart which may already be narrowed by atherosclerosis or the cardiovascular disease process. Evidence of a heart attack can be documented by typical clinical symptoms such as chest pain, ECG changes and raised cardiac enzymes.

Potential underwriting decisions

	Single episode, single vessel disease	More than one heart attack, disease in major arteries	More than one heart attack, complications or multiple negative features
Life cover	Moderate to heavy	Heavy	Heavy to decline
Critical illness	Decline	Decline	Decline
Income protection	Usually decline	Decline	Decline
Waiver of premium	Decline	Decline	Decline

Evidence Required:

- GP report

Factors to consider:

- Age at diagnosis – under 40 usually decline
- Smoker status
- Results of angiography – number of arteries affected
- Details of treatment
- Blood pressure and cholesterol readings
- BMI
- Family history of heart disease
- Ongoing complications such as shortness of breath, angina

Positive features:

- ✓ Well documented, regular follow up and monitoring
- ✓ Good compliance to treatment regime
- ✓ Lifestyle modifications
- ✓ Good exercise tolerance

Negative features:

- Younger lives
- Smoking and alcohol consumption
- Overweight
- Raised blood pressure
- > 1 heart attack
- ECG changes

Height and weight

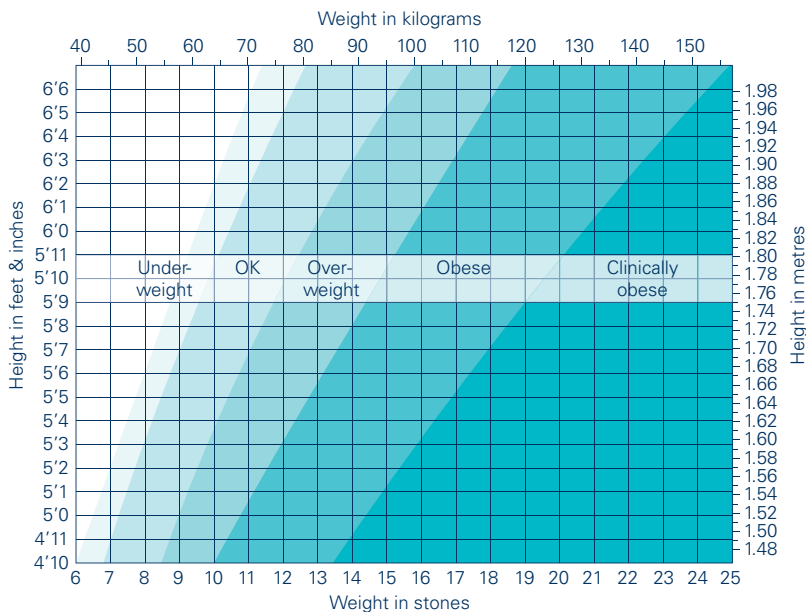
How to calculate BMI (Body Mass Index):

Metric: Take weight in kilograms, and divide by height in metres squared.

For example: Weight is 55 kilograms. Height of 1.52 metres x 1.52 metres = 2.31. So, $55 \div 2.31 = \text{BMI } 23.8$.

Imperial: 703 x weight in pounds, divided by height in inches squared.

For example: Weight is 180 lbs. Height of 6 feet = 72 inches. So, $126540 \div 5184 = \text{BMI } 24.4$.



Source: Food Standards Agency

Healthy ranges:

- BMI < 18.5 Underweight
- BMI 18.5 to 24.9 Normal range
- BMI 25 to 29.9 Overweight
- BMI 30 to 34.9 Obese class I
- BMI 35 to 39.9 Obese class II
- BMI > 40 Morbidly obese

Source: World Health Organisation

Important note

The suggested decisions are purely based on height and weight alone and do not take into account any other cardiovascular risk factors such as smoking, family history of ischaemic heart disease or personal medical health. Underwriting decisions are based on a combination of factors. The risk may be greater when one or more of these are present and may warrant a higher loading than expected, or push a borderline BMI into a decline.

Studies have shown that obesity is associated with many illnesses including heart disease, stroke, diabetes, depression, osteoarthritis and some types of cancer.

Medical evidence may be required at certain levels – depending on sum assured and BMI, and whether any relevant medical disclosures have been made.

This can be in the form of a short questionnaire or report from their GP, or a NSE. This can help us to establish further information such as waist size and whether regular exercise is taken, which could make for a more favourable decision. It also gives an up-to-date and accurate weight measurement.

Height and weight tables:

Life	BMI		BMI		BMI
Age < 35	17 – 32	Standard	Age 36 – 55	17 – 34	Standard
	33 – 36	Light		35 – 38	Light
	37 – 39	Moderate		39 – 41	Moderate
	40 – 43	Heavy		42 – 45	Heavy
	44+	Decline		46+	Decline

CIDB	BMI		BMI	
Age < 35	17 – 31	Standard	Age 36 – 55	17 – 32
	32 – 33	Light		33 – 34
	34 – 36	Moderate		35 – 37
	37 – 38	Heavy		38 – 39
	39+	Decline		40+

IP	BMI		BMI	
Age < 45	17 – 31	Standard	Age 36 – 55	17 – 34
	32 – 33	Light		35 – 36
	34 – 36	Moderate		37 – 39
	37 – 38	Heavy		40 – 41
	39+	Decline		42 +

Mental health

Definition

One or more episodes of significant and persistent lowering of mood. Can range from mild stress or anxiety to severe depression. Manic depression, schizophrenia, bipolar affective disorder and psychosis are assessed similarly to severe depression.

Risks are complex and numerous but include suicide, self harm, self neglect, accident risk, increased susceptibility to physical illness. Mental health disorders are also a major cause of time off work.

Potential underwriting decisions

	Acute or longstanding minor symptoms	Chronic condition, moderate symptoms, ongoing treatment	Severe depression, inpatient treatment
Life cover	Standard	Light to moderate rating	Heavy rating to decline
Critical illness	Standard to exclude*	Exclude*	Exclude
Income protection	Exclude	Exclude	Exclude to decline
Waiver of premium	Exclude	Exclude	Exclude to decline

*Exclusion applies to TPD only

Evidence Required:

- **Anxiety & depression questionnaire (from customer) or GP report**

Factors to consider:

- Treatment and response to treatment
- Psychiatry or in-patient treatment
- Time off work
- Suicide attempts or suicidal thoughts
- Customer's insight into condition
- Misuse of alcohol or drugs

Positive features:

- ✓ Well documented, regular follow up and monitoring
- ✓ Good compliance to treatment regime
- ✓ Stable environment and occupation
- ✓ Good customer insight
- ✓ No underlying physical illness

Negative features:

- Raised alcohol consumption
- Poor physical health
- Poor customer insight
- Social isolation
- Unstable occupation

Stroke

Definition

A stroke is when an area of the brain is deprived of its blood supply for long enough to cause vital brain tissue to die. It's basically the same as what happens in the arteries leading to the heart when someone has a heart attack. There are 2 main types - an ischaemic stroke is caused when the artery is blocked by a blood clot, which interrupts the brain's blood supply. A haemorrhagic stroke occurs when a blood vessel in or around the brain ruptures causing bleeding, or a haemorrhage, damaging its tissue. The results of stroke vary widely. Residual impairments correspond to areas in the brain that have been damaged.

Potential underwriting decisions

	Minor stroke or > age 55 at occurrence	Moderate stroke or age 45-55 at occurrence	Severe stroke, unable to carry out tasks or live independently
Life cover	Light to moderate	Moderate to heavy	Decline
Critical illness	Decline	Decline	Decline
Income protection	Usually decline	Decline	Decline
Waiver of premium	Usually decline	Decline	Decline

Evidence Required:

- GP report

Factors to consider:

- Age at occurrence (usually age < 45 will result in a decline)
- Time since event (postpone within first 6 months)
- Residual impairment (can they still carry out their usual activities without restriction, no impaired cognition)
- Smoker status
- Blood pressure
- BMI
- Any other medical history, for example heart disease or diabetes (generally decline)

Positive features:

- ✓ No residual impairment – full recovery
- ✓ Older age at onset
- ✓ TIA (transient ischaemic attack), rather than a stroke
- ✓ A stroke caused by the oral contraceptive pill, migraine or hole in the heart

Negative features:

- No longer able to work
- Raised blood pressure or cholesterol
- Heart disease or diabetes
- Overweight
- > 1 stroke (usually decline)
- Heavy smoking or alcohol consumption

Thyroid disorder

Definition

The main types of thyroid disorders are:

Goitre – which is caused by enlargement of the thyroid gland.

Hyperthyroidism (thyrotoxicosis, Grave’s Disease) – where excessive production of thyroid hormone results in overactive thyroid activity.

Hypothyroidism (myxoedema) – under activity of the thyroid gland, which can affect all body functions.

Symptoms include change in weight, irregular heartbeat, shakiness or slowness, eye disease.

Untreated, either can lead to heart problems, eye disease, and complications of pregnancy.

Potential underwriting decisions

	Controlled on or off treatment	Uncontrolled	Severe complications such as heart disease
Life cover	Standard	Postpone	Heavy to decline
Critical illness	Standard	Postpone	Decline
Income protection	Standard	Postpone	Decline
Waiver of premium	Standard	Postpone	Decline

Evidence Required:

- Generally underwritten from the customer’s disclosures on the application form
- Disregard if no adverse features are present including no time off work
- GP report required when the disorder has been diagnosed within last 3 months (6 for IP) or adverse features

Factors to consider:

- Is there an associated tumour
- Heart disease, palpitations
- BMI
- Type of treatment required and current thyroid test results
- Time off work
- Raised blood pressure

Positive features:

- ✓ Normal height to weight ratio.
- ✓ No complications for example tumour, heart disease
- ✓ No time off work
- ✓ Long period without further symptoms.
- ✓ No eye problems

Negative features:

- Time off work
- Complications such as heart disease / tumour
- Overweight or underweight
- Raised blood pressure
- Visual defects
- Poorly controlled

Common questions

What are your automatic medical evidence limits?

To see our current tables, please refer to our companion Underwriting Guide for Financial Advisers, or visit the underwriting website.

Where can I find further information about occupation classes?

Occupation classes and information about business mileage can be found on the underwriting website.

My customer is in the Armed Forces. Can you cover them?

We are often able to offer terms to members of the Armed Forces. Any decision will depend on which branch of the services the customer is in, whether they are deployed in (or going to be deployed in) an active theatre of operations or conflict and whether they perform any special duties (for example flying, bomb disposal or parachuting). The situation for HM Forces can change rapidly, so if you are looking to place a particular case, please contact our underwriters for the most up to date information.

One of my customers works at heights. Will they be rated?

We will need to know what average and maximum heights they work to, and how many times a year they do this. We will pass heights up to 40 feet. If they go above this once or twice a year we will usually pass. If they go above heights of 40 feet more than 3 times a year they may be subject to a rating, or increase in occupation class. Frequent work at heights greater than 200 feet will be considered individually for Life and Critical Illness.

My customer is outside the UK for more than 6 months each year. Are you able to cover them?

We sell to selected areas within Africa, Asia, Europe and the Middle East. Please visit our International website for more specific information, or telephone 01722 415088.

Product information and sales aids can be found at

http://www.friendsprovident.co.uk/common/layouts/subSectionLayout.jhtml?pagelId=ifa/SitePageSimple%3Aproducts/protection_home#

I'm not sure if my customer should be on smoker or non-smoker rates?

To be eligible for non-smoker rates they must not have used any form of tobacco or nicotine products within the last 12 months. A random test may be carried out at application stage to verify this.

When you are underwriting do you assess Life, Critical Illness and Income Protection in different ways?

Yes we do, although we still need fundamental information about age, sex, medical history, lifestyle, family history, occupation, hazardous sports, travel and financial justification.

When underwriting Life Cover we are concerned with the possibility of death during the cover term. For Critical Illness, underwriters will assess the possibility of one or more of our defined critical illnesses being diagnosed during the policy term. For Income Protection, an underwriter will look at the likelihood of the policyholder being unable to work for a long period of time due to illness or injury. Hence, a condition such as back pain is not usually an issue for Life Cover, but may need to be excluded for Income Protection.

Please can I have some help with inputting a disclosure onto eSelect?

We have a 'Guide to Smart Disclosure on eSelect' which may be helpful, please ask your account manager.

I have already submitted an application, but my client needs to make a new disclosure.

If the policy has not started then the client must tell us of any changes. Please ask them to send this in writing and to sign and date the information. Our underwriters are happy to answer any specific questions.

My customer's eSelect policy was started, but has now been changed because of a confirmation schedule? What does this mean?

When your client answers the application questions on eSelect and the policy goes live, a copy of their questions and answers are sent to them (confirmation schedule). They must read this, and if anything is incorrect they must tell us of any amendments. This might mean that we need further information, or must change the decision. Because the client sends the confirmation schedule directly to Friends Provident, we are unable to tell you what this said due to data protection.

My customer's cover has been postponed. What should I do next?

When the test results are available, or the postponement period has passed, please contact one of our underwriters directly to discuss next steps.

Why might an underwriter postpone an application?

If someone is awaiting medical investigation such as a scan, or surgery, then it is prudent to postpone until the results are known. We may also postpone an application due to abnormal findings on a medical report, for example, raised blood pressure. It is in the client's best interests to follow up these findings with their GP. Once this has been done and if results normalise, better terms may be possible. Sometimes we will have to postpone offering cover when a serious illness such as cancer or a heart attack has been recently diagnosed. This is to allow time for appropriate investigations to be carried out and treatment given.

Adverse terms have been applied to my customer's cover and we don't know why. How can we find out?

Please check the statement of terms as this may give details. If medical information was provided outside the application form, we are not able to discuss this with you due to data protection, but are happy to discuss with your client or their doctor instead.

What is a CMO?

A Consultant Medical Officer is a specialist doctor used to working in insurance that we can consult when we require a medical opinion regarding a customer's health. We have 8 experienced Consultant Medical Officers on our team from a variety of specialities.

I have a question about an exclusion that has been applied to the policy, and what the scope of the exclusion might be at claims stage?

Please get in touch with our underwriters who are there to help you with technical underwriting queries.

Can my customer have an exclusion on their life cover instead of a rating?

When offering terms, we don't believe in offering anything other than full life cover so we do not apply exclusions to life cover. If an increased risk is recognised, our philosophy is that it is better to offer full life cover with an additional premium, rather than excluding something and the risks around it at a full price premium.

Are your underwriting decisions reviewable?

When underwriting, we carefully consider the information to hand and whether there is any value in obtaining additional evidence. For example, if the applicant has recurrent lower back pain and is applying for income protection, we know we will need to exclude and therefore asking for more clarification from their doctor will hold the policy up. However, if the customer has a history of cancer, then we will need specific medical information in order to make our decision.

If we have applied a rating or declined the application, we have done so with good reason and generally our decisions are not reviewable. The only exception to this is if we have postponed an application.

How do you ensure that you make the best possible underwriting decision?

Here at FRIENDS, we have been providing protection products for over 175 years.

We are proud of our underwriting and here is how we make the best possible underwriting decisions for your customers:

- Market leading training and continuous development programme. All underwriters must pass the CII Life & Disability underwriting exam. Most of our underwriters have more than 5 years experience
- Evidence based decisions: we will only apply adverse terms or postpone/decline where the risk dictates, and request further evidence where crucial information is lacking
- We use the most up to date manuals and have support from 8 Consulting Medical Officers
- High quality audit standards. Cases are checked to ensure the decision is not too harsh
- Dedicated teams to set philosophy and make changes to the expert underwriting system
- Claims and underwriting work closely together to share best practice
- Sophisticated systems to interpret underwriting data, and implementing change from these findings
- Treating customers fairly is central to our culture
- We give you direct access to our underwriters to help you with pre-sales and rating queries
- Fast service - 48 hour turnaround time on all cases referred to underwriting
- Our interactive underwriting system, available on our eSelect platform

Fast facts about eSelect and our interactive underwriting system

- Our expert underwriting system can recognise over 6,500 medical conditions and around 700 different sports and pastime disclosures.
- 96.5% of lives accepted straight through for Asthma.
- 97% of lives accepted straight through for Backache.
- 90% accepted straight through for Depression, Stress, Anxiety and Phobia.

**These figures are for applications received from May to October 2010. For life cover only cases.
Source: Friends Provident**

What does this mean for you?

- Many of your customers can go on risk straight away and your commission will be generated immediately after.

Contact us

☎ If you would like to speak to one of our experienced underwriters about pre-sales or technical underwriting queries, our helpline number is **0845 600 8969** (eSelect) or **0845 757 3036**

✉ e-mail us at

lifeunderwriting@friendsprovident.co.uk

(Life & Critical Illness underwriting queries)

gm-uwimp@friendsprovident.co.uk

(Income Protection underwriting queries)

businessprotectionuw@friendsprovident.co.uk

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