

Non-medical underwriting on
Max Accumulator+ II &
Value+ Protector II



**Help get your
cases approved.
And your
commissions paid.
FASTER!**

Policies issued by American General Life Insurance
Company (AGL), The United States Life Insurance
Company in the City of New York (US Life),
members of American International Group, Inc. (AIG)



**Life insurance
coverage
for your clients.**

FASTER.



For policies that fall within specific guidelines, you can now provide non-medical underwriting, resulting in a fast, convenient path from submission to approval!

“Non-Medical Underwriting” or “Non-Med” as described in this document, means that when made available, no in-person paramedical examination will be required for life insurance.*

Faster processing times can be expected for non-medical underwriting review, leading to faster commissions and the opportunity to expand your market to include clients not interested in full medical testing.

* If we are unable to make an underwriting decision based on the Non-Medical Underwriting process, you have the option to pivot to a fully underwritten process which could include an in-person paramedical examination.

Non-medical underwriting **FAST facts.**

Non-medical underwriting guidelines.

QUICK REFERENCE GUIDE

Products / Ages	NEW Value+ Protector II: Ages 0 –50*
	Max Accumulator+ II: Ages 0– 50*
Face Amount	\$1,000,000 or less
Underwriting Classes**	Preferred Plus Non-Tobacco
	Preferred Non-Tobacco
	Standard Non-Tobacco
	Preferred Tobacco
	Standard Tobacco

- If the amount of inforce coverage for the applicant is greater than \$1,000,000, any new application for coverage cannot be available for non-medical underwriting review and will be reviewed through full underwriting at the applied-for amount.

If the amount of inforce coverage for this applicant is less than \$1,000,000, any new application for coverage may only be available for non-medical underwriting review up to a total inforce and applied-for amount of \$1,000,000.

* Ages 18–50 in the state of New York.

** Our underwriting team renders a decision based on the submitted applications, declarations of Part A and B, supplementary forms, and results of various database searches. Note that Table A and B are included in the standard rate class. Post-issue reviews will be completed by our Underwriting team and any lack of material disclosure may result in policy rescission.

Applications submitted for non-medical underwriting **often issued in 5 days.**

ONLY when the application is initially received in good order, AND processed through **iGO eApp**

Cases receiving 5-day turnaround, must meet all non-medical underwriting requirements up front, including the below requirements:

- Must be submitted through our electronic application system, AND
- Application package, including vendor completed Part B, must be submitted in good order, AND
- Proposed insured has NONE of the “slow” or ineligible conditions listed on pages 7 and 8

NOTE: Five full business days beginning once fully completed Application Part A and Part B are received in the home office in good order. Agents not already licensed AND appointed or incomplete Application information will delay the process. The timeline begins the day after the case is submitted (e.g. If a qualifying application is received on Monday, an issue/conditional issue decision would be available the following Monday). If information received is incomplete, the 5 day timeline restarts when missing requirements are received as directed.

Faster non-med submission options.

iGO eApp **BUILT FOR SPEED** with VENDOR-completed Part B

- STEP 1** Agent reviews the non-med underwriting qualifications to determine availability
- STEP 2** Agent submits full iGO eApp and selects the Connex Underwriting process for vendor completing Part B medical history via the tele-interview
- STEP 3** Vendor CRL Plus contacts client to complete Part B medical history during a tele-interview
- STEP 4** Client voice signs the medical history at the end of the interview and evaluation begins immediately¹
- STEP 5** Approved/not approved underwriting decision made²

AG Quick Ticket[®] with VENDOR-completed Part B

- STEP 1** Agent reviews non-med underwriting qualifications to determine availability
- STEP 2** Agent submits application electronically using AG Quick Ticket
 - Vendor ExamOne contacts client to complete the tele-interview, which includes the Part B medical history Note: Tele-interview service available in English and Spanish
 - Vendor ExamOne emails client application package, including “Request for Policy Illustration” authorization form, for electronic signatures at the end of the interview²
 - Evaluation begins once everything is received by the home office including declarations of Part A and B, supplementary forms, and result of various database searches³
 - Underwriting decision made
- STEP 3** Agent submits unsigned illustration to home office at the approved rate class for policy issue. Post-issue reviews will be completed by our Underwriting team and any lack of material disclosure may result in policy rescission.

See page 9 for tele-interview tips that can help result in faster processing times.

¹“Request for Policy Illustration” form (AGLC108672) signed by client, serves as authorization for this illustration

Non-med submission options.

Paper application with VENDOR-completed Part B*

STEP 1 Agent reviews non-medical underwriting qualifications to determine availability

STEP 2 Agent submits Part A application and signed illustration*

- New Business representative contacts Agent to confirm any inaccuracies or gather missing information

STEP 3 Agent contacts Client for any missing or incorrect information. Agent then provides info to New Business and if needed, completes updated documentation and re-submits

- Evaluation begins once everything is received by the home office including declarations of Part A and B, supplementary forms, and result of various database searches
- Vendor CRL Plus contacts client to obtain voice signature and complete the tele-interview, which includes the Part B medical history.
- Underwriting decision made

STEP 4 If necessary, Agent submits revised illustration to home office at the approved rate class for policy issue. Post-issue reviews will be completed by our Underwriting team and any lack of material disclosure may result in policy rescission.

See page 9 for tele-interview tips that can help result in faster processing times.

* This non-medical underwriting submission method may experience slower turnaround times than the electronic process.

Slower non-med scenarios.

These conditions may fit non-medical underwriting; however, will cause longer processing turnaround times:

The following scenarios will be available for non-medical underwriting; however, additional requirements will be needed for evaluation:

- Complex beneficiaries
- Replacement policies
- Evidence of undisclosed medical history



Not available for non-med.

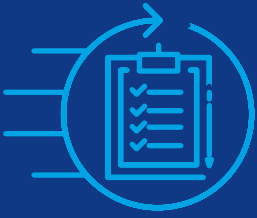
Non-medical underwriting is not available for the following automatic decline or rated risk scenarios.

- Foreign residents—see guidelines (AGLC108891) for specific requirements³
- Morbidly obese
- Insulin-dependent Diabetes
- Any outstanding non-routine medical tests, evaluation of abnormal tests results
- History of a chronic disease or impairment
- History of DUI within the last 5 years
- Felony convictions during the past 10 years
- History of bankruptcy during the past 5 years
- Declined or rated on other American General Life Insurance or United States Life Insurance Company of New York life application
- Previously rated or declined by any US insurer for any reason during the past 5 years
- Immediate family members diagnosed with heart disease prior to age 50, amyotrophic lateral sclerosis (ALS), polycystic kidney disease, porphyria, cardiomyopathy, sickle cell anemia, huntington's disease, aneurysm, or cancer
- Uncontrolled high cholesterol
- Uncontrolled blood pressure or poorly controlled on more than 3 medications
- Heart disease or vascular disorder
- Stroke, transient ischemic attack
- History of cancer, other than basal cell carcinoma or squamous cell skin cancer
- Any pituitary or adrenal disease or disorders
- Anemia, blood or lymphatic disease or disorders (other than iron or B12 deficiency, microcytic or megoblastic)
- Chronic kidney disease or disorders other than kidney stones or acute kidney infections
- Any neurological or neuromuscular disorder
- Eating disorders, suicide attempt, bipolar/manic depression, psychosis, schizophrenia
- Most cases of depression except mild depression
- Rheumatoid or psoriatic arthritis
- Myasthenia Gravis, osteomyelitis
- Excessive alcohol use
- Illicit drug use other than infrequent marijuana
- Military occupations
- Business or charitable
- Foreign travel to most countries when duration of all travel is 57 days or more annually (where foreign travel underwriting allowed by state law)
- This list is not exhaustive. Individual consideration may be necessary.

For additional details see Field Underwriting Guide (AGLC101638) **Auto decline – Do not routinely order an APS** section.

If the proposed insured does not meet the criteria, we will notify you, instruct you on required underwriting evidence to continue, as well as inform you of any additional options available to your client.

See FAQ on page 10-11 for more details.

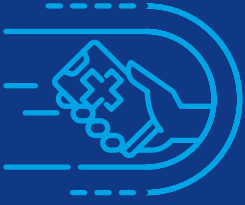


Streamlined submission tips.

- **Use digital submission for the fastest turnaround.** Applications for non-medical underwriting submitted through the iGO eApp platform are often issued within 5 business days when the application is initially received in good order.
- **Leave the Part B to us.** The Part B must be completed through the tele-interview vendor. While Paper Part A applications are accepted, electronic application submissions provide FASTER turnaround times. Submitting an agent-completed Paper Part B will create duplication, and should be avoided.
- **Include all forms that may be needed.** This includes all of the forms in the standard app package such as the HIV Form. Make sure they are fully completed and in good order.
- **Do not schedule the paramedical exam for any case that falls within the product, age or face amount parameters, regardless of rate class.** If an exam or labs are necessary, AIG companies will order them.
- **Let us know in advance if you will want the case to proceed to full underwriting.** Indicating this on the application submission (coversheet, transmittal form, etc.) will save the time needed to contact you to determine next steps if an exam or labs are required.
- **Ensure your client is prepared for the tele-interview and has medical information needed.** Refer to the non-medical product underwriting brochure for tele-interview vendor details and additional preparation tips.

Note: The tele-interview vendor will call the client after receiving and processing the case information. If the client is unable to answer the phone, the interviewer will leave a voice-mail message with instructions and a telephone number for the client to call.

- For cases submitted **by Quick Ticket**, the ExamOne tele-interview phone line is 888-876-3407.
- For cases submitted **by iGO eApp or paper application**, the CRL Plus tele-interview phone line is 877-243-2448.
- **What happens if full underwriting is needed to make an offer?**
 - The “No Exam or Labs Required” requirement in Connex will be canceled with a corresponding new requirement showing “**Non Medical Ineligible - Labs Required.**”
 - The New Business team will first attempt to identify from the application submission for indication to proceed to full underwriting. If this is not provided, we will contact the agency to determine next steps.
 - **If we receive a “Yes” answer to proceed with labs**, the case will become fully underwritten. AIG will order the labs and exam.
 - **If we receive a “No” answer to proceed with labs**, the case will be withdrawn.



Tele-interview prep tips.*

Tele-interview for the medical history can range between 20-45 minutes in duration depending on the level of medical history and level of preparedness for the tele-interview. Having the following information available will help keep the interview as short as possible:

- Driver's license number
- Name, address and phone number of doctors and clinics visited in the past 5 years
- Names and dosages of all prescription and nonprescription medications you take
- List of medical conditions or diagnoses including date of diagnosis, treatment, result of treatment and treating physician information

* Tele-interview is only available in English at this time.



Frequently asked questions. (1 of 2)

Q Can the Part B be completed by the Agent?

A No, the Part B must be Vendor Completed. While Paper Part A applications are acceptable, the Part B will need to be completed by Vendor. Submitting an Agent completed Paper Part B will create duplication, and should be avoided.

Q Will Accelerated Access Solution (AAS) be available on non-medically underwritten Max Accumulator+ II or Value+ Protector II?

A Yes, AAS will be available with any non-medically underwritten Max Accumulator+ II application so long as this rider is currently available in the state in which they are applying.

Q Can you explain the non-medical underwriting process more?

A Non-medical underwriting means that no labs, physical exams, or Para-meds will be initially required from the proposed insured, or considered when underwriting the policy. We will still conduct reviews of the Motor Vehicle Report (MVR); Medical Information Bureau Report (MIB); and Prescription medication history (Rx Report) as required. Classes Standard or better will be available for the non-medically underwritten products.

Your underwriter will make an offer from Standard to Preferred Plus for your client based on the submitted applications, declarations of Part A and B, supplementary forms, and results of various database searches. This is not a blended rate, your client will receive a “fully underwritten” rate through a non-med process. Post-issue reviews will be completed by our Underwriting team and any lack of material disclosure may result in policy rescission.

Q Can applicants choose to go through full underwriting at the time of submission at an age and face amount for a product included in the Non-Med UW program?

A No, only available in cases where the applicant pivots to medical underwriting from Non-Medical Underwriting.

Frequently asked questions. (2 of 2)

Q If Non-Medical Underwriting is available for the applicant, but the resulting underwriting decision is not favorable, can they then opt to go through full underwriting?

A No. See previous question.

Q What happens if my client does not meet the non-medically underwritten guidelines?

A We will communicate the initial decision to remove your client from non-medical consideration. You should immediately consult with your client and advise us whether we should close the case as “incomplete,” or how to proceed with processing. If we are unable to make an underwriting decision based on the Non-Medical Underwriting process, you have the option to move to a fully underwritten process; which could include an in-person paramedical examination with blood and urine samples.

Q Does my client need to complete a new application if they pivot to full underwriting?

A No, a new application form is NOT needed if the proposed insured completes a non-medical application and decides to pivot to full underwriting.

Agent must simply advise us that client wishes to continue consideration with full underwriting requirements.⁴

¹ A wet signature process will be available following the tele-interview.

² Our underwriting team renders a decision based on the submitted applications, declarations of Part A and B, supplementary forms, and result of various database searches. No flat extra ratings available for this non-medical underwriting program. Post-issue reviews will be completed by our Underwriting team and any lack of material disclosure may result in policy rescission.

³ Applicants other than US Citizens or Permanent Residents/Green Card Holders.

⁴ IMPORTANT: An increase in face amount on Max Accumulator+ II or Value+ Protector II will NOT receive a new policy number in this scenario. If a new product is selected however, the case WILL be assigned a new policy number. In either case, for the new policy to be placed in force after receiving underwriting approval, the client will need to sign an amendment form upon delivery, which will reflect the changes made to their initial application.



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