

Exam Substitute Program (ESP) Submission Cover Sheet/Checklist

Cli	ent name:
Cli	ent DOB:
Per	nding Policy number:
	se this checklist to determine if your client qualifies for the ESP xam Substitute Program). All statements must be correct.
0	The applicant is insurance ages 30-60.
0	The total risk amount applied for is \$3,000,001 to \$20,000,000 (including riders).
0	The application is for a new individual whole life policy.
0	The applicant does not have any medical history that may result in a rated offer.
0	The applicant has had a completed physical including vitals and labs (lipid panel and comprehensive metabolic panel) within the past 12 months.
0	If the applicant is insurance ages 50-60, they have completed cardiac testing within the previous 12 months and the results were normal (e.g., resting ECG, stress test, NT-proBNP, CTA, calcium score).
0	If the applicant is seeking coverage \$10,000,001 to \$20,000,000, an executive physical has been performed within the past 12 months.
0	The applicant has not used tobacco in the previous 5 years and medical records and other data sources will support this claim, unless they are applying for tobacco rates.
0	The applicant is not a foreign national or professional athlete.
0	The applicant does not participate in a high-risk avocation or occupation (those requiring flat extras or substandard ratings).
0	The applicant is not applying for Disability Income (DI) coverage.

Name and contact information for the medical provider(s) that have the records of the recent physicals, lab work and where required, executive physicals or cardiac testing.

Provider #1	
Name:	
	-
Provider #2	
Name:	
Phone:	
Notes:	
Please select your preferred Part 2 collection n	nethod:
O Agent completed Non Medical Part 2	
Tele-Client Medical Interview (TCMI)	

ADDITIONAL NOTES:

- Clients may need to submit additional information or requirements at the discretion of underwriting (e.g., paramedical exam, insurance labs).
- When utilizing the ESP program, all other U98/underwriting requirements remain necessary including a Part 2 (Agent-completed non-medical, or Tele-CMI).

