

UNDERWRITING GUIDELINES

Underwriting & Claims Team

Derek Lyon ACII DMU, DLDC (AMS)
Underwriting & Claims Manager

Claire Sorby DMU, DLDC (AMS)
Senior Underwriter

Richard Fayle
Senior Underwriter

Contact Details

T: +44 (0)1624 681592

F: +44 (0)1624 690699

E: underwriting&claims@rl360.com

Chief Medical Officer

Dr J K Daniels

M.B.Ch.B. F.R.C.G.P. D.C.H.

D.R.C.O.G. D.F.S.R.H.

The underwriters review applications and claims with our Chief Medical Officer when required. Our doctor has extensive experience in the relationship between client health and the relevance to insurance requirements. We are further supported by our reassurance partners, Hannover Re UK Life Branch.

Medical underwriting

The medical evidence required for each application is listed on the final page of every illustration. However, we recommend that the completed application is submitted for assessment in advance of the medical taking place. For certain applications, medical evidence may not be necessary. The sum assured for non-medical applications will vary according to country of residence and age of the life assured.

It should be noted that the underwriters may need to request additional medical evidence on non-medical limits applications. This may be due to family history, height and weight ratio, or accumulations of existing cover.

You will note that for larger applications we request that the financial evidence is submitted first. This enables the underwriters to assess whether the sum assured is appropriate. The underwriters will confirm if the financial information is acceptable, and the medical evidence required.

Application form

This is the first source of underwriting information, so it is essential that the application form is completed carefully. All details must be disclosed, and if any doubt exists about whether a fact is relevant or not, it should be disclosed anyway. It is understandable that a client may consider some information private, in these instances they should tick the relevant box on the application form and submit the answers in a sealed envelope marked for the attention of the underwriters.

Please pay particular attention to questions relating to "current doctor" and "family history".

Medical evidence

The amount of medical evidence varies depending on the individual factors applying to each application. The standard tests are listed below:

- Medical Examination Report
- Microscopic and micro chemical urinalysis
- HIV 1+2 test
- Fasting Lipid Profile (Cholesterol, HDL, LDL and Triglycerides)
- Fasting Blood Sugar & HbA1c
- Renal (Kidney) Function Test
- Liver Function Test (ALT, AST, Gamma GT)
- Full Blood Count & ESR
- Bruce Protocol ECG (min heart rate 220 minus age x 85%) with at least 5 minutes of recovery
- Echocardiogram
- Pulmonary Function Test (including FVC, FEV1 & PEFR)
- Hepatitis B and C test
- Prostate Specific Antigen

Appointment of RL360 approved medical examiners

The underwriting department holds a central database of worldwide approved medical examiners.

Our intention is that this list will be reduced over the longer term, so RL360 deals with an elite panel of competent Doctors and Laboratories. Avoiding repeat tests saves everyone time and money.

MINIMUM MEDICAL TEST STANDARDS

Below is a summary of the minimum test requirements by type of test. All are valid for 6 months, apart from the HIV and hepatitis tests which are only valid for 3 months. Note that some tests listed here will not show when a more comprehensive test is requested (e.g. Gamma GT will not show when a Liver Function Test is also requested).

Medical Examination Report

- Clients must be identified and the details of the identification used (passport, ID card etc.) should be written on the report.
- All reports must be signed by the examinee.
- All questions must be answered and any additional information provided where necessary.
- Chest and abdomen measurements must be completed.
- Liquid paper (or Tipp-Ex) must not be used on the form – any corrections should be crossed out and amendments initialled by the examining doctor.
- If the client is known to be hypertensive, please ensure that 3 blood pressure readings are taken at 5 minute intervals.

Microscopic and Micro Chemical Urinalysis

All urinalysis tests must include both microscopic and micro chemical testing.

Urine Macroscopy

- Appearance
- Colour

Urine Microscopy

- Red blood cells
- White blood cells/Leucocytes
- Epithelial cells
- Yeasts
- Casts
- Crystals
- Bacteria
- Others

Urine Chemistry

- Specific gravity
- PH
- Protein
- Glucose
- Ketones
- Urobilinogen
- Bilirubin
- Blood

Please note that females must ensure they are tested at an appropriate time.

HIV 1+2 Testing

- All test results must show that both HIV 1+2 have been tested for.
- All tests must be performed by one of the following methods: Enzyme Linked Immunosorbent Assay (ELISA); Microparticle Enzyme Immuno Assay (MEIA); or Enzyme linked Immunofluorescent Assay (ELFA) method.
- All test results must indicate the type of test kit used to perform the test, and the batch number.
- All test results must confirm the client's name and date of birth.
- All test results must state the date the test was carried out.
- All test results must contain the laboratory stamp and signature of the doctor.
- No rapid tests of any type are acceptable.

Fasting Lipid Profile

The client should not eat and should only drink water for at least 12 hours prior to the test taking place (15 hours is preferable). If the client has not fasted properly this will have an abnormal effect on the test results which may require a repeat test. Knowledge of any short fast should be noted on the results.

A Fasting Lipid Profile must include the following:

- Total cholesterol
- Low density lipoprotein (LDL)
- High density lipoprotein (HDL)
- Triglycerides

Please also request a Glucose Tolerance Test (GTT) where the client discloses a family history of 2 or more family members with diabetes if this is not part of the standard requirements. The amount of glucose used in the test should be noted.

A separate document, Fasting Lipid Profile Information, is available for your client to outline the scope and purpose of the test.

Kidney Function Test

The following must be included:

- Urea
- Electrolytes
- Creatinine
- Uric acid

Liver Function Test

The following must be included:

- Total protein
- Albumin
- Globulin
- Direct bilirubin
- Total bilirubin
- Alkaline phosphatase
- AST/SGOT (aspartate aminotransferase)
- ALT/SGPT (alanine aminotransferase)
- GGT (Gamma Glutamyl Transpeptidase or Gamma GT)

Full Blood Test

The following must be included:

Full Blood Count

- White blood cells
- Red blood cells
- Haemoglobin
- Haematocrit (HCT)
- Mean cell volume (MCV)
- Mean cell haemoglobin concentration (MCHC)
- Platelet count

Differential Count

- Segments
- Lymphocytes
- Monocytes
- Eosinophils

ESR – Erythrocyte Sedimentation Rate

Bruce Protocol ECG

ECGs can only be accepted if they have been carried out to Bruce Protocol Standard. This is a 12 lead resting and effort ECG. The full exercise tracing is required. This must show that the target heart rate (THR) has been obtained. To calculate the target heart rate, use the following formula:

$$(220 - \text{client's age}) \times 85\% = \text{THR}$$

a 50 year old must reach $(220 - 50) \times 85\% = 170 \times 85\% = 145$ beats per minute.

The ECG tracing must include at least 5 minutes of the recovery phase.

The ECG tracing must be signed by the client and the examining doctor.

ECGs carried out by the averaging format are not acceptable unless a full copy of the tracing is also submitted. Other methods such as Masters Staircase are not acceptable, nor are tests conducted when the leads are not attached during exercise.

A separate document, Exercise ECG Information, is available for your client to outline the scope and purpose of the test.

Echocardiogram

This test is required for all clients who are under age 40 at the time of application, instead of an ECG.

An echocardiogram may also be performed on lives assured older than age 40 if they are unable to undertake an ECG.

Pulmonary Function Test

This test must include the following:

- FVC – Forced vital capacity
- FEV1 – Forced expiratory flow in 1 second
- PEFR – Peak expiratory flow rate
- Full flow loop

We often ask for repeat tests where the client has shown poor technique. We do advise doctors of our minimum requirements and it is preferable to have the test repeated immediately.

Full Hepatitis Profile

This test must include the following, although it is more common to only request Hepatitis B and C screening:

- Hepatitis B surface Antigen
- Antibody to Hepatitis B Surface Antigen
- Hepatitis Be Antigen
- Antibody to Hepatitis Be Antigen
- Antibody to Hepatitis B Core Antigen
- IgM Antibody to Hepatitis A Antigen
- Antibody to Hepatitis C Virus Antigen

Questionnaires

A number of questionnaires are available to cover certain ailments your client may suffer from, or that are related to their occupation (for example, Aviation Questionnaire, Oil and Natural Gas Industry Questionnaire) or their recreational activities (for example, Diving Questionnaire, Motor Sport Questionnaire). These are all available as PDFs and can be downloaded from www.rl360adviser.com.

Medical questionnaires are completed either by the client's usual doctor, the doctor treating them for a specific condition, or the client themselves. Each form states who should complete it under the form heading.

Financial underwriting

When underwriting a case we need to be satisfied that the benefits proposed for are reasonable for the type of occupation and stated earnings. We will also consider existing cover with RL360 and other insurers, together with any unearned income if applicable.

Existing conditions

If you have a client with a known medical condition, previous medical history or significant family history we will be happy to conduct preliminary underwriting to ensure that all medical requirements are requested at the same time, whenever possible. Any queries can be directed to the underwriters at the contact details given on page 1.

Important information

For financial advisers only. Not to be distributed to, nor relied on by, retail clients.