

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

FASTER!



**Non-medical underwriting on
Max Accumulator+**



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 no in-person paramedical examination will be required of an applicant 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.



FAST facts

Non-medical underwriting

- Ages 0–50¹
- Face Amounts \$50,000-\$499,999
- No lab tests, physical exam or APS required for proposed insured
- Rate classes available²:
 - All rate classes are available up to Preferred Plus*
- If amount applied for on this application plus any coverage issued within the last 12 months is equal to, or greater than \$500,000, this new application for coverage will not be eligible for non-medical underwriting review. This new application for coverage will be reviewed through full underwriting at the applied-for amount.²

MAX ACCUMULATOR+

FACE AMOUNTS	AGES ¹	UNDERWRITING
\$50,000 - \$499,999	0–50	New Non-Med
	51+	Traditional Medical
\$500,000 and above	0-51+	Traditional Medical

Available Rate Classes:

Preferred Plus Non-Tobacco	
Preferred Non-Tobacco	Preferred Tobacco
Standard Non-Tobacco	Standard Tobacco
Sub-Standard Non-Tobacco (Tables C,D,E)	Sub-Standard Tobacco (Tables C,D,E)

* 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. Substandard classes are only available through Table E. Note that Table A and B are included in the standard rate class. Table C, D, E are included in the Table D rate class.

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

ONLY when the application is initially received in good order, AND processed through our e-App: AG Quick Ticket®

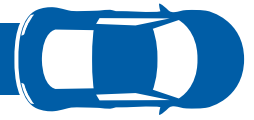
Note: Cases receiving 5-day turn around, must meet all non-medical underwriting requirements up front, including the below requirements:

- Must be submitted through our electronic application system, AND
- Application package, including fully completed Part B, must be submitted in good order, AND
- Proposed insured has NONE of the “slow” or ineligible conditions listed on pages 6 and 7

* 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.

Non-Med submission options

PAPER APPLICATION with AGENT completed Part B*



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

STEP 2 Agent submits Paper Application, including fully completed Part B medical history 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
- Underwriting decision made²

STEP 4 If necessary, Agent submits revised illustration to home office at the approved rate class for policy issue

See pages 8-9 for submission tips that can help result in faster processing times.

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

Non-Med submission options

AG QUICK TICKET® with VENDOR completed Part B



- STEP 1** Agent reviews non-med underwriting qualifications to determine eligibility.
- STEP 2** Agent submits application electronically using AG Quick Ticket
- Vendor contacts client to complete the tele-interview, which includes the Part B medical history Note: Tele-interview service available in English and Spanish
 - Vendor emails client application package, including “Request for Policy Illustration”^{*} authorization form, for electronic signatures at the end of the interview⁴
 - Evaluation begins once everything is received by the home office including declarations of Part A and B, supplementary forms, and result of various database searches⁵
 - Underwriting decision made²
- STEP 3** Agent submits unsigned illustration to home office at the approved rate class for policy issue

See page 10 for submission tips that can help result in faster processing times.

^{*}“Request for Policy Illustration” form (AGLC108672) signed by client, serves as authorization for this illustration

Slower Non-Med scenarios

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

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

- Military occupations
- Business or charitable
- Non-familial owners or complex beneficiaries
- Replacement policies
- Foreign travel to most countries when duration of all travel is 57 days or more annually (where foreign travel underwriting allowed by state law)
- Evidence of undisclosed medical history



Not eligible for Non-Med

Foreign Nationals, declines and highly rated risks are not eligible for non-medical underwriting

Any automatic decline or highly rated risk is not eligible for non-medical underwriting consideration.

- Foreign nationals—see guidelines (AGLC108891) for specific requirements⁶
- Morbidly obese
- Insulin-dependent Diabetes
- Any outstanding 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 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 marijuana
- This list is not exhaustive. Individual consideration may be necessary. For additional details see Field Underwriting Guide (AGLC101638) Automatic Declines section.

Non-medical underwriting is now the only option for underwriting a case for an individual ages 0–50¹ with a face amount of \$50,000 - \$499,999 for Max Accumulator+.

If the proposed insured does not meet the criteria, or wants to undergo full underwriting, they can either increase the face amount to \$500,000+ and re-apply, or apply for a different product. (See FAQ on page 11 for more details)

Paper Application Part B Form

Completion Tips

Here is some information and guidance for completing the application part B for non-medical underwriting. Be sure to ask all the questions on Part B and correctly record all of the client's answers. The more details provided, the more likely it is we will be able to process your client's application successfully.

QUESTION 1

Physician information, date and reason for visit

Complete Physician Information

- If no personal doctor state "no personal doctor and no other doctors seen in last 10 years."

Provide date of last office visit, reason, findings and treatment

- Provide date and reason for last visit. Clearly explain with as much detail as possible, the reason seen. Tell us why the client went to see the doctor, what they found, how was it resolved, and any medications or treatment given. If the problem has since resolved, state so. Avoid unclear, incomplete, or vague responses. See examples below.
 - Best example: "Saw doctor for a routine female physical 6 months ago, normal findings. No medications or follow up needed."
 - Acceptable example: "Saw doctor for a routine physical April 2018 – Normal."
 - Bad example: "Don't know date of last visit, maybe 3 years ago"; no additional details or explanation given.
 - Worst example: _____ Question is left blank or unanswered

QUESTION 2

Pending medical appointments

Be clear as to why the client has a pending medical appointment. Remember, it is OK and common to have a pending medical appointment, for example, it's very common with women who see doctors frequently for well woman care.

- Worst example: answer this question "Yes" without sharing why there is a pending medical appointment

QUESTION 3

Build

3A. Accurately record your client's answer to the height and weight question. Most people know their height and weight; record their answers as given.

3C. Note any recent weight loss and explain reason. Diets and exercise regimens to lose weight are common. Tell us if the reason your client lost 50 pounds was due to diet and exercise. If you don't give us a reason for weight loss it is going to create doubt and may lead a perfectly good case to be rejected.

- **Take careful consideration for recording weight changes associated with pregnancy.** Most women gain weight during pregnancy but then lose most or all of that weight shortly after giving birth. Accurately record your client's pre-pregnancy weight and subsequent weight gain and loss due to pregnancy.

QUESTION 4

Family history

Carefully fill in the family history information in the grid provided.

- Enter their current age if living, age at death, cause of death, and if they had any history of coronary artery disease, or cancer history. Record age of disease onset for CAD or cancer history if present.
- **4B - give special attention to the question** that asks are any familial diseases present in immediate relatives. Be clear who has/had disease, which disease they had, and age of onset.

Paper Application Part B Form

Completion Tips, continued

QUESTION 5 Personal health history

Beginning with question 5 we ask several detailed questions about specific impairments your client may have been diagnosed with, suffered from, or treated for in the past. Since these questions reference multiple diseases or impairments in each sub-question, it is absolutely essential you clearly identify which specific disease, condition, or impairment your client is answering “Yes” to in that particular question. Use the details section at the end of each question to identify which condition or disease caused your client to answer “Yes” to that question. Provide date of diagnosis, treatment, medications taken, any surgeries, or any other pertinent information.

- **Question 5A: Personal history of cholesterol elevation, high blood pressure, or diabetes.** Enter last cholesterol level (if known), last blood pressure reading (if known), and last glycohemoglobin A1c (if known). Tell us how your client is being treated for these conditions if they are present. This information is critical in ensuring we are able to make the best offer possible to your client.
- **Question 5B: Common diseases and impairments are covered in this question.** Identify which condition or disease led the client to answer the questions “Yes”, date of diagnosis, treatment, medications, surgeries, tests performed, and any other pertinent details.
- **Question 5C: any other treatment or medication question.** Ask for names of any and all prescription medications your client is taking or has taken during the past 12 months and the reason for taking them. Instruct your client that the company will conduct a prescription database search and any discrepancies may cause delays or lead to the life insurance being denied.
- **Question 5D: alcohol use question.** Encourage your client to honestly disclose his or her alcohol use.
- **Question 5E: Drug and alcohol abuse question.** Complete all multi-part questions and sub questions. Provide details on any past treatment, attendance at substance abuse groups. Clearly identify which drugs may have been abused. Pay special attention to the frequency of use question and provide as much detail as requested.
- **Question 5F is the HIV question.** Provide all details if this question is answered “Yes”.
- **Question 5G is the hospitalization question.** If any of questions 1–4 are answered “yes”, provide as much explicit detail as possible in the Details section. Provide details about any hospitalization. Women will typically have to answer “Yes” to this question if they’ve been hospitalized for childbirth. Please answer all remaining questions on the exam with as much detail as possible. The remaining questions deal with use of assistive devices such as a cane, walker, or if the client requires assistance with activities of daily living such as bathing, dressing, etc.



Before you complete Part B, **double check to make sure ALL questions have been answered**

AG Quick Ticket®

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
- Names, addresses and phone numbers 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



Frequently Asked Questions

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

A Yes, AAS will be available with any non-medically underwritten Max Accumulator+ 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, APSs, or Para-meds will be 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 table E or better will qualify for the non-medically underwritten products.

Your underwriter will make an offer from Preferred Plus to table E 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.

Q How is non-medical different from simplified underwriting?

A Unlike American General Life Insurance’s simplified underwriting process, a case that does not meet the non-med criteria will NOT automatically be diverted to full medical underwriting or to an underwriter for further evaluation.

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

A Non-medical underwriting is now the ONLY option for underwriting a case for an individual ages 0–50¹ with a face amount of \$50,000 - \$499,999 for Max Accumulator+.

If the proposed insured does not meet the criteria, or wants to undergo full underwriting, they can either increase the face amount to \$500,000+ and re-apply, or apply for a different product.

Q Does my client need to complete a new application to re-apply if they are not eligible for non-medical underwriting and wish to apply for a different product, or if they wish to increase their face amount of Max Accumulator+ in order to undergo full underwriting?

A No, a new application form is NOT needed if the proposed insured completes a non-medical application and decides and/or must apply for another product, or higher face amount of Max Accumulator+. The agent should simply contact a New Business Representative on their Client’s behalf, and communicate the desired changes. A New Business Representative will amend the application accordingly.⁷



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Simplify complex IUL conversations with easy-to-understand charts and scenarios in this consumer approved sales tool.

Learn more at aig.com/LifetotheMax

¹ Ages 18–50 in the state of New York.

² No flat extra ratings available for this non-medical underwriting program. 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.

³ Face amount is based on the total amount of coverage issued and placed in-force by AGL within the past 12 months.

⁴ A wet signature process will be available following the tele-interview if the client is unable to sign via DocuSign.

⁵ 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.

⁶ Applicants other than US Citizens or Permanent Residents/Green Card Holders.

⁷ IMPORTANT: An increase in face amount on Max Accumulator+ 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 inforce 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.



Policies issued by: American General Life Insurance Company (AGL), Policy Form Numbers: 15646, ICC15-15646; Rider Form Numbers: 13600-5, 15600-7, 15600, ICC15-15600, 15600-5, 13601, ICC13-13601, 82012, 82410, 88390, 14002, ICC14-14002, 14306, 07620, 15997, 15996, 15271, ICC15-15271, 15274, ICC15-15274, 15272, ICC15-15272, 15273, ICC15-15273, except in New York, where issued by The United States Life Insurance Company in the City of New York (US Life), Policy Form Number: 15646N; Rider Form Numbers: 17600N, 13601N, 14012N, 16420N, 14002N, 07620N, 15996N, 15274N, 15272N. Issuing companies AGL and US Life are responsible for financial obligations of insurance products and are members of American International Group, Inc. (AIG). Products may not be available in all states and product features including rates may vary by state. All guarantees and benefits of the insurance policy are backed by the claims-paying ability of the issuing insurance company. AIG is the marketing name for the worldwide property-casualty, life and retirement, and general insurance operations of American International Group, Inc. For additional information, please visit our website at HYPERLINK "http://www.aig.com" www.aig.com. All products and services are written or provided by subsidiaries or affiliates of American International Group, Inc. Products or services may not be available in all countries, and coverage is subject to actual policy language. This information is general in nature, may be subject to change, and does not constitute legal, tax or accounting advice from any company, its employees, financial professionals or other representatives. Applicable laws and regulations are complex and subject to change. Any tax statements in this material are not intended to suggest the avoidance of U.S. federal, state or local tax penalties. For advice concerning your individual circumstances, consult a professional attorney, tax advisor or accountant.

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