Phoenix Remembrance Life®



Quick Reference Guide



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Product Overview

A simplified-issue whole life insurance policy with living benefits and legacy customization options.

Life Insurance Coverage

- Lump-sum Death Benefit
- Coverage extends for the insured's lifetime, beyond age 121

Included Riders

- Accelerated Benefit Riders option to accelerate a portion of the death benefit in the event of a serious illness:
 - Critical Illness
 - Terminal Illness
- Accidental Death Benefit Rider

Customization Options¹

 Optional monthly income stream death benefit for a spouse or loved one up to age 85 or a minimum of 5 years provided by Additional Income Coverage Rider (AICR)¹

Total coverage amount may be allocated in one of four ways:

- 100% Lump-sum Death Benefit / 0% AICR
- 75% Lump-sum Death Benefit / 25% AICR
- 50% Lump-sum Death Benefit / 50% AICR
- 25% Lump-sum Death Benefit / 75% AICR
- Four additional rider options available for legacy and supplemental income benefits (see pg 4)

Simplified Underwriting

• Non-Tobacco (Preferred) / Tobacco (Standard) risk classes

Premiums

- Payment Mode Options:
 - Monthly bank draft
 - Quarterly billing
 - Semi-annual billing
 - Annual billing
- Minimum premium: \$360/year (including all riders)
- Optional rider premium ends upon rider termination
- Policy fee: \$48/year included in base policy premium (commissionable in year one)

Issue Ages & Total Coverage Amounts

 Total Coverage Amount = Lump-sum Death Benefit + AICR Benefit Amount (if elected)

| Insured's Age | Rider Beneficiary's Age | Total Coverage Amount |
|---------------|----------------------------|-----------------------|
| 30-59 | 30-80 | \$10,000-\$100,000 |
| 60-69 | 30-80 | \$10,000-\$75,000 |
| 70-80 | 30-80 | \$10,000-\$50,000 |

- Based on age last birthday
- Lump-sum death benefit beneficiary may be changed after issue
- Rider Beneficiary for AICR and optional riders may not be changed after issue

Product features, rider options and availability may vary by state.

For the AICR and other optional riders, the named Rider Beneficiary must be alive to receive benefit payments.

Payment guarantees are based on the claims-paying ability of the issuing company.

1. Optional riders involve additional premium.

Once the policy and rider(s) are issued, the Rider Beneficiary(ies) may not be changed under any circumstances. Rider benefits are only available upon the death of the insured and will cease at the earlier of the death of the Rider Beneficiary or the term stated in each rider. Rider premiums cease at the earlier of death of the insured or when the rider terminates for any reason. For example, if the rider provides payments until the Rider Beneficiary is age 65 and the Rider Beneficiary dies at age 63, no further payments are made. If optional riders are elected, provide your client the Rider Information Document, which includes examples and valuable information about how the AICR and other optional benefits work. If the AICR or optional riders are elected, an acknowledgement form confirming receipt of this document must be signed by the owner and submitted with the application.

Critical Illness and Terminal Illness

These accelerated benefit riders, included at no additional premium, offer the option to advance up to 95% of the death benefit in the event of a serious illness

- Death benefit is reduced by the accelerated benefit amount, however, the actual amount received is discounted based on the insured's condition and life expectancy, as well as a partial repayment of any loans
- Future premiums are reduced based on the remaining death benefit and must continue to be paid to keep death benefit in force
- Any policy loans and cash value will also be reduced based on the remaining death benefit
- An administrative charge of \$200 per election applies
- Benefit election is optional
- Benefits may be used for any purpose
- Minimum acceleration amount is \$1,000
- Diagnosis must be certified in writing by a licensed physician
- A portion of the benefit may be taxable. Clients should consult a tax advisor before deciding to exercise the rider.

Critical Illness Rider – Available upon diagnosis of a specified critical illness: heart attack, stroke, cancer, kidney failure, major organ transplant, ALS

• Multiple benefit elections available; must wait 180 days between elections

Terminal Illness Rider – Available upon diagnosis as terminally ill with a life expectancy of 12 months or less

Accidental Death Benefit Rider

- Pays an additional lump-sum amount upon Insured's death equal to 100% of the lumpsum death benefit if such death occurs by covered accident
- Insured must be under 65 at issue
- Terminates at Insured's age 75

More Information

Policy Loans

Clients may borrow up to 100% of their policy's cash value, typically tax-free. Loans reduce the cash value and are subtracted from the death benefit upon payment. Loan interest rates vary by state. No loans are possible from any riders.

Free Look

Each policy includes a Free Look period during which the policy can be reviewed and returned for a full refund, less any outstanding loans. Free look periods vary by state.

Tax Information

The policy's death benefit is generally not taxable; however, a portion of payments made under policy riders is taxable to the Rider Beneficiary as ordinary income. The taxable amount will depend on the benefit amount and the Beneficiary's age. Clients should consult a tax professional for more information on individual situations.

Customization Options

Four optional riders are available in addition to the AICR for clients to customize their policy for their needs. Each rider has an additional premium that is commissionable.

Continuing Family Traditions

Legacy Rider – Helps continue birthday traditions between the Insured and children or grandchildren.

- Provides annual birthday gift monies to the Rider Beneficiary.
- Payments begin upon the Rider Beneficiary's birthday following the Insured's death and continuing until the earlier of Rider Beneficiary's 22nd birthday or death.
- Up to 5 Legacy Riders may be elected.

Education Benefit Rider – Helps pay higher education expenses for children or grandchildren following the death of the Insured.

- Provides up to 4 annual installment payments beginning between the Rider Beneficiary's 18th and 22nd birthdays.
- To receive payments, Rider Beneficiary must exercise the rider between his/her 18th and 22nd birthdays and provide annual written verification of attendance at a federal financial aideligible college or university.
- Full-time active-duty enlistment in a branch of the United States Military may also meet the attendance requirement.
- Payments cease upon the Rider Beneficiary's failure to provide annual verification or death, or after the 4 annual payments have been made.
- Up to 5 Education Benefit Riders may be elected.

Product features, rider options and availability may vary by state.

The named Rider Beneficiary must be alive to receive benefit payments.

Income Protection

Lifetime Income Rider – Designed to provide Rider Beneficiary with reliable lifetime income after the death of the Insured.

• Monthly payments begin upon the Insured's death and continue until the Rider Beneficiary's death.

Income Term Rider – Designed for younger age clients in their working years; helps replace employment income lost due to the death of the Insured.

- Provides a monthly income stream to the Rider Beneficiary to age 65.
- Monthly payments begin upon the Insured's death and continue until the earlier of Rider Beneficiary's 65th birthday or death.

Issue Ages and Coverage Amounts

| Insured's Age | Rider Beneficiary's Age | Coverage Amount |
|-------------------------|-------------------------|------------------------|
| Legacy Rider | | |
| 30-80 | O-15 | \$50-\$500 annually |
| Education Benefit Rider | | |
| 30-80 | O-15 | \$500-\$5,000 annually |
| Lifetime Income Rider | | |
| 30-59 | 30-80 | \$50-\$1,000 monthly |
| 60-69 | 30-80 | \$50-\$500 monthly |
| 70-80 | 30-80 | \$50-\$400 monthly |
| Income Term Rider | | |
| 30-59 | 30-60 | \$50-\$1,000 monthly |
| 60-69 | 30-60 | \$50-\$500 monthly |

Once the policy and rider(s) are issued, the Rider Beneficiary(ies) may not be changed under any circumstances. Rider benefits are only available upon the death of the insured and will cease at the earlier of the death of the Rider Beneficiary or the term stated in each rider. Rider premiums cease at the earlier of death of the insured or when the rider terminates for any reason. For example, if the rider provides payments until the Rider Beneficiary is age 65 and the Rider Beneficiary dies at age 63, no further payments are made. If optional riders are elected, provide your client the Rider Information Document, which includes examples and valuable information about how the AICR and other optional benefits work. If the AICR or optional riders are elected, an acknowledgement form confirming receipt of this document must be signed by the owner and submitted with the application.

Quotes

Generate personalized examples online using Phoenix's dynamic quoting tool. Be sure your client has ages for each of their Rider Beneficiaries, as this information will be needed for the quote.

| 1 | To launch the quote tool, go to <u>www.phoenixsalesnet.com</u> , log in and select Quotes from the Quick Links menu on the right side of the screen. |
|---|--|
| 2 | Select Phoenix Remembrance Life. |
| 3 | Complete the open fields at the top of your screen. |
| 4 | Select the desired coverage allocation for the Policy Death Benefit and Additional Income Coverage Rider (AICR), and input the AICR Beneficiary's information if elected. |
| 5 | Use the radio buttons to solve based on a given benefit or premium. Enter the desired benefit or premium amount, press Tab to move to the next field and the corresponding value(s) will display. Use the radio buttons to solve for benefit or premium to adjust the quote as needed. |
| 6 | To add optional riders to the policy quote, simply check the box next to the Rider Name and provide information about the Rider Beneficiary(ies). Then, depending on your chosen solve method, input either the desired benefit or premium amount to generate the corresponding values. |
| 7 | Select Print Output to generate a personalized example for your client, including coverage and premium detail as well as a summary of potential benefits. |

| Agent Na | ime Any User | Client Name Val | ued Client | Insure | d Age 65 | In | sured Gender |
|---------------|---|-----------------|--|--------|-------------------------|-----|---------------------------------------|
| State | Colorado + | Premium Mode | Monthly Quarterly Annual Semi-Annual | | d Risk Class | | Tobacco (Preferred) cco (Standard) |
| | 5 Input Benefit Amount | | | | | | |
| | | | | otals | Benefit Amo | unt | Premium Amount \$46.75/M |
| 1th | Total Coverage Amount Policy Death Benefit AICR Benefit Beneficiary Name | Age: | Benefit Allocation | | \$10, \$5,(\$5,0 | 000 | \$46.75/M |
| <u>\$\$\$</u> | Optional Riders | | | | | ī | |
| 1 | Income Term Rider Legacy Rider | # of Beneficia | aries N/A ÷ | | | | |
| T | Education Benefit Rider | # of Beneficia | aries N/A ÷ | | | | |

Mobile Quotes

Phoenix Remembrance Life's mobile quote tool (at right) will provide monthly and annual premium amounts for 100% lump-sum death benefit policies. Simply complete a few simple fields and click calculate. Mobile quotes do not calculate premiums for the additional income coverage rider or other optional riders.

Mobile Quoting URL

https://phx.insurancetechnologiespos.com/ mobile/Main/WholeLife.aspx



Completing the Application

Log in to PhoenixSalesNet.com to download state-specific applications and forms. Contracted agents may also access eApp or order printed forms from the online Marketing Catalog.

Two Easy Ways to Apply

1 eApp

Complete our convenient online application on your tablet or computer. Intelligent data entry, error indicators and two options for e-Signature make eApp a breeze!

How it works:

- eApp will generate the proper forms based on the state of issue, product and information inputted on the application
- Complete the Application Parts 1 and 2, and other required forms
- Use a touchscreen or mouse to sign in the meeting or send an email to request your client's signature
- After signatures are completed, submit the application

Helpful Tips for eApp

- Make sure you and your client have a valid email address
- eApp is for use on individually-owned policies only. Company- or partnershipowned policy applications must be completed on paper.
- Clients will need a driver's license or other valid form of identification for the e-signature process.
- Phoenix will review the application and communicate the underwriting decision to you. In certain cases, Phoenix may call the agent to clarify an answer on the application

2 PAPER

For an all-paper submission, complete the full application and required forms and submit.

How it works:

- Complete and sign the Application Part 1, Application Part 2, required forms and HIPAA authorization and submit them to Phoenix
- Phoenix will review the application and communicate the underwriting decision to you
- In certain cases, Phoenix may call the agent to clarify an answer on the application

Helpful Tips for Paper Applications

- Any changes or corrections on the application must be initialed by the owner. Errors covered with correction fluid will <u>not</u> be accepted.
- All necessary signatures must be on the application at the time of submission or the application will be returned.
- HIPAA forms must be fully completed including date of birth and insured's signature.

Requirements for Application & Payment

Depending on state law, an agent may be required to be contracted with Phoenix before taking an application.

Insurable Interest

Policy owners and beneficiaries must have an insurable interest in the life of the insured:

- Financial loss in the event of the insured's untimely death
- A close relationship to the insured (e.g. spouse, domestic partner, dependent).

Insured Consent

ALL applications must have the consent and signature of the Proposed Insured.

Replacement

We will permit replacements as long as the replacement is in the best interest of the client and the appropriate state replacement forms are submitted with the application. However, Section 1035 Exchanges are not permitted.

Phoenix does not condone the systematic or deliberate replacement of existing life insurance as a marketing practice. Please refer to our Company Position on Replacements (G5081B) for more information on prohibited sales practices.

Backdating

Backdating will be allowed in cases where the Insured's age or a Rider Beneficiary's age changes between the application signature date and the date of policy issue.

Payment

Personal checks from the client made payable to Phoenix or monthly Electronic Funds Transfer (EFT) from a checking account will be accepted for premiums. No agent or agency checks, CODs or money orders will be accepted for premium payment.

Application Submission & Policy Issue

How To Submit An Application

Up to 10 new applications at a time may be submitted **via fax to 1-816-527-0053** <u>or</u> **via email to pnx.newbusiness@phoenixwm.com.**

For faxes, identify the number of pages including the cover sheet. A copy of the premium check should be included with each application (if initial payment is not a bank draft). Mail initial premium checks to:

Phoenix Life Insurance Company P.O. Box 8027 Boston, MA 02266-8027

Application Processing and Policy Issue

Application materials will be reviewed and processed promptly upon receipt. The agent will be notified via email of the policy number and any outstanding questions. Once the application is "In Good Order," the policy will be issued and mailed to the agent or owner.

Pending case information can be found by logging in to www.phoenixsalesnet.com, and clicking on My Business Reports. Data is current as of the close of business on the prior day.

Policy Delivery

On the application, the agent has the option of electing the policy delivery method:

- The policy is mailed directly to the owner, or
- The policy is mailed to the agent. If this method is selected, a Policy Acceptance form must be signed by the insured and owner (if other then insured) and returned to Phoenix within 30 days.

In certain instances, the Policy must be mailed to the agent and a signed Policy Acceptance form must be signed by the client and returned to Phoenix within 30 days, including:

- When amendments are made to the policy prior to issue
- The policy is issued in a no-voice-signature state

Important Dates

Application Date – Applications must be dated the day the application is completed.

Application Receipt – Applications must be received at Phoenix's processing location within 10 days of the application date.

Policy Effective Date – The policy will be placed in force on the policy issue date. If a signed Policy Acceptance Form is required, the policy effective date will be the date it is received by Phoenix.

Specific Draft Dates – Initial premium will be drafted upon policy issue. Requests for a specific date for monthly bank draft must be requested on the application.

Field Underwriting

Phoenix Remembrance Life is underwritten on a simplified issue basis. There are no medical examinations, tests or fluid collection. This product is designed to accept risks up to 6 tables or 250% mortality. Clients over 6 tables or 250% mortality will be declined. Underwriting is based on your client's answers on the application.

Part 1 of the application is completed with your client. This form includes a series of screening questions. If your client answers "yes" to any of these questions, coverage will not be available.

Part 2 of the application contains underwriting questions used to determine if your client is eligible for coverage. This step can be completed in one of three ways (see page 8 for details).

Please impress upon your client the need to ensure that their answers on the application and during the teleinterview, if applicable, are true and complete. **Application answers will be validated against data received from third-party sources relative to identity, driving record, prescription and insurance history (MIB)**. Coverage may not be available if application or teleinterview responses conflict with data we receive from these sources.

Screening Questions

If the client answers "yes" to any of the questions in Section 3 of application Part 1, no coverage will be available.

Risk Classes

This product has 2 risk classes: Non-Tobacco (Preferred) and Tobacco (Standard). Each of these classes is designed to absorb risks up to table 6 (250%). Clients with mortality assessments over table 6 will be declined.

Tobacco Definition

Use of tobacco or nicotine products, including e-cigarettes, in the past 12 months with the exception of occasional cigar or pipe use (less than 6 times a year).

Underwriting Based On Underlying Cause

Phoenix's practice is to underwrite based on the underlying cause of an impairment. For example, if a proposed insured experiences shortness of breath as a result of Chronic Obstructive Pulmonary Disease (COPD), the underwriting determination will follow the rules for COPD. In the Field Underwriting Guide, such impairments include a notation, "Rate for Cause." In such cases, Phoenix will seek to understand the cause of the condition in order to make an underwriting assessment on the case.

Height & Weight Chart

This chart is designed to provide the maximum height/weight combinations for this product. The limits shown reflect the acceptable build range for this product, which is a maximum table rating of Table 6 (250% mortality). If your client is near the high end of these limits and has other medical history, they may not qualify for coverage.

| Height | Weight (lbs) | | Height | Weight (lbs) | |
|--------|--------------|---------|--------|--------------|---------|
| (in) | Minimum | Maximum | (in) | Minimum | Maximum |
| 4' 8'' | < 74 | 212 | 5′ 8″ | 112 | 304 |
| 4' 9" | 79 | 219 | 5′ 9″ | 115 | 312 |
| 4' 10" | 81 | 226 | 5′ 10″ | 118 | 320 |
| 4′ 11″ | 84 | 233 | 5′ 11″ | 122 | 328 |
| 5' 0" | 87 | 240 | 6' 0" | 125 | 337 |
| 5′ 1″ | 90 | 248 | 6′ 1″ | 129 | 346 |
| 5′ 2″ | 93 | 256 | 6' 2" | 132 | 355 |
| 5′ 3″ | 96 | 264 | 6' 3" | 136 | 364 |
| 5′ 4″ | 99 | 272 | 6' 4" | 140 | 374 |
| 5′ 5″ | 102 | 280 | 6′ 5″ | 143 | 384 |
| 5′ 6″ | 105 | 288 | 6' 6" | 147 | 394 |
| 5′ 7″ | 109 | 296 | 6′ 7″ | 151 | 409 |

Guide to Impairments

| Addison's Disease | Accept | | |
|------------------------------------|---|--|--|
| ADHD/ADD | Accept | | |
| ADLs (requires assistance) | Decline | | |
| AIDS/HIV +ve | Decline | | |
| Alcohol Abuse (current) | Decline | | |
| Alcohol Abuse (history) | Less than 5 years from end of use/ treatment, Decline After 5 years, Accept | | |
| Alzheimer's Disease | Decline | | |
| Amputation | Caused by injury, Accept Due to disease within 1 year, Decline Otherwise, Decline | | |
| Amyotophic lateral sclerosis (ALS) | Decline | | |
| Anemia, Iron Deficiency | Accept | | |
| Aneurysm | Decline | | |
| Angina Pectoris | Decline | | |
| Ankylosing Spondylitis | Accept | | |
| Anorexia Nervosa | Fully recovered, normal build, no treatment in last 2 years, Accept Otherwise, Decline | | |
| Anxiety Disorders | Accept If taking 3+ medications or has been hospitalized for this condition within the past 2 years, Decline | | |
| Aortic Aneurysm | Decline | | |
| Aortic Murmurs/Insufficiency | Decline | | |
| Aplastic Anemia | Decline | | |
| Asthma | Accept Hospitalization for 10+ days within the past year, Decline | | |
| Atrial Fibrillation | Accept, if diagnosed over 2 years ago and current age 50 or older Otherwise, Decline | | |

| Autism | Highly functioning and living independently. Accept |
|---|---|
| | Otherwise, Decline |
| Barlow's Syndrome/mitral valve prolapse | Accept |
| Barrett's esophagus | No history of dysplasia, Accept Otherwise, Decline |
| Basal Cell Carcinoma | Accept |
| Benign Prostatic Hypertrophy | Accept |
| Berger's Disease (IgA Nephropathy) | Decline |
| Bipolar Disorder | Accept If taking 3+ medications or hospitalization in past 2 years, Decline |
| Breast Cancer | Diagnosis and end of treatment over 5 years ago, Accept Otherwise, Decline |
| Bronchiectasis | Decline |
| Bronchitis | Accept |
| Bundle Branch Block LBBB | Decline |
| Bundle Branch Block RBBB | Accept |
| CABG/Bypass Surgery | Decline |
| Cancer | Diagnosis and end of treatment over 5 years ago, Accept Otherwise, Decline |
| Cardiac Pacemaker (Artificial) | Decline |
| Cardiomyopathy | Decline |
| Carotid Disease | Possible Accept |
| Cerebral Palsy | Decline |
| Cerebrovascular Accident | Decline |
| Chest Pain (cardiac) | Decline |

Guide to Impairments

| Chronic Obstructive Pulmonary | Accept | Huntington's Chorea | Decline | |
|------------------------------------|---|---|---|--|
| Disease (COPD) | Possible reasons for Decline includes | Hyperlipidemia | Accept | |
| | current tobacco use, or use within the past 12 months; current oxygen | Hypertension | Accept | |
| | treatment; or chronic oral steroids | Hyperthyroidism | Accept | |
| <u></u> | required | Hypothyroidism | Accept | |
| Cirrhosis | Decline | Hysterectomy (benign) | Accept | |
| Cocaine | Less than 5 years from end of use/ treatment, Decline After 5 years, Accept | Inflammatory Bowel Disease (see Crohn's or Ulcerative Colitis) | See Crohn's Disease | |
| Colon Polyps | If removed, no cancer, Accept Otherwise, Decline | Irritable Bowel Syndrome (spastic colitis) | Accept | |
| Congestive Heart Failure (Chronic) | Decline | Juvenile Rheumatoid Arthritis (see Rheumatoid Arthritis) | Accept | |
| Connective Tissue Disease | Usually Decline | | If treated with Enbrel, Remicade, Humira, Decline | |
| Coronary Artery Disease | Decline | Kidney Disease | Decline | |
| Crohn's Disease | Mild-Moderate, Accept | Kidney Stones | Accept | |
| | Hospitalization or complications within the past year, Decline | Kidney Transplant (see Renal Transplant) | Decline | |
| Cystic Fibrosis | Decline | Leukemia | Decline | |
| Dementia | Decline | Liver Disease | Decline | |
| Depression | Accept | Liver Transplant | Decline | |
| | If taking 3+ medications or has been hospitalized for this condition within the | Lung Transplant | Decline | |
| | past 2 years, Decline | Lupus (Discoid) | Accept | |
| Diabetes | Type 1 or 2, Possible Accept | Lupus (Systemic) Erythematosus | Decline | |
| <u></u> | Under age 30, Decline | Lymphoma | Diagnosis and end of treatment over 5 years ago, Accept | |
| Dialysis | Decline | | Otherwise, Decline | |
| Diverticulitis/Diverticulosis | Accept | | Non-Hodgkins, Decline | |
| Down's Syndrome | Decline | Marfan's Syndrome | Decline | |
| Drug Addiction | Less than 5 years from end of use/ treatment. Decline | Marijuana | Accept; Possible Tobacco rates | |
| | After 5 years, Accept | Melanoma | Diagnosis and end of treatment over 5 | |
| Emphysema | See COPD | | years ago, Accept | |
| Epilepsy | Unless diagnosed within past year or hospitalized within past 2 years, Accept Severe, Decline | Meningitis | Otherwise, Decline Diagnosed >1 year ago and no current treatment, Accept | |
| Fibromyalgia | Accept | | Otherwise, Decline | |
| Gastric Bypass | Surgery >6 months ago without complications, Usually Accept (rate for build) | Mental Retardation | Highly functioning and living independently, Accept Otherwise, Decline | |
| Gestational Diabetes | Fully recovered, no treatment, Accept | Migraines/Headaches | Accept | |
| Glomerulonephritis (Chronic) | Decline | Mitral Insufficiency | Decline | |
| Goiter/Graves Disease | Accept | Mitral Stenosis | Decline | |
| Gout | Accept | Mitral Valve Prolapse | Accept | |
| Heart Attack (See Myocardial | Decline | Mononucleosis | Accept | |
| Infarction) | Dealine | Multiple Myeloma | Decline | |
| Heart Disease | Decline | Multiple Sclerosis (MS) | Under Age 45, Decline Age 45 and up, Possible Accept | |
| Heart Failure (Chronic) | Decline Decline | Murmur (heart) | Accept | |
| Heart Transplant | | Muscular Dystrophy (MD) | Decline | |
| Hemophilia Hepatitis A (Acute) | Decline | Myocardial Infarction | Decline | |
| nepatitis A (Acute) | Fully recovered, Accept Otherwise, Decline | Narcolepsy | Mild-Moderate, Accept | |
| Hepatitis B (Chronic) | Decline | Пансонсрау | Severe, Decline | |
| Hepatitis C | Decline | Narcotic and/or Opiate Use | Doctor-prescribed: 3+ in past year, | |
| High Blood Pressure | Accept | | Decline | |
| Hodgkins Disease | Diagnosis and end of treatment over 5 years ago, Accept Otherwise, Decline | | Otherwise, Accept Not doctor-prescribed within past 5 years, Decline | |

Guide to Impairments (continued)

| Nervous Disorder | See Anxiety Disorder | Pulmonary Fibrosis | Decline |
|-----------------------------|---|---------------------------------------|---|
| Osteoarthritis | Accept | Pulmonary Hypertension | Decline |
| Osteoporosis | Under Age 45, Decline | Pyelonephritis | Decline |
| | Age 45 and up, Accept | Quadriplegia | Decline |
| | 2+ bone fractures and/or falls, Decline | Renal Failure | Decline |
| Pacemaker (Artificial) | Decline | Renal Transplant | Decline |
| Palpitations | Accept | Rheumatic Fever | Current treatment. Decline |
| Pancreatitis | Single episode, fully recovered, no | | Otherwise, Accept |
| | evidence of alcohol abuse, Accept Otherwise, Decline | Rheumatoid Arthritis | Accept |
| Paraplegia | Decline | | If treated with Enbrel, Remicade, Humira, Decline |
| Parkinson's Disease | Decline | Sarcoidosis | Mild (stage 0 - stage 1, asymptomatic), |
| Pericarditis | Single episode, fully recovered, Accept Otherwise, Decline | | Accept Moderate- Severe, Decline |
| Peripheral Vascular Disease | Accept | Schizophrenia | Decline |
| | If surgically corrected and/or in multiple | Seizure/Convulsion | See Epilepsy |
| | limbs, or tobacco use, Decline | Shortness of Breath | Accept (rate for cause) |
| Polycystic Kidney Disease | Decline | Sickle Cell Anemia | Decline |
| Polycythemia (Vera) | Decline | Sickle Cell Trait | Accept |
| Prostate Cancer | Diagnosis and end of treatment over 5 years ago, Accept | Sleep Apnea | Possible Accept |
| | Otherwise. Decline | Stroke | Decline |
| Prostatitis | Accept | Suicide Attempt | Decline |
| Proteinuria | Possible Accept (rate for cause) | Systemic Lupus Erythematosus (SLE) | Decline |
| Psoriasis | Accept | Transient Ischemic Attack (mini- | Decline |
| Psoriatic Arthritis | See Rheumatoid Arthritis | stroke) | Decline |
| PTSD (Post Traumatic Stress | Mild-Moderate, Accept | Tuberculosis | Accept |
| Disorder) | Severe, Decline | Ulcer | No complications in past year, Accept |
| Pulmonary Embolism | Two or fewer episodes, fully recovered, Accept | Ulcerative Colitis | See Crohn's Disease |
| | Otherwise, Decline | | |

Multiple Medical Conditions

The underwriting approach is designed to accommodate the likelihood of multiple medical conditions. Conditions are evaluated in a manner which takes into account varying degrees of severity, treatment and age. Note that the presence of either numerous or significant medical conditions may result in decline.

Foreign Risk Guidelines

Insured must have permanent visa (green card) and reside in the U.S. for a minimum of the past 2 years. Temporary visa holders are not eligible.

Level of Care for Insureds Ages 60+

Insureds ages 70+ must have a doctor's visit within the past 12 months. For ages 61-69, the insured must have a doctor's visit within the past 24 months.

Agent Resources

Website

Visit Phoenix's agent Website, <u>PhoenixSalesNet.com</u> for:

- product availability by state
- quotes and illustrations
- marketing materials
- eApp
- pending case status
- compensation statements
- and much more!

For mobile quotes, please save this link to your bookmarked sites: https://phx.insurancetechnologiespos.com/mobile/Main/Wholelife.aspx

Live Support

Call for live assistance Monday through Friday, except major holidays.

Product Information, Marketing Fulfillment and Application Help:

Sales Desk 1-888-794-4447 Available 8 a.m. – 6 p.m. Eastern Time

New Business Questions

Life New Business: 1-800-417-4769, option 2, option 3 Available 8:30 a.m. – 5 p.m. Eastern Time

More Information

Health Insurance Portability and Accountability Act (HIPAA)

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) combats waste, fraud and abuse in the insurance industry. HIPAA guidelines have specific disclosure requirements that prohibit unauthorized persons from viewing or receiving confidential medical information. As a result, strict HIPAA regulations prohibit us from divulging or discussing with the agent any medical information obtained during underwriting.

Medical Information Bureau, Inc.

The Medical Information Bureau (MIB) is a membership association of life insurance companies. The primary mission of the MIB is to provide an alert to its member insurance companies against omissions and fraud. This helps MIB member companies to protect their interests and leads to cost savings which can be passed on to the insurance consumer.

The authorization sections on the application authorize Phoenix to access the MIB and to obtain any necessary medical records for the Proposed Insured during the underwriting process. Please note that the MIB is used as an alert. Actual underwriting decisions are not based on MIB inquiry results alone. Phoenix helps people secure their retirement dreams and protect loved ones with annuities and life insurance. Founded in 1851, Phoenix has a long, proud history of keeping its promises.



Guarantees are based on the claims-paying ability of the issuing company, PHL Variable Insurance Company.

Phoenix Remembrance Life (ICC12FEWL) whole life insurance is issued by PHL Variable Insurance Company (PHLVIC). PHLVIC is not authorized to conduct business in Maine and New York.

Member of The Phoenix Companies, Inc.

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