

Age and Amounts Requirements



The guidelines in the chart below apply to the amount applied for and any amount applied for in the past two years. For Survivorship coverage, requirements are based on 50% of the face amount applied for, along with 50% of the rider.

AGE	\$25,000	\$25,001 to \$49,999	\$50,000	\$50,001 to \$59,999	\$60,000 to \$99,999	\$100,000 to \$249,999	\$250,000 to \$499,999	\$500,000 to \$999,999	\$1,000,000 to \$2,500,000	\$2,500,001 to \$4,999,999	\$5,000,000 and up
0 to 14	NONE	NONE	NONE	NONE	NONE	NONE	NONE	APS	EXAM, APS	EXAM, APS	EXAM, APS
15 to 17	NONE	NONE	NONE	NONE	NONE	NONE	NONE	APS	EXAM, APS, IRP	EXAM, APS, IRP	EXAM, APS, IRP
18 to 40	NONE	NONE	NONE	UHIV (DC)	UHIV (CA, NJ, NY, FL, TX, DC)	EXAM, IRP, MVR	EXAM, IRP, MVR	EXAM, IRP, MVR	EXAM, IRP, MVR	EXAM, IRP, MVR	EXAM, IRP, MVR
41 to 45	NONE	NONE	NONE	EXAM, SPEC, UHIV (DC)	EXAM, SPEC, UHIV (CA, NJ, NY, FL, TX, DC)	EXAM, IRP	EXAM, IRP	EXAM, IRP	EXAM, IRP	EXAM, IRP, ECG	EXAM, IRP, ECG
46 to 50	NONE	EXAM	EXAM, SPEC	EXAM, SPEC, UHIV (DC)	EXAM, SPEC, UHIV (CA, NJ, NY, FL, TX, DC)	EXAM, IRP	EXAM, IRP	EXAM, IRP	EXAM, IRP	EXAM, IRP, ECG	EXAM, IRP, ECG
51 to 64	EXAM	EXAM	EXAM, SPEC	EXAM, SPEC, UHIV (DC)	EXAM, SPEC, UHIV (CA, NJ, NY, FL, TX, DC)	EXAM, IRP	EXAM, IRP, ECG	EXAM, IRP, ECG	EXAM, IRP, ECG	EXAM, IRP, ECG	EXAM, IRP, ECG
65 to 70	EXAM	EXAM	EXAM, SPEC	EXAM, SPEC, UHIV (DC)	EXAM, SPEC, UHIV (CA, NJ, NY, FL, TX, DC)	EXAM, IRP, ECG	EXAM, IRP, ECG	EXAM, IRP, ECG	EXAM, IRP, ECG	EXAM, IRP, ECG	EXAM, IRP, ECG
71 to 75	EXAM, Rx	EXAM, Rx	EXAM, SPEC, Rx	EXAM, SPEC, UHIV, Rx (DC)	EXAM, SPEC, UHIV, Rx (CA, NJ, NY, FL, TX, DC)	EXAM, IRP, ECG, COG, Rx	EXAM, IRP, ECG, COG, Rx	EXAM, IRP, ECG, COG, Rx	EXAM, IRP, ECG, COG, Mobility, Rx	EXAM, IRP, ECG, COG, Mobility, Rx	EXAM, IRP, ECG, COG, Mobility, Frailty, Rx
Over 75 ¹						EXAM, APS, IRP, ECG, MVR, COG, Mobility, Rx	EXAM, APS, IRP, ECG, MVR, COG, Mobility, Rx	EXAM, APS, IRP, ECG, MVR, COG, Mobility, Rx	EXAM, APS, IRP, ECG, MVR, COG, Mobility, Frailty, Rx	EXAM, APS, IRP, ECG, MVR, COG, Mobility, Frailty, Rx	EXAM, APS, IRP, ECG, MVR, COG, Mobility, Frailty, Rx

NOTE: Please refer to attending physician's statement requirement Guide (0210258) for additional APS requirements.

The age and amount requirements apply to products with Preferred underwriting categories. Data verification reports and requirements and paramed exam limits and procedures apply to all Life products. The minimum face amount for individuals over age 80 is \$250,000. Exceptions to \$200,000 may be permitted—call the underwriter. Minimum face for ages 76 to 80 is \$100,000. MD exams may be required based upon underwriter discretion.

¹ Minimum face amounts: Ages 76 to 80: \$100,000; Ages >80: \$250,000. (Face amounts of \$200,000 may be considered as an exception—contact Underwriting.)

Age and Amounts Requirements (Continued)

REQUIREMENTS LEGEND

EXAM
<p>The examiner is a paramed, not a Medical Doctor. He or she weighs and measures the proposed insured and takes blood pressure and pulse.</p> <p>A Modified Exam is required for submissions via Express Worksheet. Tele-underwriting Interviewer obtains the Part 2 Medical Declarations.</p> <p>Full Exams are required for submissions via paper application. The examiner obtains the Part 2 Medical Declarations.</p>
REQUIREMENTS
<p>APS Attending Physician Statement*</p> <p>COG Cognitive function testing, administered by examiner</p> <p>ECG Electrocardiogram</p> <p>FRAILITY Senior supplement questionnaire, administered by examiner</p> <p>IRP Insurance Risk Profile (Comprehensive Blood and Urine Panel)</p> <p>MVR Motor Vehicle Report</p> <p>MOBILITY Get Up & Go mobility test, administered by examiner</p> <p>SPEC Urine Specimen</p> <p>Rx Pharmaceutical database check</p> <p>UHIV Urine HIV Testing—Examiner-collected urine specimen for states listed in the Age and Amount Requirements for HIV testing</p> <p><i>In addition to the lab slip, please submit any required state-specific HIV consent form.</i></p>
DATA REQUIREMENTS (PRUDENTIAL TO ORDER WHEN REQUIRED)
<p>Attending Physician Statement:</p> <p>PADR (Prudential Automated Database Report)</p> <p>Rx Pharmaceutical database check</p> <p>Face amount: \$250,000 to \$499,999 for Traditional Paper Application submissions Face amount: \$500,000 to \$999,999 for Tele-underwriting Worksheet submissions</p> <p>DVR (Data Verification Report)</p> <p>Face amount: > \$499,999 for Traditional Paper Application submissions Face amount: > \$999,999 for Tele-underwriting Worksheet submissions</p>

*Please refer to the Attending Physician's Statement Requirement Guide (0210258) for additional APS requirements.