

AMERICO
AdvantageWL[®]
Simple. Pure. Permanent Protection.

Agent Guide
Policy Series 281



- Guaranteed lifetime coverage¹
- Guaranteed level premiums
- Coverage for children
- Simple and easy life insurance

Americo Contact Information

Americo.com: Access product information, forms, and consumer-friendly information, and download quote software at our agent website, www.americo.com.

Agent Services:
800.231.0801 or
agent.services@americo.com
Monday – Friday,
8 A.M. to 5 P.M., Central.

Underwriting: Have a special situation? Refer to Americo.com. For specific underwriting questions, contact an underwriter directly through Agent Services at 800.231.0801.

For faster issue, fax underwriting and delivery requirements to 800.395.9238.

Table of Contents

Product Specifications	4
Riders & Additional Benefits	4
New Business Information	6
General Underwriting Information	7
Underwriting Build Chart	8
Standard Underwriting	9
Single Impairment Guide	10
Prescription Drug Guide	12
Rate Charts	13

Every day, families are faced with the difficult task of saying goodbye to loved ones.



The need for life insurance

As hard as the emotional toll can be, the additional burden of paying for unexpected expenses can create more stress and hardship on the family. Having a life insurance policy can help with these financial hardships.

Why sell whole life insurance?

Many people do not have enough life insurance to protect their families.

Whole life insurance is pure and simple, permanent protection that is easy to explain and understand. Clients benefit because the premiums and death benefit remain level throughout their lifetime. Plus, whole life insurance builds cash value that can be accessed through policy loans.

AdvantageWL as a Supplemental Sale

Are you leaving a sale “on the table” because your final expense or mortgage product doesn’t offer lower issue ages or higher face amounts? AdvantageWL can often work as a supplemental product to fill your clients’ needs.

Life Insurance for Children

Although many people do not think about purchasing life insurance for children, it is something you may want to discuss with your clients. Just as they purchase life insurance for their future needs, parents and grandparents can make sure the little

ones who mean so much to them will reap the benefits later in life.

By purchasing an AdvantageWL policy for a child, he or she is guaranteed to have permanent life insurance protection for the rest of his or her life – regardless of any future health conditions.¹



Why sell AdvantageWL?

Americo AdvantageWL from Americo Financial Life and Annuity Insurance Company (Americo) is permanent whole life insurance that can fit a variety of clients’ needs. It’s simple. It’s affordable. It’s easy to explain to clients.

- ▶ Guaranteed premiums. Guaranteed cash value. Guaranteed death benefit. Guaranteed lifetime coverage.¹
- ▶ Issue ages 0 - 75.
- ▶ Face amounts starting at \$15,000 for children ages 0 - 17 and \$25,000 for adults ages 18 - 75.
- ▶ Fast and efficient underwriting under \$100,000 (under age 71).
- ▶ Fits well as a companion product. It can be a mortgage sale add-on for younger issue ages, or a final expense sale add-on for higher face amounts.
- ▶ Children’s Term, Accidental Death Benefit, and Waiver of Premium riders available.²

AdvantageWL at a Glance

Issue Ages:

0 - 75, age last birthday

Minimum Face Amount:

\$15,000, ages 0 - 17
\$25,000, ages 18 - 75

Premium Class:

Non-smoker/Smoker

Gender:

Male/Female (Unisex in MT)

Premium Modes:

Annual: 1.00
Semi-annual: 0.52
Quarterly: 0.28
Monthly PAC: 0.095

Application:

Series 5098

Policy Fee:

\$40 (fully commissionable)

Riders Included at no Additional Cost:

Accelerated Benefit Payment

Additional Riders:

Children's Term Insurance
Waiver of Premium
Accidental Death Benefit

Product Specifications

Conversions

AdvantageWL is currently available as a conversion product from eligible Americo products. Please contact Americo Customer Service for details at 800.231.0801.

Endowment

Premiums are paid to age 100, endowment at age 120.

Non-smoker Classification

A Nonsmoker is defined as a anyone who has not used nicotine products (including, but not limited to, cigarettes, cigars, pipes, chewing tobacco, snuff, alternative nicotine delivery devices such as nicotine chewing gum or lozenges, nicotine patches or e-cigarettes, or any device used for the vaporization of liquid nicotine) for at least 12 months prior to the completion date of the application.

Policy Loans

Policy loans are available. Interest rate of 7.4% payable in advance, which is equivalent to an annual effective rate of 8.0%. Policy loans will impact policy performance. When policy loans and interest on the loans are greater than the policy's cash value, the policy will terminate.

Automatic Premium Loan Option may be selected on the application and is also available upon written request.

Non-Forfeiture Options

After the policy has a cash value, and if any premium remains unpaid after the grace period, the non-forfeiture options available are cash surrender and reduced paid-up insurance. The automatic option will be reduced paid-up insurance.

Underwriting Classifications

Substandard ratings available to Table 4.

Riders & Additional Benefits

Accelerated Benefit Payment Rider

Rider Series 2146

An Accelerated Benefit Payment Rider is included at no additional cost.

If the insured is diagnosed with a qualified terminal illness that results in a life expectancy of 12 months or less (24 months or less in IL, MA, TX, and WA), Americo will advance up to 50% of the death benefit payable under the policy. The available benefit will not exceed \$250,000 and will be reduced by the amount of any outstanding policy loans. The minimum accelerated benefit is \$5,000. State variations apply.

For a period of 12 months immediately following acceleration, all monthly premiums will be waived. If the insured is still living following the end of the twelfth month, monthly premiums will again be assessed against the policy.

There is no premium for this rider. At the time your client receives the accelerated benefit payment, an administrative fee of up to \$250 will be assessed against the policy. A lien in the amount of the accelerated benefit payment plus the administrative fee will be imposed on the policy. Only one accelerated benefit per policy is allowed and interest will be charged on the policy lien.

Please refer to the Accelerated Benefit Payment Rider Disclosure Statement for specific details regarding the effect of the accelerated benefit payment on the policy. You must ensure the proposed insured and owner acknowledge receipt of the Disclosure Statement.

Accidental Death Benefit Rider

Rider Series 2111

The Accidental Death Benefit Rider provides an additional benefit if the insured dies as a result of an accidental bodily injury within 90 days of the injury.

Specifications:

Issue ages: 5 - 65. The rider ends on the policy anniversary where the primary insured is age 75.

The minimum benefit is \$5,000 and the maximum is the lesser of \$400,000 or the face amount of the base coverage.

Children's Term Insurance

Rider Series 2113

The Children's Term Insurance Rider provides level term life insurance on any child, stepchild, or legally adopted child of the primary insured provided the child is 18 years of age or younger on the date of application.

After the date of application, the rider will include any child born to the insured or any legally adopted child 18 years of age or younger at the time of adoption.

Coverage on each child ends on the child's 25th birthday or the policy anniversary nearest the primary insured's 65th birthday, whichever comes first. If the primary insured dies while this rider is in effect, the level term life insurance on each child becomes fully paid-up term insurance. Conversion to a new policy is available on the child's 25th birthday or the policy anniversary nearest the primary insured's 65th birthday, whichever comes first.

Conversion to a level-premium, permanent policy of insurance offered by Americo is allowed for up to five times the amount of coverage in force on the child.

Specifications:

Issue Ages: 15 days - 18 years; age last birthday.

The Children's Term Rider is issued in units of \$1,000 of level term life insurance.

The maximum amount is \$10,000 or ten units. The Children's Term Rider costs \$5.75 per \$1,000 annually.

The rider ends on the policy anniversary at which the primary insured is age 65.

Waiver of Premium Rider

Rider Series 2158

The Waiver of Premium Rider waives the total premium (including premium for riders) if the primary insured becomes totally disabled on or before the Insured's 60th birthday. After 180 consecutive days of disability, the premium will be waived from the date of disability (with a limit of 6 months prior to written notice of claim). This benefit ends on the earliest of:

- ▶ policy anniversary on which the primary insured is age 60, but not less than two years following the onset of total disability;
- ▶ the date the insured is no longer totally disabled; or
- ▶ the date the base policy ends.

If the policy includes a Children's Term Rider, the Waiver of Premium Rider must also be purchased on the Children's Term Rider in order for the premium to be waived at a cost of \$0.20 per unit annually.

Specifications:

Issue ages: 18 - 55; age last birthday.

Cost: Annual rate per \$1,000 of face amount based on the insured's issue age.

New Business Information

Completing the Application

- ▶ Print clearly and use black ink.
- ▶ Answer all questions thoroughly.
- ▶ Make sure that you have all of the required forms for your product and state.
- ▶ Note special requests such as effective date, draft date, save age, issue family members together in the Agent Comments section of the application.
- ▶ Double check for correct signatures, agent number, and dates.
- ▶ The Payor section of the application is not necessary unless the Payor is different than the owner or insured.

Fax Your Application

- ▶ Use the Amerigo Fax Application Transmittal Form (#AFSFAX2002)
- ▶ Attach the application, additional required forms and a copy of the premium check or EFT form
- ▶ Fax to: 800.395.9238
- ▶ If you provide your fax # or email address on the Fax Transmittal form you will receive a confirmation which includes the policy number within 3 business hours.
- ▶ Please do not mail the originals.

Upload Your Application

Submit your business electronically to Amerigo's secure site.

- ▶ If your documents are not already saved electronically, scan and save them to your PC. We accept the following file types: .doc, .jpg, .pdf, .tif, .tiff, .bmp
- ▶ You can upload 5 docs at a time with a maximum size of 10 megabytes.
- ▶ The name of your documents must be 45 characters or less.
- ▶ Log on to Amerigo.com and click on the "Upload Documents" link on the lower left side of the home page.
- ▶ Follow the easy instructions.
- ▶ You can also upload outstanding requirements for existing pending business. Please make sure to write a policy number on the document.

Forms of Payment

- ▶ Please do not send cash or partial premiums.
- ▶ Amerigo will accept cashier's checks, but NOT money orders.

- ▶ We cannot process premium checks that are postdated, backdated by more than six months, or improperly endorsed. Please make sure the policy number, if you know it, is on any check sent to Amerigo.
- ▶ Personal checks written by the agent on behalf of the applicant will not be accepted.

Drafting for Premium

Amerigo will draft for initial premium.

- ▶ If outstanding requirements are not received on a timely basis, or if you request a future effective date, we will draft for the first and second months' premium.
- ▶ If a third month is required, we will call you for approval.
- ▶ Drafting is not available on the 29th, 30th or 31st of any month.
- ▶ If your client requests a specific draft date, please write it in the Agent Comments section of the application.
- ▶ The draft date and the effective date will always be the same.
- ▶ If no specific draft date is requested, the first draft will be submitted the day the application is approved and issued.
- ▶ Some clients may prefer to write a check for the initial premium and then provide the Bank Draft Authorization form (AF55019) for monthly drafts. If this is the case, please provide a copy of the initial premium check with application if you fax or upload your documents. This will prevent us from drafting for the initial premium.
- ▶ Amerigo will draft from a checking or savings account as follows:
 - Checking accounts – include voided check
 - Savings accounts – must include a pre-printed deposit slip
 - Or, complete Amerigo's Bank Draft Authorization form (AF55019) for either type of account.

Please remember to explain the drafting process to your clients when taking an application. This will lead to fewer drafts being returned and fewer complications for you and your client.

General Underwriting Information

Important Note Regarding Americo's Underwriting Standards

The following information is a subset of Americo's underwriting guidelines and does not reflect the full underwriting standards of Americo. Because Americo's underwriting guidelines are extensive and cannot be condensed for practical field use, this information provides a list of common factors for agent consideration when screening clients for Americo products. The information provided is to assist you in understanding the guidelines used by Americo when reviewing applications. These are guidelines only. Each case underwritten by Americo is unique and all factors from all sources are taken into consideration before a final underwriting decision is made. Each application is reviewed based on the circumstances and conditions contained therein and may involve additional requirements. The underwriting staff at Americo reserves the right to deviate from these guidelines as may be appropriate for the proper underwriting of any case. This information and the full underwriting guidelines used by Americo are subject to change.

Insurable Interest

The first step in assessing life insurance risk is establishing insurable interest, which must be determined before the life insurance policy is approved. An insurable interest exists when the Owner (sometimes referred to as the Applicant) is likely to suffer some financial loss or detriment if the insured dies.

Most often, life insurance contracts are written naming the Insured as the Owner of their own policy. In this situation, the Insured is said to have an unlimited insurable interest in their own life. Other close personal relationships may also have an insurable interest in the life of the Insured and are able to apply for and own life insurance on another individual. Some of these personal relationships include:

- ▶ Spouse
- ▶ Parent (of minor children)
- ▶ Child, Brother, or Sister (in some circumstances)
- ▶ Grandparents (with parent permission)
- ▶ Legal Guardian and Conservator (with accompanying court documentation)

Certain Business and Financial relationships may represent special instances of limited insurable interest as well. The purpose of the insurance may also be accomplished by the way the beneficiary designation is written.

Some examples of these situations are:

- ▶ Creditor (the amount of insurance must not exceed the indebtedness)
- ▶ Key Person (the general rule for the amount of insurance is no more than five times the proposed insured's annual income)
- ▶ Principal stockholders
- ▶ Employer to key employee
- ▶ Business partnerships

Ownership in all cases must be prudent and reasonable.

Examples of questionable ownership would be:

- ▶ Application requests owner to be the parent of an adult, married, proposed insured without reasonable explanation.
- ▶ Applicant requests owner to be the adult child of an adult proposed insured without reasonable explanation.

If proper insurable interest has been established, beneficiary designations on the application are generally acceptable as written. Usually, if the Insured is the Owner of their own policy, they are free to name a beneficiary with few restrictions. Please contact Underwriting if you have questions.

Questionnaires

Questionnaires are available on Americo.com and may be used for life insurance applications. Some questionnaires are state specific and may have another form number. The following questionnaires are available:

- ▶ Alcohol Usage
- ▶ Arthritis
- ▶ Aviation
- ▶ Back Disorders
- ▶ Business Insurance
- ▶ Chest Pain
- ▶ Diabetic
- ▶ Prescription Medication & Drug Use
- ▶ Epilepsy / Seizure
- ▶ High Blood Pressure
- ▶ Military
- ▶ Sports Activities
- ▶ Tumor
- ▶ Nervous Disorders
- ▶ Residence & Foreign Travel
- ▶ Respiratory Disorders
- ▶ Coronary Disease
- ▶ Personal Financial

Health Changes Underwriting

Any change in the health of the proposed insured that occurs after the original application date, but before coverage becomes effective, must be reported to Americo. Provide detailed information regarding the health change directly to Underwriting through the Agent Contact Center.

Medical Check-Ups

Whether the medical check-up is for periodic wellness exams or symptomatic in nature, it is important to provide complete details on the application. You should list the reason for the exam, date, and results of the check-up for all proposed insureds. Always provide the name, address, and telephone number of the attending physician or medical facility. If there is a patient identification number such as a Kaiser Permanente number, please include that information on the application as well.

Military Guidelines

Active military personnel must complete a Military Questionnaire and submit it with the application for insurance. If deployment orders are pending, or have been received (verbal or written), please indicate the location of the next duty site for underwriting consideration.

Please note, agents are not permitted to sell Americo products on military bases.

In the event of any future military conflict, these guidelines may be discontinued.

Foreign Nationals and Foreign Travel

Coverage is not available for foreign nationals visiting, those temporarily residing in the United States, or individuals not residing legally in the United States. Consideration may be given to noncitizens who have established legal, permanent residency in the United States and are applying for citizenship. Any applicant who is not a U.S. citizen must reside in the United States for a minimum of one continuous year prior to application and have no significant medical history that would require medical records from a foreign country. One of the following documents must be submitted with the application. No exceptions will be made.

- ▶ Copy of the applicant's Green Card or Permanent Visa (B1 - B2 Visas not acceptable)
- ▶ Copy of U.S. Citizenship and immigration Services Form I-551

Underwriting reserves the right to use any and all information developed in making a determination of eligibility under these guidelines.

Foreign Residence and Travel – United States citizens making short trips (4 weeks or less) out of the country for business, pleasure, or educational purposes are usually acceptable risks, depending on their destination. Please complete a Residency and Foreign Travel Questionnaire for applicants who anticipate future foreign travel and submit it at the time of application. The Foreign Travel Questionnaire is not required in all states. Please contact your underwriter to determine which states do not require this information and form.

Underwriting Build Chart

HEIGHT	Americo AdvantageWL (Unisex)
4'8"	79 - 171
4'9"	81 - 177
4'10"	84 - 184
4'11"	87 - 190
5'0"	90 - 197
5'1"	93 - 203
5'2"	96 - 210
5'3"	99 - 217
5'4"	102 - 224
5'5"	106 - 231
5'6"	109 - 238
5'7"	112 - 245
5'8"	116 - 253
5'9"	119 - 260
5'10"	122 - 268
5'11"	126 - 276
6'0"	130 - 283
6'1"	133 - 291
6'2"	137 - 299
6'3"	141 - 308
6'4"	144 - 316
6'5"	148 - 324
6'6"	152 - 333
6'7"	156 - 341

Standard Underwriting

Standard Medical Requirements

Amounts	0 - 17	18 - 40	41 - 70	71 & Over
\$0 - 99,999	Non-medical*, Prescription History	Non-medical*, Prescription History		Paramed Exam, HOS, APS
\$100,000 - 250,000		Agent-collected Saliva, Prescription History	Paramed Exam, HOS, Blood Profile for ages 60+	Paramed Exam, HOS, Blood Profile, APS
\$250,001 - 500,000	Paramed, HOS, Blood Profile			
\$500,001 - 1,000,000	Paramed, HOS, Blood Profile			
\$1,000,001 - 3,000,000	Paramed Exam, HOS, Blood Profile, ECG, APS, Inspection			MD Exam, HOS, Blood Profile, ECG, APS, Inspection
Over \$3,000,000	MD Exam, HOS, Blood Profile, Treadmill ECG, APS, Inspection			

*Maine Residents: Minimum face amount through \$99,999 requires saliva testing. Agent must be certified to collect saliva specimen and complete a brief training program.

APS - Attending Physician Statement, HOS - Home Office Specimen, ECG - Electrocardiogram.

Underwriting Resources

Non-Medical

It is important for you to secure an accurate medical history by asking all health questions and providing the answers in the space provided on the application. In every case, please provide the name, address and telephone number of the applicant's personal physician plus the date, reason, and results of the last check-up.

Agent Collected Saliva

The saliva specimen is collected by the agent during the sale. The process is simple:

- ▶ You must complete a brief training session and obtain your certification. Please go to www.salivatrain.com. The entire process should take you only about 10 minutes.
- ▶ The specimen is collected by you and sent to the lab in a special, postage-paid envelope provided in the saliva kit.
- ▶ To order your saliva kits or ask any questions regarding the process, please contact Clinical Reference Laboratory (CRL) at ilcskits@crlcorp. When ordering saliva kits, include your name, address, phone number, and indicate you are with Americo. Once the order is placed, CRL will send an email confirmation.

Paramedical Services

Paramed services should be ordered by you. They will not be ordered by Americo. Paramed Companies will gather the following requirements:

- ▶ Paramed Exam: The paramed will ask some medical questions and take blood pressure plus height and weight.
- ▶ Blood Profile: Please advise the applicant they should fast a minimum of 6 hours; however, for best results, it is recommended to avoid food for 10-12 hours. Applicants may drink water, tea or black coffee (no sugar).
- ▶ Home Office Specimen (HOS): This is the collection of urine.
- ▶ Electrocardiogram (ECG) & Treadmill ECG: The paramed company will complete these tests, or instruct your client as to where they should go to complete the tests.

Approved Paramedical Companies

- ▶ APPS (American Para Professional Systems, Inc. 800.635.1677 www.appsnational.com)
- ▶ EMSI (Examination Management Services, Inc. 800.872.3674 www.emsinet.com)

Attending Physician Statement (APS)

Reports will be ordered by Americo at the discretion of the underwriter and based on the underwriting guideline requirements. In general, they will be ordered based on the amount of insurance, age, medical history, medical exam findings, or MIB results.

MD Exam

This exam must be completed by a physician who is state board licensed. Paramed companies will not complete this exam. A licensed MD or DO, including the applicant's personal physician, may perform the exam. It is recommended that you contact one of the paramed companies listed above to determine if they have an MD on staff who can perform the exam and is located close to your applicant.

Inspection Reports

We will order inspection reports on all cases over \$1,000,000. You should inform your applicant when an inspection report is required so that they will expect a phone call or in-person interview.

Phone interviews are conducted for amounts through \$3,000,000. In-person interviews are conducted for amounts in excess of \$3,000,000. The name of our inspection company is LabOne.

Medical Information Bureau (MIB)

This is a database that houses medical information on individuals. Americo will run an MIB report on all applicants. The results may cause us to request additional requirements, which may affect our underwriting decision.

Prescription Drug Check

Information gathered from prescription drug databases is frequently used by insurance companies to assist in evaluating risk and streamline underwriting processes. Americo will run a prescription drug check on all products.

Single Impairment Guide

This product can be rated up to Table 4 only. Impairments noted as Decline on this product may be acceptable on other Americo products.

Medical Condition	Typical Underwriting Action
AIDS	Decline
Alcohol Abuse:	
Recovered within 2 years	Decline
Recovered within 2-5 years	Individual Consideration to Table 4
Recovered after 5 years	Individual Consideration
With relapse	Decline
ALS (Lou Gehrig's Disease)	Decline
Alzheimer's Disease	Decline
Amputations:	
Accidental - fully recovered, working full time	Individual Consideration
Associated with diabetes/vascular disease	Decline
Kidney or bladder dysfunction	Decline
Wheelchair bound	Decline
Aneurysm:	
Abdominal or Thoracic - no surgery	Decline
Abdominal or Thoracic - with surgery after 6 months	Possible Table 4
Angina Pectoris (chest pain), Current History of	Decline Table 2-4
Anxiety	Standard to Table 4
Atrial Fibrillation:	Table 2 and up
with RF ablation, no re-occurrence after 3 months	Individual Consideration
Arthritis:	
Rheumatoid/Psoriatic mild, working full time	Possible Table 4
Disabled due to arthritis	Decline
Methotrexate or steroid medications	Possible Table 4
Asthma:	
Well controlled, seasonal with allergies	Standard
Steroid use	Usually Decline
Smoking	Individual Consideration
ER visit/hospitalization within last year	Decline
Blood Clots:	
Pulmonary Embolism/Thrombophlebitis - Single, over 6 months	Individual Consideration Table 2-4
Cancer: Due to the complexity of evaluating cancer risks and the level of detail necessary for accurate assessment, please contact the Underwriting Department. Your underwriter will assess the cancer as accurately as possible with the information available. The final rate will be determined after full evaluation of complete medical records. It is recommended that you have the following information available when contacting your underwriter:	
<ul style="list-style-type: none"> Type or name of cancer Location Staging and/or grade Date of diagnosis Type of treatment administered Time since cessation of treatment Recurrence? If yes, date of last event 	

Medical Condition	Typical Underwriting Action
Cerebral Palsy:	
Over age 9 - mild, self-sufficient	Individual Consideration
Otherwise	Decline
Chronic Obstructive Pulmonary Disease (COPD):	
Mild to moderate	Table 4
Moderate to severe	Decline
With smoking	Decline
Cirrhosis of the Liver	Decline
Colitis:	
IBS	Standard
Ulcerative Colitis	Usually Decline
Crohn's Disease	Usually Decline
Concussion, after 6 months	Usually Standard
Congestive Heart Failure	Decline
Coronary Artery Disease:	
Angioplasty (stent) or bypass	Table 4 and up
Heart Attack	Table 4 and up
Recurrent episodes, onset before age 40	Decline
Cystic Fibrosis	Decline
Dementia	Decline
Depression:	
No hospitalizations within 3 years, no more than 2 medications	Table 2 and up
Otherwise or with alcohol abuse and/or narcotic pain medications	Decline
Diabetes:	
Type 1 or with insulin - onset under age 60	Table 4 and up
Onset age 20-30	Table 8 and up
Onset under age 20	Decline
Type 2, oral medications or diet controlled	Table 2 and up
Type 2, Onset under age 20	Decline
Driving Record:	Adverse driving records will be underwritten on an individual application basis, subject to a motor vehicle report.
DUI/DWI - multiple or last occurred under age 25	Decline
Drug Abuse:	
Marijuana, occasional use/not daily	Table 2 and up
Cocaine, Amphetamines, Street Drugs (within 5 years)	Decline
Cocaine, Amphetamines, Street Drugs (over 5 years)	Individual Consideration
Prescription Narcotics	Individual Consideration

Underwriting reserves the right to make the final determination based on all factors of the risk.

Medical Condition	Typical Underwriting Action
Emphysema (see COPD)	
Epilepsy (obtain questionnaire):	
Grand Mal attack within 6 months	Decline
Grand Mal attack over 6 months	Table 2 and up
Petit Mal attack within 6 months of Diagnosis	Decline
Petit Mal attack over 6 months	Standard and up
Fibromyalgia (not disabled, no narcotic pain medications)	Usually Standard
Heart Attack (see Coronary Artery Disease)	
Heart Bypass (see Coronary Artery Disease)	
Heart Murmur:	
Aortic Insufficiency	Decline
Aortic Stenosis	Decline
Mitral Regurgitation	Table 2 and up
Mitral Valve Prolapse - no medications	Standard
Mitral Valve Prolapse - with medications	Standard to Table 4
Mitral Valve Replacement - mitral and aortic	Decline
Heart Valve Repair:	
Mitral, after 6 months	Decline
Aortic, after 1 year	Decline
Heart Transplant	Decline
Hemophilia	Decline
Hepatitis:	
Alcoholic	Decline
Hepatitis A with full recovery	Standard
Hepatitis B	Possible Table 4
Hepatitis C	Possible Table 4
High Blood Pressure (hypertension):	
Controlled	Standard
Hodgkin's Disease within 3 years	Decline
Hodgkin's Disease over 3 years	Individual Consideration
Hysterectomy:	
No cancer	Standard
Cancerous Cause (see cancer)	
Kidney Dialysis	Decline
Kidney Removal (see Nephrectomy)	
Kidney Transplant Recipient	Decline
Kidney Transplant Donor	Usually Standard
Leukemia (see cancer)	
Liver Transplant	Decline
Lou Gehrig's disease (see ALS)	
Lung Transplant	Decline
Lupus:	
Discoid	Usually Standard
Systemic	Minimum Table 4

Medical Condition	Typical Underwriting Action
Melanoma (see cancer)	
Multiple Myeloma	Decline
Multiple Sclerosis:	
Mild, employed full time, no medications	Decline
Otherwise	Decline
Myasthenia Gravis, diagnosed over 1 year	Table 4 and up
Muscular Dystrophy:	
Mild, not progressive	Decline
Otherwise	Decline
Narcotic Pain Medication	Table 4 and up
with antidepressant medication or disabled	Decline
Nephrectomy (kidney removal) (if due to cancer, see cancer section)	Individual Consideration
Osteoporosis	Usually Standard
Pacemaker	Minimum Table 4
Pancreatitis:	
Acute, full recovery over 1 year	Table 2-4
Chronic	Decline
Paraplegic:	
Normal bowel and/or kidney functions	Decline
Bowel and/or kidney functions impaired	Decline
Parkinson's Disease	Decline
Peripheral Vascular Disease	Minimum Table 4
Polycystic kidney disease	Decline
Polycystic kidney disease family history	Decline
Psychosis	Decline
Quadriplegic	Decline
Rheumatoid Arthritis (see arthritis)	
Sarcoidosis:	
Current treatment or with residual lung impairment	Decline
Recovered over 1 year, no residuals	Minimum Table 4
Schizophrenia	Decline
Skin Cancer (except melanoma)	Individual Consideration
Sleep Apnea current successful treatment w/CPAP or BIPAP	Usually Standard
Stroke:	
No residuals - over 1 year	Minimum Table 4
Multiple Strokes	Decline
TIA (Mini Stroke)	Minimum Table 4
Thyroid impairments	Usually Standard
Tuberculosis:	
Current Disease/Treatment	Decline
Positive Skin Test with treatment completed	Usually Standard
Ulcer	Usually Standard
Ulcerative Colitis (see Colitis)	

Underwriting reserves the right to make the final determination based on all factors of the risk.

Prescription Drug Guide

The following represents a partial list of prescription medications available that are considered uninsurable. For drugs not listed, please consult with your underwriter.

Drug	Drug	Drug	Drug
Abarelix	Emtricitabine and Tenofovir	Lexiva	Rivastigmine Transdermal System
Abraxane	Disoproxil Fumarate	Lopinavir, Ritonavir Capsules	Saquinavir Mesylate
Alemtuzumab	Emtriva	Loxapine	Sargramostim
Anastrozole	Enfuvirtide	Loxitane	Selzentry
Aricept	Entecavir	Lupron	Sildenafil Citrate
Arimidex	Entravirine Tablets	Mannitol Injection	Simulect
Baraclude	Epivir	Maraviroc	Sprycel
Basiliximab	Eplerenone	Megace	Stavudine
Bumetanide	Erbix	Megestrol Acetate	Sunitinib Malate
Bumex	Estradiol valerate	Mellaril	Sustiva
Campath	Exelon	Memantine HCL	Sutent
Carboplatin	Exelon Patch	Methoxy Polyethylene glycol-epoetin beta	Syprine
CellCept	Fludara	Milrinone	Tabloid
Cetuximab	Fludarabine	Mycophenolate Mofetil	Tenofovir Disoproxil Fumarate
Chlorpromazine	Fomivirsen	Mycophenolic Acid	Thioguanine
Cladribine	Fosamprenavir Calcium	Myfortic	Torse mide
Clofarabine	Foscarnet Sodium Injection	Namenda	Treprostinil Sodium
Clolar	Foscavir	Natrecor	Trientine
Combivir	Fuzeon	Neoral	Trimetrexate Glucuronate Inj
Cytarabine	Galantamine HBr	Nesiritide	Truvada
Cytogam	Geodon	Neutrexin	Videx
Cytomegalovirus Immune Globulin Intravenous Human	Hivid	Nevirapine	Viramune
Daclizumab	Hydroflumethiazide	Norvir	Viread
Dasatinib	Inspra	Paraplatin	Vitravene
Delavirdine Mesylate	Intelence	Primacor IV	Zalcitabine
Delestrogen	Interferon alfa-2a, Recombinant	Raltegravir Tablets	Zenapax
Demadex	Invega	Razadyne (formerly Reminyl)	Zerit
Didanosine Delayed-Release Capsules - Enteric-Coated Beadlets	Invirase	Razadyne ER	Zidovudine
Didanosine Pediatric Powder for Oral Solution	Isentress	Remodulin	
Diucardin	Kaletra Capsules	Rescriptor	
Donepezil Hydrochloride	Kaletra Tablets	Retrovir	
Efavirenz	Lamivudine	Revatio	
Eligard	Lamivudine, Zidovudine	Ritonavir Capsules, Oral Solution	
Emtricitabine	Leukine	Rivastigmine Tartrate	
	Leuprolide Acetate		
	Leustatin		

Rate Charts

Annual Premium Rates per \$1,000				
AdvantageWL				
Issue Age	MALE/UNISEX		FEMALE	
	Non-smoker	Smoker	Non-smoker	Smoker
0	7.00	N/A	6.45	N/A
1	7.04	N/A	6.50	N/A
2	7.08	N/A	6.55	N/A
3	7.12	N/A	6.60	N/A
4	7.16	N/A	6.65	N/A
5	7.20	N/A	6.70	N/A
6	7.33	N/A	6.81	N/A
7	7.46	N/A	6.92	N/A
8	7.59	N/A	7.03	N/A
9	7.72	N/A	7.14	N/A
10	7.85	N/A	7.25	N/A
11	8.05	N/A	7.38	N/A
12	8.25	N/A	7.51	N/A
13	8.45	N/A	7.64	N/A
14	8.65	N/A	7.77	N/A
15	8.85	N/A	7.90	N/A
16	9.08	N/A	8.12	N/A
17	9.31	N/A	8.34	N/A
18	9.54	11.34	8.56	9.66
19	9.77	11.67	8.78	10.08
20	10.00	12.00	9.00	10.50
21	10.25	12.35	9.20	10.80
22	10.50	12.70	9.40	11.10
23	10.75	13.05	9.60	11.40
24	11.00	13.40	9.80	11.70
25	11.25	13.75	10.00	12.00
26	11.53	14.13	10.27	12.38
27	11.81	14.51	10.54	12.76
28	12.09	14.89	10.81	13.14
29	12.37	15.27	11.08	13.52
30	12.65	15.65	11.35	13.90
31	13.07	16.22	11.70	14.42
32	13.49	16.79	12.05	14.94
33	13.91	17.36	12.40	15.46
34	14.33	17.93	12.75	15.98
35	14.75	18.50	13.10	16.50
36	15.20	19.20	13.48	17.10
37	15.65	19.90	13.86	17.70

*Unisex rates for Montana only.
Add \$40 policy fee.*

Annual Premium Rates per \$1,000				
AdvantageWL				
Issue Age	MALE/UNISEX		FEMALE	
	Non-smoker	Smoker	Non-smoker	Smoker
38	16.10	20.60	14.24	18.30
39	16.55	21.30	14.62	18.90
40	17.00	22.00	15.00	19.50
41	17.75	23.10	15.60	20.40
42	18.50	24.20	16.20	21.30
43	19.25	25.30	16.80	22.20
44	20.00	26.40	17.40	23.10
45	20.75	27.50	18.00	24.00
46	21.80	28.90	18.83	25.25
47	22.85	30.30	19.66	26.50
48	23.90	31.70	20.49	27.75
49	24.95	33.10	21.32	29.00
50	26.00	34.50	22.15	30.25
51	27.60	36.80	23.37	31.60
52	29.20	39.10	24.59	32.95
53	30.80	41.40	25.81	34.30
54	32.40	43.70	27.03	35.65
55	34.00	46.00	28.25	37.00
56	36.00	48.70	29.95	38.80
57	38.00	51.40	31.65	40.60
58	40.00	54.10	33.35	42.40
59	42.00	56.80	35.05	44.20
60	44.00	59.50	36.75	46.00
61	47.05	63.60	38.80	48.40
62	50.10	67.70	40.85	50.80
63	53.15	71.80	42.90	53.20
64	56.20	75.90	44.95	55.60
65	59.25	80.00	47.00	58.00
66	64.40	87.00	49.80	61.00
67	69.55	94.00	52.60	64.00
68	74.70	101.00	55.40	67.00
69	79.85	108.00	58.20	70.00
70	85.00	115.00	61.00	73.00
71	91.60	122.20	65.80	78.00
72	98.20	129.40	70.60	83.00
73	104.80	136.60	75.40	88.00
74	111.40	143.80	80.20	93.00
75	118.00	151.00	85.00	98.00

*Unisex rates for Montana only.
Add \$40 policy fee.*

Rider Rates - Annual Rates per \$1,000

Issue Age	Waiver of Premium	Accidental Death Benefit
5-17	N/A	1.00
18	0.24	1.00
19	0.25	1.00
20	0.25	1.00
21	0.26	1.00
22	0.27	1.00
23	0.28	1.00
24	0.29	1.00
25	0.30	1.00
26	0.31	1.00
27	0.32	1.00
28	0.33	1.00
29	0.35	1.00
30	0.37	1.00
31	0.39	1.00
32	0.41	1.00
33	0.43	1.00
34	0.46	1.00
35	0.49	1.00
36	0.52	1.00
37	0.56	1.10
38	0.60	1.10
39	0.64	1.10
40	0.69	1.10
41	0.74	1.10
42	0.80	1.10
43	0.87	1.10
44	0.96	1.20
45	1.06	1.20
46	1.17	1.20
47	1.30	1.20
48	1.45	1.20
49	1.60	1.20
50	1.76	1.30
51	1.94	1.30
52	2.18	1.30
53	2.46	1.30
54	2.78	1.40
55	3.15	1.40
56	N/A	1.40
57-59	N/A	1.50
60-61	N/A	1.60
62-63	N/A	1.70
64-65	N/A	1.80

How to calculate premium:

Annual Premium Rate per \$1,000	\$ _____
Number of 1,000's	(x) _____
Premium Amount	\$ _____
Annual Policy Fee	(+) \$ 40.00
Total Premium	\$ _____
Modal Factor	(x) _____
Modal Premium	\$ _____

Modal Factors:
Annual: 1.00
Monthly PAC: 0.095
Quarterly: 0.28
Semi-Annual 0.52



Americo Financial Life and
Annuity Insurance Company
300 W. 11th Street
Kansas City, MO 64105

About Americo

For over 100 years, Americo Life, Inc.'s family of insurance companies has been committed to providing the life insurance and annuity products you need to protect your mortgage, family, and future.¹ We listen to what you want from an insurance policy or annuity and do our best to provide a proper solution for your individual situation.

Innovative thinking and sound investment decisions have helped us build a strong financial foundation for our business. Today, Americo Financial Life and Annuity Insurance Company is the lead company in one of the largest independent, privately held insurance groups in the United States² with \$6.6 billion in assets for year-end 2017.³

¹Americo Life, Inc. is a holding company and is not responsible for the financial condition or contractual obligations of its affiliate insurance companies.

²Admitted Assets, Top Life Writers-2017, "A.M. Best Co., as of September 2017.

³Information is as of year end 2017 on a consolidated basis for Americo Financial Life and Annuity Insurance Company and the other life insurance subsidiaries of Americo Life, Inc., unless otherwise indicated. Information is prepared on the basis of generally accepted accounting principles (GAAP).

Important Information

Americo Financial Life and Annuity Insurance Company is authorized to conduct business in the District of Columbia and all states except NY and VT.

Products are underwritten by Americo Financial Life and Annuity Insurance Company (Americo), Kansas City, MO, and may vary in accordance with state laws. Some products and benefits may not be available in all states. Some riders are optional and available for an additional cost. Certain restrictions and variations apply. Consult policy and riders for all limitations and exclusions. For exact terms and conditions, please refer to the contract.

The company reserves the right to contest coverage for up to two years due to any misrepresentations in the application. If the insured, sane or insane, dies by suicide while the contract is in force and within two years (one year in Colorado, Missouri, and North Dakota) after the issue date, the proceeds payable will be limited to the sum of premiums paid, less any indebtedness. See Missouri contract for special provisions regarding suicide.

Neither Americo Financial Life and Annuity Insurance Company nor any agent representing Americo Financial Life and Annuity Insurance Company is authorized to give legal or tax advice. Please consult a qualified professional regarding the information and concepts contained in this material.

Copyright Americo Financial Life and Annuity Insurance Company 2018.