

Underwriting Guidelines

Agent Guide to basic underwriting information and requirements for American National Life Insurance Company of New York



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How to Submit a Life Application

Before Completing a Life Application Remember:

- The agent must be licensed and appointed, according to applicable state regulations, with American National Life Insurance Company of New York before writing and submitting an application.
- Applications cannot be dated prior to the agent's license appointment effective date with the company.
- Any application submitted from an agent that is not appointed with the company will be held in the Administrative Office pending compliance with state licensing appointment requirements.
- If state licensing appointment requirements are not met, the application will be incompleted.
- American National Life Insurance Company of New York is not obligated to accept any business that is not in compliance with state regulations.

What are my options for submission?

American National Life Insurance Company of New York currently accepts life applications in the following formats:

Electronic application through ExpertApp	Preferred Method! Access via the IMG website img.anicoweb.com or login to your ExpertOffice account
ExpertScan Application	Scanned life apps can be submitted through your ExpertOffice account
Paper Application (New York)	 New York Regular Mail Life New Business - New York P.O. Box 4408 Springfield, MO 65808-4408
	 New York Overnight Mail: Life New Business - New York 1949 E. Sunshine Street Springfield, MO 65899

Life Application Tips:

- The agent should examine the application thoroughly and become familiar with it before completing the information.
- All questions should be asked and all answers recorded completely and legibly, using black ink.
- Dashes, ditto marks and crosses have no legal meaning and are not valid answers.
- All boxes should be marked with Xs and not check marks. Those
 questions that do not apply should be left blank unless instructions
 are given to write "none."
- The agent has no right to change a signed application without the applicant's consent. Every alteration, erasure, correction, or addition made on the application must be initialed by the applicant.
- "White Out" is not acceptable on the application.

Business is conducted in New York by American National Life Insurance Company of New York, headquartered in Glenmont, New York.

Underwriting Requirements

The charts below illustrate the underwriting requirements for American National Life Insurance Company of New York life policies. In order to set your client's expectations properly, the charts below separate requirements by what will be ordered by the agent and what will be ordered by the home office.

Before ordering requirements listed as "Agent Orders", please check with your agency to see if they handle the order of any requirements on your behalf.

Legend:

•	Automatic requirement. Agent can order the requirements now.
A	Wait! No automatic exam is required. The agent orders the exam only at American National's direction.
•	Automatically ordered by American National
Blood/ HOS	Blood/HOS: Blood chemistry profile & urinalysis

EKG	Resting Electrocardiogram
PFS	Financial Supplement: Form ANY-4165 for NY (Business Financial Statement for Buy/Sell)
SAS	Senior Age Supplement
PFIF	Premium Funding Intent Form
MVR	Motor Vehicle Report
APS	Attending Physician Statement

TPF	Third Party Financials (The agent/agency may provide this instead of American National, if they prefer. If the agent/agency is providing, please notify us by cover letter.)
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Insured age 18-40

	Face Amount
Xpress	0 - 49,999
No automatic exams	50,000 - 99,999
	100,000 - 249,999

Agent Orders							
Blood/ HOS/ EKG PFS Paramed							

Home Office Orders							
Script Check	MVR		Traditional Inspection	APS	TPF		

Traditional Underwriting	250,000 - 500,000
	500,001 - 1,000,000
	1,000,001 - 1,500,000
	1,500,001 - 3,000,000
	3,000,001 - 5,000,000
	5,000,001 - 7,500,000
	7,500,001 and up

Insured age 41-50

misured age +1 50										
		A	gent Orde	ers			Home Of	fice Orders	;	
	Face Amount	Blood/ HOS/ Paramed	EKG	PFS	Script Check	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Xpress	0 - 49,999									
No automatic exams	50,000 - 99,999									
	100,000 - 249,999									
Traditional Underwriting	250,000 - 500,000									
iraaiiionai Unaerwriiing	500,001 - 1,000,000									
	1,000,001 - 1,500,000									
	1,500,001 - 3,000,000									
	3,000,001 - 5,000,000									
	5,000,001 - <i>7</i> ,500,000									
	7,500,001 and up									

Insured age 51-60

		A	Agent Orders					Home Of	fice Order	S						
	Face Amount	Blood/ HOS/ Paramed	EKG	PFS		Script Check	MVR	Electronic Inspection	Traditional Inspection	APS	TPF					
Xpress	0 - 49,999															
No automatic exams	50,000 - 99,999															
	100,000 - 249,999															
				-	_											
- 10 10 1	050 000 500 000				Г											
Traditional Underwriting	250,000 - 500,000															
	500,001 - 1,000,000															
	1,000,001 - 1,500,000															
	1,500,001 - 3,000,000															
	3,000,001 - 5,000,000															
	5,000,001 - 7,500,000															
	7,500,001 and up															

Insured age 61-65

		Agent Orders				Home Of	fice Order	S		
	Face Amount	Blood/ HOS/ Paramed	EKG	PFS	Script Check	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Xpress	0 - 49,999									
No automatic exams	50,000 - 99,999									
	100,000 - 249,999									
Traditional Underwriting	250,000 - 500,000									
	500,001 - 1,000,000									
	1,000,001 - 1,500,000									
	1,500,001 - 3,000,000									
	3,000,001 - 5,000,000									
	5,000,001 - 7,500,000									
	7,500,001 and up									

Insured age 66-70

		Ą	Agent Orders				Home Of	fice Order	s	
	Face Amount	Blood/ HOS/ Paramed	EKG	PFS	Script Check	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Traditional Underwriting	0-24,999									
	25,000 - 49,999	1								
	50,000 - 99,999									
	100,000 - 249,999									
	250,000 - 500,000									
	500,001 - 1,000,000									
	1,000,001 - 1,500,000									
	1,500,001 - 3,000,000									
	3,000,001 - 5,000,000									
	5,000,001 - 7,500,000									
	7,500,001 and up									

¹HOS and Paramedical Exam only

Insured age 71 & up

			Agent Orders					Home Off	ice Order	S		
	Face Amount	Blood/ HOS/ Paramed	EKG	PFS	SAS	PFIF	Script Check	MVR	Electronic Inspection	Traditional Inspection	APS	TPF
Traditional Underwriting	0-24,999											
	25,000 - 49,999	1										
	50,000 - 99,999											
	100,000 - 249,999											
	250,000 - 500,000											
	500,001 - 1,000,000											
	1,000,001 - 1,500,000											
	1,500,001 - 3,000,000											
	3,000,001 - 5,000,000											
	5,000,001 - 7,500,000											
	7,500,001 and up											

¹HOS and Paramedical Exam only

Paramedical and Inspection Services

The numbers below are national numbers provided to assist agency staff in contacting a local servicing company representative. Appointments are arranged at the local level.

	Company	Phone Number
Setting Up Examinations	APPS	1-800-635-1677
Agent to order and indicate from which company on the application's agent checklist.	EMSI	1-800-872-3674
	ExamOne	1-800-768-2056
	IMS	1-877-808-5533
Inspections \$1,000,001 & Over Underwriting to order unless the agent indicates	First Financial Underwriting Services	1-800-570-3477
otherwise on the application's agent checklist.	EMSI	1-800-338-5629 1-800-753-0283 (Fax)
	ExamOne	1-800-768-2056

Important Information

- 1. An exam by an applicant's personal physician is usually unacceptable.
- 2. Medical requirements will not be waived if the amount is reduced after the application is submitted.
- 3. An application written in excess of \$500,000 must be written C.O.D. Any policy that will be Table 4 or over should also be C.O.D.
- 4. HIV consent form should be collected by the agent at the time of application, and submitted to the Administrative Office if required by state.
- 5. CWA Refund Checks: When a file is incomplete, declined, or postponed, the refund check may not be returned to American National for reversal. These checks may not be applied as CWA on a rewritten or reopened case. A new remittance must be obtained from the applicant in such cases so that no basis is established that would make the company liable for risks it has previously rejected. Refund checks for declined and postponed cases (CWA) will be returned directly to the client.

American National Life Insurance Company of New York reserves the right to order any requirement it deems necessary for sound underwriting practice. To obtain a copy of an abnormal blood profile and/or information from an APS on rated, declined or postponed cases, write to the address below. (This written request must be over applicant/insured's signature and contain the name and address of the doctor whose records are in question.)

John F. White, M. D.

Medical Director American National Life Insurance Company of New York PO Box 1720, Galveston, Texas 77553

Underwriting Requirements Shelf Life

Ages up to 65 (Standard Risks or Better)

Medical Exams, labs, EKG's, and MVR's are good for 12 months on Standard risks or better. Underwriting reserves the right to order "for cause" requirements. After 6 months, a new non-medical application with completed medical questions will be required. The company will also order a new prescription check and MIB after 6 months.

Ages up to 65(Substandard Risks)

Medical Exams, labs, EKGs, and MVR's are good for 6 months. Underwriting reserves right to order "for cause" requirements. A newly completed application or Good Health Statement may be required.

Ages 66-75

Medical Exams, labs, EKG's and MVR's are good for 6 months. Underwriting reserves right to order "for cause" requirements. A Good Health Statement and updated prescription check will be required upon delivery if exam or fully completed application is over 3 months old.

Ages 76+

Medical Exams, labs, EKG's, and MVR's are good for 3 months. May allow up to 4 months if there has been a complete physical in the medical records in the past 3 months. Underwriting reserves right to order "for cause" requirements. Updated prescription checks and Good Health Statements may also be required.

Preferred Risk Underwriting

Available on Designated Plans Only

Preferred risk contracts are designed and priced to produce better mortality results than can be expected from an average block of business. In other words, to support pricing assumptions, preferred lives must be better than standard lives.

		Preferred Criteria Ages 0 - 60			Preferred Criteria Ages 61 +			
Item	Preferred Plus	Preferred	Standard Plus	Preferred Plus	Preferred	Standard Plus		
Cholesterol	300	300	300	300	300	300		
Ratio	4.5	5.5	6.0	5.0	5.5	6.0		
				Untreated cholesterol of <130 will not be eligible for Standard Plus, Preferred, or Preferred Plus				
Non-Nicotine User	5 Years	3 Years	2 Years	5 Years	3 Years	2 Years		
	Cigar or smokeless tol	pacco use of no more tha	n 2 per month and ne	egative HOS				
Blood Pressure	No Rx	Rx/UN	Rx/UN	No Rx	Rx/UN	Rx/UN		
to age 60	135/80	140/90	150/90	140/85	150/90	155/95		
Family History	No death or occurrence CAD, CVA or Familial Cancers (breast, colon, lung, ovarian, prostate or melanoma) in parents or siblings prior to age 65	No death from CAD, CVA, or Familial Cancers (breast, colon, lung, ovarian, prostate or melanoma) in parents or siblings prior to age 60	No death from CAD or CVA in parents or siblings prior to age 60	Not considered at ages 71 & up. Ages 61-70: See family history rules for ages 60 and				
Weight	According to Build Tak	According to Build Table						
Driving	No DUI/DWI or reckless driving for 5 years. No moving violations >2 in 5 years	No DUI/DWI or reckless driving for 5 years. No moving violations >2 in 3 years	No DUI/DWI for 5 years and not ratable for driving history.	No DUI/DWI or reckless driving for 5 years. No moving violations >2 in 5 years	No DUI/DWI or reckless driving for 5 years. No moving violations >2 in 3 years	No DUI/DWI for 5 years.		
Aviation		s table below. Preferred or all rate classes for age		or ages 71+ (Stando	ırd or Substandard C	Only). An aviation		
Residency	3 years in the U.S. M	ust be a U.S. or Canadic	ın Citizen or permane	nt resident. 2 years f	or Standard Plus.			
Travel		countries, or countries w e, there may be times a p			nificant risk, may be	rated or declined.		
Personal Medical History	preferred risk by the u	heart disease, cancer, d nderwriting department. ble for diabetes in certain o			b or exam results de	emed as a non-		
Recreational Marijuana		is the best rate possible i			as been no use of nic	cotine in the past		
Alcohol & Drug Use	No alcohol or drug at	ouse in the past 10 years						
Risk Classifier		ined using Risk Classifier from public records and		erance will be limited	d to standard. Risk C	lassifier utilized		
Minimum Build				BMI must be greate Plus, Pref. or Pref. I	er than 18.5 to be co Plus	onsidered Std.		
Serum Albumin				4.0 or greater	4.0 or greater	4.0 or greater		
eGFR				60+ 60+ 60+				
Cognitive/Functional				No indications of o	ognitive impairment	or inability to		

Private Aviation Ratings

	Table Cale Harris	Expected Annual Flying Hours							
	Total Solo Hours	0-200	201-300	301-600	601+				
	<100	\$3.50 x 5	\$3.50 per M	\$5.00 per M	\$5.00 per M				
Qualified Pilots (age 27 - 64)	100-399	Standard ²	\$2.50 per M ¹	\$5.00 per M ¹	\$5.00 per M ¹				
	>/= 400	Standard ²	Standard ²	\$2.50 per M¹	\$5.00 per M ¹				
	<100	\$3.50 x 5	\$5.00 per M	\$5.00 per M	\$5.00 per M				
Qualified Pilots (age 16 - 26)	100-399	\$2.50 x 5	\$3.50 per M	\$5.00 per M	\$5.00 per M				
, ,	>/= 400	\$2.50 x 5 ¹	\$2.50 per M¹	\$5.00 per M¹	\$5.00 per M ¹				

¹If pilot has IFR, reduce flat-extra by \$1.00

Other Considerations:

- Pilots age 65 and over: Individual Consideration
- Commercial Pilots flying in North America can be considered for Preferred Plus rates.

²Preferred if meets all other preferred criteria

Build Table

Preferred Plus							
Hei	ight	We	ight				
Feet	Inches	Low	High				
5	0	95	146				
5	1	98	151				
5	2	101	156				
5	3	105	162				
5	4	108	167				
5	5	111	172				
5	6	115	177				
5	7	118	182				
5	8	122	188				
5	9	125	193				
5	10	129	199				
5	11	133	205				
6	0	136	211				
6	1	140	217				
6	2	144	222				
6	3	148	229				
6	4	152	234				
6	5	156	241				
6	6	160	247				
6	7	164	253				
6	8	168	260				
6	9	172	266				

Preferred							
Hei	ight	We	ight				
Feet	Inches	Low	High				
5	0	95	159				
5	1	98	165				
5	2	101	1 <i>7</i> 0				
5	3	105	1 <i>7</i> 6				
5	4	108	181				
5	5	111	187				
5	6	115	193				
5	7	118	198				
5	8	122	204				
5	9	125	210				
5	10	129	217				
5	11	133	223				
6	0	136	229				
6	1	140	235				
6	2	144	242				
6	3	148	247				
6	4	152	255				
6	5	156	262				
6	6	160	269				
6	7	164	276				
6	8	168	283				
6	9	172	290				

Standard Plus							
Hei	ght	We	ight				
Feet	Inches	Low	High				
5	0	95	169				
5	1	98	175				
5	2	101	181				
5	3	105	18 <i>7</i>				
5	4	108	193				
5	5	111	199				
5	6	115	205				
5	7	118	211				
5	8	122	218				
5	9	125	224				
5	10	129	230				
5	11	133	237				
6	0	136	244				
6	1	140	251				
6	2	144	258				
6	3	148	265				
6	4	152	272				
6	5	156	279				
6	6	160	286				
6	7	164	293				
6	8	168	301				
6	9	172	308				

Non-Preferred Build Table

Height	Std	T2	Т3	T4	T5	T6	T8	Decline
4'8"	83-149	168-173	174-180	181-189	190-194	195-202	203-207	>217
4'9"	86-154	174-180	181-187	188-196	197-201	202-210	211-214	>225
4'10"	89-160	180-186	187-193	194-203	204-208	209-217	218-222	>233
4'11"	92-165	186-193	194-200	201-210	211-215	216-225	226-230	>241
5′0″	95-171	193-199	200-207	208-217	218-222	223-232	233-238	>249
5′1″	98-177	199-206	207-214	215-224	225-230	231-240	241-246	>257
5′2″	102-183	206-213	214-221	222-232	233-237	238-248	249-254	>266
5′3″	105-189	212-220	221-228	229-239	240-245	246-256	257-262	>274
5′4″	108-195	219-227	228-235	236-247	248-253	254-265	266-270	>283
5′5″	112-201	226-234	235-243	244-255	256-261	262-273	274-279	>292
5′6″	115-207	233-241	242-250	251-263	264-269	270-281	282-288	>301
5′7″	119-213	240-249	250-258	259-271	272-277	278-290	291-296	>310
5′8″	122-220	247-256	257-266	267-279	280-286	287-299	300-305	>319
5′9″	126-226	254-264	265-274	275-287	288-294	295-308	309-314	>329
5′10″	129-233	262-271	272-282	283-296	297-303	304-317	318-324	>339
5′11″	133-240	269-279	280-290	291-304	305-311	312-326	327-333	>348
6′0″	137-247	277-287	288-298	299-313	314-320	321-335	336-342	>358
6′1″	141-253	285-295	296-306	307-322	323-329	330-344	345-352	>368
6′2″	145-260	293-303	304-315	316-331	332-338	339-354	355-362	>378
6′3″	149-268	301-312	313-324	325-340	341-348	349-364	365-372	>389
6′4″	152-275	309-320	321-332	333-349	350-357	358-373	374-382	>399
6′5″	157-282	317-328	329-341	342-358	359-366	367-383	384-392	>409
6′6″	161-289	325-337	338-350	351-367	368-376	377-393	394-402	>420
6′7″	165-297	333-346	347-359	360-377	378-386	387-403	404-412	>431
6′8″	169-304	342-355	356-368	369-386	387-395	396-414	415-423	>442
6′9″	173-312	350-363	364-377	378-396	397-405	406-424	425-433	>453

Financial Underwriting Guidelines: Personal Coverage - Income Replacement and Estate Preservation

Earned Income Replacement Table

Age	Income Factor
18-40	20-30 x
41-50	15-20 x
51-60	10-15 x
61-65	8 x
>65	5 x

Estate Preservation Calculation (Ages below 70)

- 1. Assess value of net worth.
- 2. Apply reasonable factors for growth and years compounding to determine future value. See "Growth Rates and Years Projected for Estate Preservation" below.
- 3. Multiply future value by 40% (estate tax rate) = Total amount needed for estate preservation. Subtract any personal life insurance coverage not being replaced.

Estate Preservation Calculation (Ages 70+)

Same formula as "Ages below 70" as listed above, except subtract \$5,000,000 exemption.

Growth Rates and Years Projected for Estate Preservation

Use higher annual growth rates when asset allocation/situation indicates that higher rates of return could be reasonably expected:

Age	Years Projected	Annual Growth Rate
50 & Under	20 years	6% (10% max)
51-65	15 years	4% (8% max)
66-70	10 years	3% (6% max)
71+	7 years (If life expectancy is less, use life expectancy)	3% (5% max)

Special Financial Requirements: Personal Coverage - Income Replacement and Estate Preservation

	PFS Personal Financial Statement (Form Series 4165/ANY- 4165 for NY)	EIR Electronic Inspection Report (Ordered by Home Office Only)	IR Traditional Phone Inspection	TPF Third Party Financials
Ages Under 66	>\$3,000,000	\$1,000,001 - \$5,000,000	>\$5,000,000	>\$5,000,000
Ages 66-70	>\$1,000,000	\$1,000,001 - \$3,000,000	>\$3,000,000	>\$3,000,000
Ages 71+	>\$500,000	N/A	>\$500,000	>\$1,000,000

Notes:

For amounts requiring third party financials, the inspection company will attempt to obtain this information from client's CPA. If the agent, or client, prefers to obtain this information instead of the inspection company, please provide at time of application.

Acceptable 3rd Party Financials:

- Tax returns from past 2 years.
- W-2s from past 2 years.
- Personal Financial Statement outlining income and signed by CPA (credentials will be confirmed)

For Estate Preservation cases, net worth may need to be confirmed if the income doesn't justify total line of coverage. In these situations, net worth can be confirmed by the following sources:

- Personal Financial Statement documenting net worth and income signed by CPA (credentials will be confirmed).
- Personal Financial Statement signed by proposed insured with supporting documentation: Bank Statements, Tax Returns, Property Tax Assessment or Appraisal, Brokerage statements.

Premium to	Gross Income:	% of income available for Life Insurance Premium	
Income Ratio	<\$50,000	Up to 10%	
	\$50,001-75,000	10-15%	
	\$75,001-100,000	15-20%	
	>\$100,000	20-25%	
Non-Income Earning Spouses	 Allow up to 100% of insurance in force on the employed spouse up to \$1,000,000 if no dependent children (and up to \$2,000,000 if there are dependent children) as long as household income justifies the amount on the wage earning spouse. Amounts exceeding these guidelines would need a detailed cover letter explaining reason for face amount (estate planning needs, for example). 		
Personal Loans	Term of loan must be 5 years or more.		
• Generally up a maximum of 75% of the loan.			
	, ,		
	Loans between individuals will typically not be consid	erea.	
Juvenile	Siblings must be equally covered.		
• For amounts of \$500,000+, parents should have at least twice the amount of life insurce \$499,999, will allow at least equal amount of coverage on parents.			
	Amounts of \$500,000+ require facultative reinsurance	e.	
	Note: States of New York and Washington have further		
Charitable Coverage	• Multiply amount of annual giving by 10 for typical maximum face amount (average amount from the past 3 years x 10).		
	Should have adequate personal coverage already in	force.	
	Cover letter explaining how face amount determined.		
	• For amounts over \$250,000 will require documentation \$250,000.	on of prior giving. Underwriter discretion below	

Special Financial Requirements: Business Coverage

When a Business is listed as the owner of a contract, the Employer Owned Life Insurance form (10244) will be required.

The following will be r	equirements, based on the face amount that is requested:
Amounts up to \$1,000,000	Business Financial Questionnaire (BFQ) provided by agent.
\$1,000,000 - \$3,000,000	 Business Financial Questionnaire (BFQ) provided by agent. Electronic Inspection Report (EIR) to be ordered by home office.
Amounts Over \$3,000,000	 Business Financial Questionnaire (BFQ) provided by agent. Inspection Report with Business Beneficiary Report (BBR) to include 3rd party business financials from the past 2 years (preferably balance and income statements). Home office will order. If the inspection does not include 3rd party financials, the underwriter will request this documentation from agent. Note: If the agent prefers to provide business financials, please advise in cover letter. For Key Person coverage, Inspection report will verify income/salary by obtaining tax returns or W-2s from the past 2 years. Note: If the agent prefers to provide tax returns or W-2s from the past 2 years, please advise in cover letter. Cover letter detailing the purpose of coverage and how the face amount was determined is strongly encouraged.

Requirements for Speci	Requirements for Special Business Situations:	
Buy/Sell	Fair Market Value of company multiplied by percent of ownership to determine maximum face amount.	
Key Person	• 10 x annual income to determine typical maximum face amount.	
Business Loan or Creditor Coverage	 Typically cover face amounts up to 75% of the loan. Terms of loan typically must be 5 years or more. Proposed Insured must be a key person. 	
New Business/ Start Up Companies	 Considered on Case-By-Case Basis. Total line of coverage not to exceed 50% of the loan or investment. Cover letter explaining amount and source of funding, experience of the owners in the field and their prior success strongly encouraged. Balance sheet and income/expense statements, pro-forma statements and business plans should be submitted with the application. 	

Retention Limits:

American National Life Insurance Company of New York

Age	Retention Limits	Maximum Table Rating
0-64	\$1,500,000	All
65-70	\$700,000	All
71-80	\$700,000	Table 8
81-85	\$700,000	Table 4

Policies issued in New York by American National Life Insurance Company of New York will be reinsured with American National Insurance Company up to American National Insurance Company's retention limits.

Autobind: The amount of insurance on a life that can be underwritten in-house without sending papers to reinsurance.

Ages	Standard – T4	T5 – T-8	T9 – T16
18-70	\$20 Million	\$20 Million	\$20 Million
71-80	\$10 Million	\$ 5 Million	No Autobind
81-85	\$ 5 Million	No Autobind	No Autobind

Jumbo Case Limit: The point at which the amount of insurance in-force and applied for with all companies on a life necessitates sending facultative to reinsurance.

Age	Limit	Rate Classes
18-85	\$50 Million	All Classes

STOLI/IOLI

It is American National Life Insurance Company of New York's policy that life insurance should only be purchased to provide protection to those with an insurable interest in the life of the insured. We will not knowingly participate in life insurance sales motivated by the possible sale of policies in a secondary market or participation of investors in policy death benefits. This includes Stranger-Owned Life Insurance (STOLI), Investor-Owned Life Insurance (IOLI), life settlements or viatication.

In order to control the issuing of policies intended for these purposes, we require that Form 4439 (ANY-4439 in NY) "Customer Identification Verification" be completed on all cases. If any of the questions on this form are answered "Yes," additional forms will need to be completed, per the instructions on the form. Form Series 10051 (ANY-10051 in NY) "Premium Funding Intent Form" will also need to be completed for all cases in which the proposed insured is age 70 or older and the face amount applied for is \$500,000 or more.

Rebating

American National Life Insurance Company of New York complies with all anti-rebate laws and expects its producers to also comply.

Underwriting Strengths

Preferred Plus	Cigar and Smokeless Tobacco User • Preferred Plus rates for occasional cigar and smokeless tobacco users. • 2 times a month or less and negative specimen.
Preferred	Sleep Apnea Individuals with this condition who are well-controlled, compliant with treatment, and have other favorable risk factors may receive preferred rates.
	Mild Situational Depression or Anxiety Mild situational depression and anxiety with favorable characteristics may receive preferred rates.
	Adult Attention Deficit Disorder Individuals with this condition who are very well controlled and do not represent any increased risk may receive preferred rates.
	Preferred Exceptions
	Our preferred guidelines require that we exclude preferred if there has been a death from breast, colon, lung, ovarian, prostate cancer, or melanoma in parents or siblings prior to the age of 60. We now allow for some exceptions for preferred:
	• Colon Cancer: Allow one family history of colon cancer death prior to age 60 for preferred rates if client has had a normal colonoscopy in the past 24 months (No adenomatous polyps or ulcerations consistent with inflammatory bowel disease). Limit to age 50+
	 Coronary Artery Disease: Allow for one family history of death from CAD before age of 60 with a negative Stress EKG with good exercise tolerance (at least 8 METS) in the past 12 months. Limit to age 50+
	 Prostate Cancer: Allow a family history of prostate cancer if current PSA is <2.0 and there has been a normal prostate exam in the past 24 months. Limit to age 50+
Standard	Prostate Cancer
Plus	Ages 70+ with low grade prostate tumor treated with surgery may receive standard plus rates with evidence of good follow-up and no other significant medical problems.
	Type 2 Diabetes
	Type 2 diabetics' ages 50+ with good control and optimal control of other risk factors (blood pressure, lipids, build) may receive Standard Plus rates on any permanent product.
Standard	Coronary Artery Disease Ages 70+ with single vessel (right coronary artery) disease and other favorable factors, may receive standard rates.
Family History	"Family history of cancer" only includes these cancers (breast, colon, lung, ovarian, prostate, and melanoma).
Obesity	Generous credits for individuals who have favorable risk factors such as optimal blood pressure readings, favorable lipids, recent favorable stress testing or an EBCT.

Scenarios listed in the Underwriting Strengths section reflect the best possible case and individuals with such conditions are not guaranteed rates listed.

General Reinstatement Procedures

Applying for Reinstatement:

Policies with original face amounts between \$1 and \$500,000:

- 1. Call customer service at 1-800-899-6806 to obtain the calculated reinstatement premium amount.
- 2. Have the client complete a reinstatement form. This form varies by state and is available at www. img.anicoweb.com.
- 3. Submit reinstatement form and premium to American National Life Insurance Company of New York
- 4. American National Life Insurance Company of New York's Underwriting team will review the application, if additional requirements are needed, they will be ordered at this time. Note: Premium will be returned to the client if any pending requirements are not received within 30 days of request.
- 5. Once a reinstatement decision has been made, American National Life Insurance Company of New York will send a letter of either acceptance or decline to the client and the agent.
- 6. If American National Life Insurance Company of New York does not receive enough premium to reinstate, a letter will be sent to the client (with an email to the agent). At that point, the client has 30 days to send the difference of premium. Note: If premium is NOT received in 30 days, the file is closed and the client will have to restart the reinstatement process.

Policies with original face amounts of \$500,001 or higher:

- 1. Do NOT submit a premium with application.
- 2. Have the client complete a reinstatement form. This form varies by state and is available at www. img.anicoweb.com
- 3. Submit the reinstatement form to American National Life Insurance Company of New York
- 4. American National Life Insurance Company of New York's Underwriting team will review the application, if additional requirements are needed, they will be ordered at this time. The file will be closed if any pending requirements are not received within 30 days of request.
- 5. If the reinstatement is approved, American National Life Insurance Company of New York will overnight a request for premium to the client (and email the agent) along with a modification application, which must be signed. If the reinstatement is declined, American National will send a letter informing the client and the agent.
- 6. The signed modification application and premium must be received by American National Life Insurance Company of New York within 30 days of the date the overnight envelope was delivered to the client. Note: If the premium and application are NOT received in 30 days, the client will have to complete a declaration of insurability and the premium may need to be adjusted for additional underwriting.
- 7. If complete application and correct premium is received, American National Life Insurance Company of New York will send a letter of acceptance to the client and the agent.

Where to send Reinstatement Form and/or Premium:

Mail	Overnight	Fax
American National Life Insurance Company of New York PO Box 3257 Springfield MO, 65808	American National Life Insurance Company of New York 1949 E. Sunshine Street Springfield MO, 65899	409-621-7505

Service Turnaround and Expectations:

Policies with original face amounts between \$1 and \$500,000

If the policy has been lapsed for LESS THAN ONE YEAR and the insured has not had a significant change in health:

- In Good Order: Typically, one week from the time the application is received to the acceptance/approval letter being mailed.
- Not In Good Order: The typical reinstatement depends on the response time from agent/client to receive the
 outstanding requirements. Average turnaround time is less than two weeks to complete the reinstatement process.

Policies with original face amounts of \$500,001 or higher:

If the policy has been lapsed for LESS THAN SIX MONTHS:

- In Good Order: Typically, three weeks from the time the application is received to the acceptance/approval letter being mailed.
- **Not In Good Order:** The typical reinstatement depends on the response time from agent/client to receive the outstanding requirements. Average turnaround time is approximately four weeks to complete the reinstatement process.

If the policy has been lapsed for MORE THAN SIX MONTHS:

This situation involves the same process, underwriting time frames, as it would for newly submitted life
insurance cases. The underwriting process could take up to a total of two to three weeks to order, receive,
and analyze questionnaires and medical records to render a decision. Then, there are the additional days
it takes to receive the reinstatement premiums and modification application back from the client. Average
turnaround is typically a month to perform the entire reinstatement process.

Underwriting Requirements: (Underwriter reserves the right to order requirements based on individual situations)

Length of Lapse	Amount of Insurance	Underwriting Requirements (Bold must be ordered by the agent)
	Up to \$100,000	Reinstatement Application
90 Days or Less	\$100,001 - \$1,000,000	Reinstatement Application, MIB
	\$1,000,000 +	Reinstatement Application, MIB, Scriptcheck
01 to 100 days	Up to \$1,000,000	Reinstatement Application, MIB, Scriptcheck
91 to 180 days	\$1,000,000 +	Reinstatement Application, MIB, Exam, Urine, Blood Profile, Scriptcheck
	Up to \$500,000	Reinstatement Application, MIB, Scriptcheck
181 to 365 days	\$500,001 to \$1,000,000	Reinstatement Application, MIB, Blood, Urine, Physical Measurements
	\$1,000,001 +	Reinstatement Application, MIB, Exam, Urine, Blood Profile, Scriptcheck
	Up to \$250,000	Reinstatement Application, MIB, Scriptcheck
365 days+	\$250,001 to \$1,000,000	Reinstatement Application, MIB, Scriptcheck, Blood, Urine, Exam
	\$1,000,0001 and up	Reinstatement Application, MIB, Scriptcheck, Blood, Urine, Exam

Other Underwriting Expectations:

Attending Physician Statements	Normal new business age/amount requirements will be followed. APS may also be ordered at underwriter discretion.
Financial Requirements	If it is determined there is a MAJOR discrepancy between the original financials and the financials provided on the Application for Reinstatement, it will be at the underwriter's discretion if additional financial documents are required.

Impairment Guide

	Impairment (Alphabetical)	Rating
A	Acromegaly	Table 4-8
	Addison's disease	Standard -Table 3
	ADD/ADHD	Standard -Table 2
	AIDS or ARC	Decline
	Alcohol treatment then 2 years sobriety	Standard – Table 8
	Alpha1 Antitrypsin Def (no meds, good pulmonary, favorable A1P, NS)	Standard
	Alzheimer's disease	Decline
	Amyloidosis	Standard – Decline
	Amyotrophic lateral sclerosis	Decline
	Anemia	Standard – Decline
	Aortic aneurysm	Table 2 – Decline
	Angina	Standard – Decline
	Angioedema	Standard
	Ankylosing spondylitis	Standard – Table 4
	Anorexia nervosa	Standard – Decline
	Anxiety	Standard – Table 2
	Aortic insufficiency	Standard – Table 8
	Arteriosclerosis obliterans	Table 4 – Decline
	Arteriovenous malformations	Standard – Decline
	Arthritis – osteoarthritis	Standard
	Arthritis – rheumatoid or psoriatic	Standard – Table 6
	Asbestosis	Standard – Decline
	Ascites	Decline
	Asthma	Standard – Table 4
	Atrial fibrillation or flutter	Table 2 – Decline
	Atrial septal defect	Standard – Decline
	Atrioventricular block 1st and 2nd degree	Standard – Table 2
	Atrioventricular block 3rd degree – complete	Table 4 – Decline
B	Barlow's syndrome	Standard – Table 2
	Basal cell carcinoma	Standard
	Bells palsy	Standard
	Benign prostate hypertrophy	Standard
	Berger's disease	Table 2-8
	Bicuspid aortic valve	Standard – Table 8
	Bigeminy	Standard – Table 8
	Bipolar mental illness	Table 2 – 8

	Impairment (Alphabetical)	Rating
	Bright's disease	Standard – Decline
	Bronchiectasis	Table 3 – Decline
	Bronchitis chronic	Table 4 – Decline
	Buerger's disease	Standard – Table 4
	Bundle branch block – hemiblock or right	Standard – Table 2
	Bundle branch block – left	Table 4 – Decline
C	Cancer – two years after treatment, no metastases, no recurrence	Standard – Decline
	Cardiomyopathy	Decline
	Carotid bruit	Standard – Table 3
	Celiac disease	Standard – Table 4
	Cerebral palsy – gainfully employed & no assistance in walking	Standard – Table 3
	Cerebrovascular accident	Table 4 – Decline
	Charcot Marie Tooth disease	Standard – Decline
	Cholecystitis - recovered	Standard
	Cholelithiasis – no symptoms	Standard
	Christmas disease (Factor IX deficiency)	Table 2-8
	Chronic Fatigue Syndrome	Standard – Table 2
	Chronic obstructive pulmonary disease (COPD)	Table 4 – Decline
	Chronic pain – regular narcotic use	Table 4 – Decline
	Chronic renal insufficiency /failure	Decline
	Cirrhosis	Decline
	Cocaine use – no use in past 3 years	Standard – Decline
	Colitis – not ulcerative & full recovery	Standard
	Colon polyp(s) – benign	Standard
	Congestive Heart Failure	Decline
	Cor Pulmonale	Decline
	Coronary artery disease – bypass or stent	Table 2 – Decline
	Costochondritis	Standard
	Crohn's disease	Table 2 -8
	Cushing's syndrome	Standard – Table 4
	Cystic fibrosis	Decline
	Cystitis	Standard
D	Deep Venous Thrombosis (two months after recovery)	Standard
	Dementia	Decline
	Depression	Standard – Table 8

	Impairment (Alphabetical)	Rating
	Diabetes – NS – dx <5 years – age <50	Table 3 – 8
	Diabetes – NS – dx <5 years – age >50	Standard – Table 4
	Diabetes – NS – dx >5 years – age <50	Table 4 – Decline
	Diabetes – NS – dx >5 years – age >50	Table 2 – 6
	Dialysis	Decline
	Discoid lupus (more than one year after clear diagnosis)	Standard
	Diverticulitis/Diverticulosis – recovered	Standard
	Down's syndrome	Decline
	Drug abuse or addiction – no drug use in 3 years	Standard – Table 8
Ξ	Eclampsia – recovered	Standard
	Emphysema	Table 4 – Decline
	Encephalitis – recovery no residuals	Standard
	Endocarditis – recovered no residuals	Standard
	Epilepsy	Standard – Decline
	Erythema nodosum – recovered	Standard
	Esophageal varices	Decline
F	Factor VII or IX Deficiency	Table 2 – Decline
	Fibrocystic breast disease	Standard
	Fibromyalgia	Standard
	Fibromuscular Dysplasia (treated after 6 months)	Standard – Table 2
G	Gastric bypass - one year after surgery	Standard – Table 3
	GERD	Standard
	Gestational diabetes – not currently pregnant and normal labs	Standard
	Gilbert's syndrome	Standard
	Glomerulonephritis	Table 4 – Decline
	Graves' disease – controlled	Standard
	Guillain – Barre syndrome- recovered no residuals	Standard
H	Hashimoto's disease – controlled	Standard
	Heart attack	Table 4 – Decline
	Hemochromatosis – six months after dx well controlled	Standard – Table 4
	Hemophilia	Table 2 – Decline
	Hematemesis (unresolved or unexplained)	Decline
	Hematochezia (fully investigated and benign)	Standard

	Impairment (Alphabetical)	Rating
	Hematuria (resolved or no genitourinary disease)	Standard
	Hemoptysis (unresolved or unexplained)	Decline
	Hepatitis A – recovered	Standard
	Hepatitis B – no acute symptoms	Standard – Table 8
	Hepatitis C – no acute symptoms	Table 2 – Decline
	Hirschsprung's disease – surgically corrected	Standard
	Histoplasmosis	Standard – Table 2
	HIV	Individual Consideration
	Hodgkin's disease – postpone 1 to 5 years depending on Stage	Table 2 – Decline
	Huntington's chorea	Decline
	Hydrocephalus	Table 2-8
	Hyperglycemia – medically monitored and not diabetes	Standard
	Hyperlipidemia – controlled	Standard
	Hypertension – controlled	Standard
	Hyperthyroidism or hypothyroidism	Standard
	Hypoglycemia	Standard
	Idiopathic Hypertrophic Sub Aortic Stenosis	Table 4 – Decline
	lleitis	Standard – Table 8
	Intermittent claudication	Table – Decline
	Irritable Bowel Syndrome	Standard
	Inflammatory Bowel Disease	Table 2 – Table 8
K	Kaposi's sarcoma	Decline
	Kidney stones	Standard
L	Labyrinthitis	Standard
	Left Anterior Hemiblock	Standard
	Left Posterior Hemiblock	Standard
	Legionnaire's Disease (full recovery)	Standard
	Leukemia (five years after end of treatment)	Table 4 – Decline
	Lyme Disease (full recovery)	Standard
	Lymphoma – postpone 1 to 5 years depending on stage	Table 4 – Decline
M	Mallory-Weiss Syndrome (currently under treatment)	Decline
	Marfan's Syndrome (no cardiac or vascular impairments)	Table 2-Table 8
	Marijuana Use (infrequent and no criminal record)	Standard NU – Table 4 NU

	Impairment (Alphabetical)	Rating
	Melanoma (complete excision and established pathology)	Standard – Decline
	Melena (unresolved or unexplained)	Decline
	Meniere's Disease (controlled or resolved)	Standard
	Meningitis (fully recovered without complications)	Standard
	Migraines (fully evaluated)	Standard
	Mitral insufficiency or regurgitation	Standard – Decline
	Mitral Valve Prolapse	Standard
	Monoclonal Gammopathy or MGUS (after 2 years stable labs)	Table 2 – Table 4
	Mononucleosis (recovered)	Standard
	Motor Neuron Disease	Decline
	Multiple Sclerosis	Table 2 – Decline
	Muscular Dystrophy	Standard – Decline
	Myasthenia Gravis	Standard – Decline
	Myelofibrosis	Decline
	Myeloma	Decline
	Myeloproliferative Disorders	Table 2 – Decline
	Myocardial Bridging (asymptomatic)	Standard
	Myocardial Infarction	Table 4 – Decline
	Myocarditis (single incident, one year full recovery)	Standard
	Myositis (chronic or progressive)	Decline
N	Narcolepsy	Standard – Table 4
	Nephritis	Standard – Decline
	Neuritis	Standard – Table 2
	Neuropathy	Standard – Table 4
0	Organic Brain Syndrome	Decline
	Osteomyelitis (chronic stable, not progressive)	Table 2-Table 4
	Osteoporosis	Standard
P	Pacemaker	Table 2 – Decline
	Paget's Disease of Bone (not progressive)	Standard
	Palpitations (normal cardiac workup)	Standard
	Pancreatitis (chronic or recurrent)	Decline
	Paraplegia	Table 6 – Decline
	Parkinson's Disease	Table 2 – Decline
	Patent Ductus Arteriosus (surgically corrected)	Standard

	Impairment (Alphabetical)	Rating
	Pericarditis (full recovery)	Standard
	Peripheral Vascular Disease (non- smoker)	Standard – Table 4
	Phlebitis (full recovery)	Standard
	Plasma Cell Disorder (2 years after diagnosis, stable labs)	Table 2 – Decline
	Poliomyelitis (stable no wheelchair)	Standard – Table 3
	Polycystic Kidney Disease	Table 2 – Decline
	Polycythemia (diagnosed two years, stable CBC)	Table 2 – Table 6
	Polymyositis	Standard – Decline
	Polyp (benign pathology)	Standard
	Post-Polio Syndrome (stable no wheelchair)	Standard - Table 3
	Post-Traumatic Stress Disorder	Standard – Table 6
	Prostatitis (treated)	Standard
	Proteinuria	Standard – Decline
	Psoriasis	Standard
	Psoriatic Arthritis	Standard – Table 6
	Pulmonary Embolism (after 6 months full recovery)	Standard – Table 4
	Pulmonary Hypertension	Decline
	Pyelonephritis (full recovery)	Standard
Q	Quadriplegia	Decline
R	Regional Enteritis	Table 2 – Table 8
	Renal Artery Stenosis (6 months after treatment, no HTN)	Standard – Table 3
	Renal Dialysis	Decline
	Renal Insufficiency / Failure	Decline
	Renal Transplant	Decline
	Restless Leg Syndrome	Standard
	Right Bundle Branch Block	Standard
	Rheumatic Fever (full recovery no cardiac residuals)	Standard
	Rheumatoid Arthritis	Standard – Table 6
5	Sarcoidosis (lungs/skin only and remission 6 months)	Standard
	Schizophrenia	Decline
	Scleroderma (skin only, two years after diagnosis)	
	Sclerosing Cholangitis	Decline
	Sickle Cell Disease (normal CBC, no hospitalizations past 5 years)	Table 3 – Decline

	Impairment (Alphabetical)	Rating
	Sickle cell trait	Standard
	Sjogren's Syndrome	Standard
	Sleep apnea (treated)	Standard – Table 3
	Spina Bifida (asymptomatic)	Standard
	Spina Bifida (symptomatic)	Table 4 – Decline
	Stroke (after first year)	Table 4 – Decline
	Suicide attempt (after first year)	Flat extra \$5/M
	Suicide attempts (two years after last)	Table 4 – Decline
	Systemic Lupus Erythematosus	Table 2 -Table 8
T	Tachycardia (cardiac workup neg)	Standard – Table 2
	Transient Ischemic Attack (after six months)	Table 3 -Table 6
	Tremor (negative neurological evaluation)	Standard
U	Ulcerative Colitis	Table 2 - Table 8
V	Varicose veins	Standard
	Vertigo (after neurological evaluation)	Standard
	Ventricular Septal Defect (no surgery needed)	Standard – Table 4
W	Wolff-Parkinson-White (WPW)	Standard
X	Xeroderma Pigmentosum	Decline

The American National Story

Chartered on March 17, 1905 by American National Insurance Company's founder, W. L. Moody Jr., began operations with \$100,000 of capital and \$20,000 surplus. Following a conservative investment philosophy, Mr. Moody believed that profits should finance future growth, so American National did not pay dividends to investors in those early years. Mr. Moody envisioned a company that would flourish for centuries. His conservative business approach created a unique corporate culture that remains the heart of the company today.

American National Life Insurance Company of New York, a wholly-owned subsidiary of American National Insurance Company, was incorporated under the laws of New York in October 2009 and is only licensed to business in New York.

This culture has helped American National persevere through wars, hurricanes, economic volatility, extraordinary technological advancements, evolving products, and the changing needs of contract holders and agents. American National remains financially strong and will continue to manage its business respecting the conservative principles of its founder, driven by its corporate vision to be a leading provider of financial services for current and future generations.

Life New Business Quick Reference

Electronic application through ExpertApp	Preferred Method! Access via the IMG website or login to your ExpertOffice account
Paper Application	Paper applications can be mailed to:
	 New York Regular Mail Life New Business - New York P.O. Box 4408 Springfield, MO 65808-4408
	 New York Overnight Mail: Life New Business - New York 1949 E. Sunshine Street Springfield, MO 65899
Pending Life Application Status	• 866-490-3163 (New York)
Life New Business Case Managers	Email: IMGteam@americannational.comPhone: 1-800-773-0924Fax: 1-888-237-1012
Underwriting Contacts	• Phone: 1-800-773-0924 • Fax: 1-888-237-1012
IMG Contacts	 For Quotes/Illustrations: Field Support Center 1-888-501-4043 Website: img.anicoweb.com
Quick Quotes (For a quick life underwriting assessment)	Email: IMGQuickQuotes@AmericanNational.com Please send a summary only. No attachments.

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