

Top Ten Questions a Field Underwriter Should Ask

The following questions were designed to help obtain applicable health information from your client. After you have gone through these questions with your client, you can call the Pre-Screening Line @ 800-228-5964 to review responses and obtain guidance regarding insurability. Certain medical conditions, combinations of conditions, or medications used should raise red flags regarding a client's potential insurability.

1. Are you currently being treated for any medical condition? If yes, what is that condition?
2. How often do you see your doctor? When did you last see your doctor?
3. Has your doctor advised you that your condition is unstable? (An example of instability would be a response such as "My doctor has told me he/she would like to see my blood pressure lower.")
4. What medications are you currently taking? (Ask to see the bottles, and write down prescription names). Follow up by asking, why are you taking these medications?
5. Have you had any recent medication changes?
6. Do you see any specialists? If yes, for what reason?
7. Do you have any limitations in activity? How far can you walk without resting or having pain in your extremities? Do you have any difficulty climbing stairs?
8. Do you use an assistive device such as a cane, walker, etc.?
9. Have you had any recent falls? Any falls within the last two years?
10. Do you have any significant illnesses, such as cancer, heart disease, diabetes or any hospitalizations that we have not discussed?

Top 7 Co-Morbid Conditions

Hypertension/heart disease

1. Have you had any recent changes in medications?
2. How many medications are you taking?
3. Has your doctor advised you that your condition is controlled?
4. What was your last blood pressure reading?
5. Do you have any other heart or circulatory problems?



Cognitive impairment

Listen for cues of cognitive impairment throughout your interview. Did the client remember your name and the appointment? Does the client report memory loss, or does a family member indicate concerns about the client's memory? If so, the following questions are appropriate:

1. Have you discussed memory loss with your doctor or family?
2. Have you had any memory testing? Do you have the results of that testing?
3. Do you manage your own finances?
4. Do you drive? If no, have you ever driven?
5. Do you do your own shopping?

Arthritis

1. What type of arthritis do you have?
2. What joints are affected?
3. Have you had any recent changes or additions to your medications?
4. Have you ever used steroids to treat your arthritis? How much and for how long?
5. Have you had any joint replacements?
6. Do you have any limits in activity as a result of your arthritis? How far can you walk without resting?
Do you have any difficulty with stairs?
7. What is your height and weight?

Osteoporosis

1. Do you take medication for this condition?
2. Have you had any recent fractures (within the last 24 months)?
3. Have you had any loss in your height? (refer to pages 14 and 15)
4. Has your doctor done any bone density studies? If so, do you know your T-score level?
5. How has your doctor described your degree of osteoporosis (mild, moderate, severe)?



Diabetes

1. How long have you had diabetes?
2. Do you take any medication or insulin? What dosage and frequency?
3. Has your doctor advised you that your blood sugar level is in good control? For how long?
4. What is your blood sugar level or Hgb A1C? (refer to page 39)
5. What is your height and weight? (refer to pages 14 and 15)
6. Do you have any diabetes-related complications? (e.g., eye problems directly related to diabetes, kidney problems, circulatory problems, numbness and tingling of the extremities, non-healing wounds or skin ulcers, or any amputation).

Cancer

For any type of cancer other than basal cell skin cancer, squamous cell cancer of the skin or early stage breast or prostate cancer, at least two years without surgery or treatment should have passed for the client to be considered for coverage.

1. What type of cancer did you have?
2. Do you know the stage?
3. Did you have any positive lymph nodes or spread to other areas?
4. What was the last date of treatment or surgery?
5. If prostate cancer, do you know your current PSA?

Mental Health

1. Are you currently seeing a psychologist, psychiatrist, or counselor/therapist for any reason?
2. How often do you see them and for what reason?
3. Do you have a specific diagnosis?
4. When were you diagnosed?
5. What medications are you taking for this condition(s)?
6. Have there been any changes in your medication in the last 6 months?
7. Have you been hospitalized for this condition or any other mental health condition in the last 5 years?

