

# Life Underwriting Requirements Quick Reference Guide

A Reference Guide for Financial Professionals



## Getting Off to a Great Start!

This reference guide will help you quickly identify the underwriting requirements for applications for new life business.

## AGE AND AMOUNT REQUIREMENT CHART

Age/Amount	0 - 16	17 - 40	41 - 50	51 - 60	61 - 64	65 - 70	71 - 80	Over 80
<b>Under \$50,000</b>	Non-med Rx	CMI <sup>1</sup> Phys Meas. Oral Fluids Rx MVR	CMI <sup>1</sup> Phys Meas. Oral Fluids Rx MVR	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Oral Fluids Rx MVR	Paramed Urine Specimen Rx MVR EIR	Paramed Urine Specimen Rx MVR APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Urine Specimen Rx MVR APS	Tele-CMI <sup>3</sup> Phys Meas. Urine Specimen Rx MVR Fin Q APS
<b>\$50,000 to \$249,999</b>	Non-med Rx	CMI <sup>1</sup> Phys Meas. Blood/Urine Rx MVR	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR	Paramed Blood/Urine Rx MVR EIR	Paramed Blood/Urine Rx MVR APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR APS	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS
<b>\$250,000 to \$499,999</b>	Non-med Rx	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR	Paramed Blood <sup>5</sup> /Urine Rx MVR APS - 24 months EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR APS	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS
<b>\$500,000 to \$1,000,000</b>	Non-med Rx APS - 18 months for ages 0 - 1 and >\$500k	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR	Paramed Blood <sup>5</sup> /Urine Rx MVR APS - 24 months EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR APS	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS
<b>\$1,000,001 to \$2,000,000</b>	Non-med Rx APS - 18 months	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR PHI <sup>4</sup>	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR PHI <sup>4</sup>	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR PHI <sup>4</sup>	Paramed Blood <sup>5</sup> /Urine Rx MVR PHI <sup>4</sup> APS - 24 months EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR PHI <sup>4</sup> APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS

## AGE AND AMOUNT REQUIREMENT CHART (CONTINUED)

Age/Amount	0 - 16	17 - 40	41 - 50	51 - 60	61 - 64	65 - 70	71 - 80	Over 80
<b>\$2,000,001 to \$3,000,000</b>	Non-med Rx APS - 18 months	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR PHI <sup>4</sup>	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood/Urine Rx MVR PHI <sup>4</sup>	CMI <sup>2</sup> Phys Meas. <sup>2</sup> Blood <sup>5</sup> /Urine Rx MVR PHI <sup>4</sup> APS - 24 months	Paramed Blood <sup>5</sup> /Urine Rx MVR PHI <sup>4</sup> APS - 24 months EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR APS PHI <sup>4</sup> EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS
<b>\$3,000,001 to \$5,000,000</b>	Non-med Rx APS - 18 months	Paramed Blood/Urine Rx MVR PHI <sup>4</sup> EIR	Paramed Blood/Urine Rx MVR PHI <sup>4</sup> APS - 24 months EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR PHI <sup>4</sup> APS - 24 months EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR PHI <sup>4</sup> APS - 24 months EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR PHI <sup>4</sup> APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS
<b>\$5,000,001 to \$9,999,999</b>	Paramed Rx Third Party Financials APS	Paramed Blood/Urine Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Paramed Blood <sup>5</sup> /Urine Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine Senior Supplement Rx MVR Financial Questionnaire APS EIR
<b>\$10,000,000</b>	Paramed Rx Third Party Financials APS	Paramed Blood <sup>5</sup> /Urine Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Paramed Blood <sup>5</sup> /Urine EKG Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Paramed Blood <sup>5</sup> /Urine EKG Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Paramed Blood <sup>5</sup> /Urine EKG Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Paramed Blood <sup>5</sup> /Urine EKG Rx MVR Financial Questionnaire PHI <sup>4</sup> APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine EKG Senior Supplement Rx MVR Financial Questionnaire APS EIR	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine EKG Senior Supplement Rx MVR Financial Questionnaire APS EIR
<b>Over \$10,000,000</b>	Paramed Rx Third Party Financials APS	Paramed Blood/Urine Rx MVR APS EIR* for > \$10 - \$20M IR for >\$20M Third Party Financials	Paramed Blood <sup>5</sup> /Urine EKG Rx MVR APS EIR* for > \$10 - \$20M IR for >\$20M Third Party Financials	Paramed Blood <sup>5</sup> /Urine EKG Rx MVR APS EIR* for > \$10 - \$20M IR for >\$20M Third Party Financials	Paramed Blood <sup>5</sup> /Urine EKG Rx MVR APS EIR* for > \$10 - \$20M IR for >\$20M Third Party Financials	Paramed Blood <sup>5</sup> /Urine EKG Rx MVR APS EIR* for > \$10 - \$20M (age 65), otherwise IR Third Party Financials	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine EKG Senior Supplement Rx MVR APS IR Third Party Financials	Tele-CMI <sup>3</sup> Phys Meas. Blood <sup>5</sup> /Urine EKG Senior Supplement Rx MVR APS IR Third Party Financials

## KEY

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**CMI:** Client Medical Interview

**Tele-CMI:** Telephone Client Medical Interview

**PHI:** Personal History Interview - required for non-U.S. citizens only or at underwriter discretion.

**RX:** Prescription Check

**MVR:** Motor Vehicle Report

**EIR:** Electronic Inspection Report

**IR:** Written Inspection Report

**APS - 24 months:** Attending Physician Statement needed if seen in the last 24 months

**APS - 18 months:** Attending Physician Statement needed if seen in the last 18 months

**APS:** Attending Physician Statement

\* Third-party financials are requested through financial professionals when the proposed insured is 65 years old and younger, and total amount at risk is more than \$10 million. For personal coverage, these include federal tax returns (past two years), OR bank/financial statements from a CPA or attorney. For business coverage, we need a profit/loss statement AND corporate financial statements from a CPA or attorney.

For survivorship contracts, use half the applied for amount to determine medical requirements only. To ensure correct requirements are ordered from exam companies for survivorship policies, please select the appropriate drop-down choice (VUL, SWL, CC1) in the exam company order menu so that correct requirements are generated. CMI/Tele-CMI are not approved for survivorship applications. Non-medical requirements such as IRs and financials are based on full amount applied for.

<sup>1</sup> CMI is subject to product availability; otherwise, a Nonmedical part 2 is required.

<sup>2</sup> CMI is subject to product availability; otherwise, a Paramedical part 2 is required. When another company's Paramed exam is used, a fully completed MassMutual Non-med, CMI or Tele-CMI is required.

<sup>3</sup> Tele-CMI is subject to product availability. If the Tele-CMI is not done/available, typically a Paramed and PHI are required. When another company's Paramed exam is used, a fully completed MassMutual Non-med, CMI or Tele-CMI is required..

<sup>4</sup> A PHI is required for non-citizen U.S. residents or foreign national non-U.S. residents unless a written inspection report is already being obtained. Otherwise, the PHI is only needed at underwriter discretion.

<sup>5</sup> NTproBNP testing required.

## Total Amount at Risk (TAR)

- With multiple submissions, combine the total amount at risk to determine the age/amount requirements.
- Use total amount at risk for all applications currently submitted, pending, and/or issued by MassMutual within the past 12 months. Note: some of the riders we offer must be factored into our total amount at risk.<sup>6</sup>
- For Survivorship contracts, use half the applied-for amount to determine medical requirements only. Non-medical requirements such as Inspection Reports and financials are based on the full amount applied for.

Please note the following regarding ALIR:

To determine the additional amount at risk under ALIR, multiply the ALIR payment by the correct multiplier for the proposed insured's age found in the Amount at Risk chart.

### AMOUNT AT RISK

ISSUE AGES	SCHEDULED	UNSCHEDULED
0 - 30	10X OR 20X*	2X OR 4X**
31 - 40	10X	3X
41 - 59	5X	2X
60 - 69	1X	1X
70+	1X	1X

\* If total amount at risk is  $\geq$  \$250,000, use 10x.

\*\* If  $\geq$  \$250,000, use 4x.

## Non-Medical (Non-med)

This is completed with the client by the financial professional. It includes basic information about medical history. In addition to cases indicated on the chart, complete the non-medical if you are submitting another company's Part 2/exam in place of a MassMutual Part 2/exam.

- Valid up to **12 months** from the part 1 signature date.<sup>7</sup>

<sup>6</sup> For more information on the ALIR, PALIR, LISR, RTR, and YTP riders, please reference the [Overview of Whole Life Product Portfolio brochure](#).

For more information on the ALIRS, EPRS, and LISRS riders, please reference the [Survivorship Whole Life Product Reference Guide](#).

<sup>7</sup> These are guidelines. All requirement expiration dates are subject to underwriter discretion. Some requirements for clients over age 70 expire at six months.

## Client Medical Interview (CMI)

The Client Medical Interview is an online process, for use with new business individual life applications, that requires proposed insureds to complete a self-directed online medical questionnaire. This process replaces the traditional non-medical and paramedical part 2 application process.

- Valid up to **12 months** from the CMI completion date.<sup>7</sup>
- CMI is subject to product availability. Otherwise refer to the requirement chart above. It may not be used for clients who do not speak or understand English.
- The CMI may be used with conversion applications subject to product availability and age/amount. CMI may not be used with policy change applications, except in California. It is not approved for use with Survivorship or CareChoice.
- A language line to complete a Tele-CMI is available for those unable to complete the online CMI because they do not speak or understand English.

## Telephone Client Medical Interview (Tele-CMI)

The Telephone Client Medical Interview is completed over the phone by specially trained MassMutual interviewers. It is for new business individual life applications for ages 71+. For these ages/amounts, the Tele-CMI replaces the Paramedical Part 2 and the PHI.

- Valid up to **6 months** from the Tele-CMI completion date.<sup>7</sup>
- Tele-CMI is subject to product availability. If the Tele-CMI is not done/available, typically a Paramed Part 2 and PHI are required. When another company's Paramed exam is used, a fully completed MassMutual Non-med, CMI or Tele-CMI is required.
- The Tele-CMI **may be** used with conversion applications subject to product availability and age/amount. Tele-CMI may **not** be used with policy change applications, **except** in California. It is not approved for use with Survivorship or CareChoice.
  - The Tele-CMI contact number for the client to call is **1-844-835-3264**. The client should not call before the first office telephone contact, however, because the file will not yet be set up for the interview.

## Paramed

A Paramedical exam (paramed) is a part 2 completed by a paramedical examiner with the client. Medical history and height, weight, blood pressure, and pulse rate measurements, are obtained by a paramedical examiner fluent in the client's language. For clients who do not speak or understand English, the exam must be done by an examiner fluent in the client's language.

- Submitted on the Part 2 Application form.
- Up to age 70, valid up to **12 months** from the exam date.<sup>7</sup>
- Above age 70, valid up to **6 months** from the exam date.<sup>7</sup>

## Telephone Inspection (Personal History Interview/Supplemental Health Questionnaire)

A personal history interview (PHI) is conducted by trained interviewers. Questions are used to verify information on the application, collect missing details, and provide supplemental information. Topics include employment, insurance in force, medical history, hobbies, lifestyle, and finances.

- The underwriter orders the interview after reviewing the application.
- The interviewer calls the proposed insured at the phone number on the application and makes every effort to reach the proposed insured at the most convenient time. If the client has given permission, contact may be made by text.

### Important note about telephone

**interviews** – Financial professionals must thoroughly prepare all proposed insureds for telephone interviews by explaining the process and the nature of the questions. Proposed insureds may be called for a Telephone Inspection or a Supplemental Health Questionnaire (SHQ), which is similar to a Telephone Inspection but focuses on a specific topic selected by the underwriter (such as a particular medical condition). Underwriters may order interviews for any proposed insured without advance notice. Proposed insureds who are well prepared and expecting the call are much more likely to have a positive interview experience.

## How MassMutual Contacts Proposed Insureds for Telephone Interviews

For telephone interviews that require us to contact the proposed insured, the process varies depending on information received on the formal application.

- Proposed insureds may call in to the numbers provided to complete the Tele-CMI, the PHI, or the SHQ. However, for Tele-CMIs, to avoid delays and wait time, proposed insureds should wait for the Tele-CMI call or text to make sure the interview is set up.
- If the proposed insured consents to receiving text messages, we will send out three texts to the client, asking them to complete the requirement. These texts come from 413-200-3395. Please notify your client it is okay to accept these and to watch for this text.
- If there is no consent to text and an email is provided, we will first make a call to the proposed insured, at the best time to call that is provided on the application. If we do not make contact with that call, we will send out two follow-up emails. Emails will come from: **personalhistoryunit@noreply.massmutual.com** with information on how to complete the Tele-CMI, PHI, or the SHQ.
- If there is no consent to text and no email provided, we will place the first call to the proposed insured at the preferred best time to call listed on the application and then two follow up calls will be placed during our business hours.
- The PHI phone number is 888-461-3743.

## Information that may be ordered by the Home Office

### Prescription Check

A pharmacy database check is done and then crosschecked against the proposed insured's medication and medical history information on the application.

### Motor Vehicle Report (MVR)

A motor vehicle report detailing driving history is requested from the client's driver's license state.

- The Home Office obtains the MVR using information from Application Data Entry (ADE).
- It is essential for the financial professional and/or staff to accurately enter the driver's license number to ensure accurate MVR processing.



## Attending Physician Statements

Attending Physician Statements (APS) are medical records that may be Home Office-ordered or field-ordered.

- “APS – 24” is defined as records needed if the proposed insured has been seen within the last 24 months.
- “APS – 18” is defined as records needed if the proposed insured has been seen within the 18 months.
- Office visits for the following purposes should not be obtained: camp, sports, employment, insurance, FAA, and DOT physicals; vision screening (glasses/contacts); minor complaints (cold, flu, rash, muscle sprain, etc.).
- **Proposed insureds age 16 and younger:** It is our expectation that children receive routine well-child care, and have been seen by a health care provider within 18 months, or more recently if the child is under 3 years old. If not, we may be unable to proceed with the case. Please consult with Underwriting.
- **Proposed insureds over age 64:** It is our expectation that those over age 64 receive regular medical care. If the proposed insured has not been seen by a health care provider within 12 months, we will not be able to proceed with the case
- **For cause:** An APS may be required on any case at underwriter discretion. Examples of common impairments for which an APS is needed include:
  - Biopsy, tumor, cancer (excluding basal cell carcinoma)
  - Heart disease, including heart attack, heart catheterization, angioplasty, PTCA, coronary stent, bypass, CABG, valvular heart disease
  - Stroke, TIA, CVA
  - COPD, emphysema
  - Substance abuse
  - Mental or emotional disorders requiring more than two medications or hospitalization
- We expect that clients have an established physician in the U.S. All records should be provided in English or Spanish.
- Foreign-language APSs must be obtained by the financial professional. The financial professional must use an accredited translation service to translate medical records (except for Spanish, which MassMutual will translate).
- If the proposed insured has seen multiple physicians, please obtain direction from the underwriter regarding best source for APS information. It is imperative that we order the most useful source of medical information for each client, so we can streamline the underwriting process and minimize time in underwriting.
- In some circumstances, digital medical records may be used.

This list is intended to provide general guidance; it is not all-inclusive.

When in doubt about whether to order an APS, consult with the underwriter.

## Senior Supplement

The Senior Supplement is a screening done by the examiner that tests cognitive and functional abilities. The supplement consists of three parts:

- An orientation-memory-concentration test.
- Yes/no questions that assess activities of daily living.
- A timed “Up and Go” exercise.

## Financials

For face amounts over \$10,000,000, financial documentation is required. Documentation may consist of tax returns, third-party-generated financial statements, or other acceptable documentation.

Third-party financials may be needed for certain age/amount brackets. These include:

- Personal coverage
  - Tax returns from the past two years, OR
  - Current bank/financial institution statements including verification/documentation of net worth by a disinterested third party (e.g., a CPA or attorney).
- Business coverage
  - Profit and loss statement, AND
  - Corporate business financial statements that include client’s compensation details (e.g., from a CPA or attorney).

If premium financing is to be used for any policy, premium financing documents and supplement form (Form F7002) are required. In some circumstances, digital medical records may be used. Tax returns may be required.

**Your underwriter may at any time request additional discretionary financial requirements for any age and amount in order to properly assess the risk.**

### Important Notes Regarding Financial Requirements

For UL/SUL and term applications for ages 71+ with aggregate risk amounts greater than \$1,000,000, the following financial documentation is required:

- Tax returns and supporting documents.
- Premium financing documents and supplement form (Form F7002) if applicable.
- If a trust is the owner, submit a complete copy of the trust agreement and certification of trust agreement (Form F6734).
- If an LLC or similar entity is the owner, submit a complete copy of the business entity document or agreement and certification form (Form F7833).

## Financial Questionnaire

The necessary Financial Supplement will depend upon the purpose of insurance:

- Financial Supplement for Personal Insurance (Form FR2075). Please use the appropriate state version.
- Business Financial Supplement (Form FR2074).
- The Financial Supplements (Fin Qs) do not take the place of required financial documentation for Premium Financing, or UL/SUL and term applications for age 71+ with aggregate risk amounts greater than \$1,000,000.
- If tax returns are received for UL/ SUL or term applications, for ages 71+ with aggregate risk amounts greater than \$1,000,000, we may be able to waive Financial Supplements at the underwriter's discretion.

### FINANCIAL SUPPLEMENTS ARE NEEDED FOR THE FOLLOWING AGES/AMOUNTS

AGE	AMOUNT
Up to 70	\$5,000,001 - \$10,000,000
71 - 80	\$1,000,001 - \$10,000,000
>80	\$25,000 - \$10,000,000

## Inspection Report

Inspection reports are always ordered by the home office and may include written and electronic consumer reports on the Proposed Insured's finances, lifestyle, character, and personal reputation. These are ordered for certain ages, amounts, or for cause. A written inspection report may or may not involve client contact. Investigators may conduct telephone interviews with other sources (such as personal and business associates, accountants and attorneys), in addition to checking public records.

The type of report ordered varies by age and amount of insurance. Your underwriter will communicate the type of report needed in an initial review email.

When client contact is required (written inspection), thoroughly prepare the client by explaining the process and the nature of the information collected. Proposed Insureds who are well prepared are much more likely to have a positive inspection experience.

Electronic inspection reports (EIR) typically do not involve client contact.

- Typically valid up to **12 months** from the report date.<sup>7</sup>

# MassMutual...

**Helping you secure what matters most.**

Since 1851, MassMutual has been building a reputation for financial strength and integrity. At MassMutual, we operate for the benefit of our customers. Our business decisions are based on a single guiding principle: to help people secure their future and protect the ones they love.

Products may not be available in all states. State variations apply.

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