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Disability Insurance And Medically Challenged Clients

We have a motto at our agency—it's the first thing employees learn when they come to work, and it's our daily anthem: *Don't assume!* It's simple, yet it can be hard to live by. *Don't assume!* is also my personal mantra as well, and it's amazing how well it works in the non-business part of life.

How does this relate to disability insurance? Your clients need the coverage, and they come to you, their broker or agent, for the product. If, in your field assessment, you come across someone who has a medical condition such as multiple sclerosis, diabetes, or heart disease, don't assume you can't get him DI coverage.

There are some companies that may accept your client for coverage! There are many conditions in which the coverage may be offered with a reduced benefit period, riders or exclusions, or even on a graded benefit basis. Regardless of how the coverage gets approved, your impaired risk clients can obtain valuable coverage that they may not have been able to receive in the past.

Of course, there are many conditions that just will not be considered regardless. I would never blindly submit a case that has known impairments to any company. You need to consult with your company or BGA to get important feedback about your client's condition. Companies have specific procedures and authorizations that must be followed in order to comply with HIPAA

regulations. In addition, if one company attaches a rider for a specific condition, more than likely the rest of the companies may do so as well.

Following are some field underwriting inquiries that you may want to consider for specific diseases (*of course, these are not all inclusive, so consult your company or BGA*).

Diabetes

The applicant's last few A1c readings are essential—if the case can be an instant decline based on these numbers. In addition to the A1c results, you must find out the date of diagnosis (*the longer your client has diabetes, the harder the case will be to place*); height, weight and blood pressure; medications being taken; if there have been any abnormalities in urine tests or kidney function tests; and if the applicant has retinopathy, peripheral neuropathy or cardiac issues.

Depression

First you must find out how well controlled the depression is, and who is treating it. Other important information is what medications are being used and if there has been any change in those medications during the last five years; if there is a history of hospitalization; the "Diagnostic and Statistical Manual of Mental Disorders" (DSM) code; and whether the depression is work-related.

Heart Disease

Confirm that the client sees a cardiologist and if any medications are being taken or any treatment has occurred. If so, it would help to get the reports on any stress tests, cardiac catheterization(s), angioplasty or bypass surgery.

Cancer

The farther your applicant is from the date of surgery and/or the end of treatment, the better. A copy of the pathology report is necessary, as well as details of any treatment and follow-up.

Colitis or Crohn's Disease

When and how often does the client see

a gastroenterologist, and how often and severe are "flare ups" (*the term "flare up" can be subjective, so find out what that means to the company to which you plan to submit the application*). What, if any, medications are being used, and when has the applicant had diagnostic testing such as colonoscopy. Is the disease severe enough that the patient has had surgery(ies), and if so, get a copy of the report(s).

Musculoskeletal Issues

First find out the type and location of pain and if there has been diagnostic testing by a physician. If so, what medications are being used—both prescription and over-the-counter drugs; how frequently does the

applicant see his physician; and has there been a hospitalization or missed work due to the condition.

Each condition has so many different questions that can be asked; in addition, more questions can come up during the inquiry or formal underwriting process. Also, inquiry results are never a guarantee that the case will be issued once the full underwriting process is completed. Only the company underwriter can decide if a case is acceptable and how—or even if—it can be issued.

While the mainstay of your business are those who have no known health problems, you still want to be able to get some form of coverage for your medically challenged clients. ☺