

Be Prepared for Your Insurance Exam

- If possible, schedule your appointment for early morning.
- Be well rested prior to the examination.
- Wear loose-fitting clothing, a short sleeved shirt or a long sleeved shirt that can be easily rolled up.
- Avoid the intake of alcoholic substances for at least 2-3 days before the examination.
- Avoid caffeine intake several hours prior to the examination if possible.
- Avoid smoking or chewing tobacco at least one hour before the appointment.
- Avoid any strenuous activity for 24 hours.
- Take regular medication prescribed by doctor.
- It is very important to fast (avoid food and beverage intake) for at least 8 hours prior.
- Increase your water intake 1-2 days prior to your exam to assist in obtaining a urine specimen.
- Avoid foods high in fat and sodium 1-2 days prior to exam.

Additional Requirements

Additional requirements may be needed by the insurance company in addition to the paramedical exam. You will be informed by your advisor if such requirements are needed. These requirements may include an exam by a licensed physician, resting electrocardiogram (EKG), treadmill (stress test), timed vital capacity (TVC), blood test, or chest x-ray.

The ASA Advantage

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The ASA Group

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A Guide to Prepare for the Paramedical Exam



Life Insurance - Annuities - Long Term Care - Disability

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Paramedical Examination

Before an insurance policy can be issued, a paramedical exam along with a blood and urine sample must be completed. A paramedical exam includes questions about your medical history, height, weight, pulse and blood pressure. Additionally, a urine specimen and blood sample may be collected. The exam usually takes 20 to 30 minutes to complete. The examiner will ask you the names and addresses of any physicians and/or hospital you may have seen. The examiner will ask you about any illness, medication, and any other treatment you may have had.

All of the information given to the medical examiner is strictly confidential. It will be used for underwriting purposes only.

A paramedical examiner will contact you to schedule an appointment at your earliest convenience.

Blood Tests

Blood tests provide important information which is used in the underwriting process. A wide variety of specimen tests are performed by a laboratory that will send the results to the home office of the insurance company.

For best results, fasting for several hours prior to the blood draw is recommended.

The examiner will request that you sign an authorization allowing a blood and urine sample to be taken.

Processing of Your Insurance Application

The Phone Interview - Based on face amount and insurance company guidelines, you may receive a call from an endorsed third party vendor or directly by an internal department of the insurance company. The interviewer will ask you a series of questions similar to those on your insurance application to include questions regarding your medical history and financial information. All information provided will be confidential. Lack of consistency will raise a "red flag". Please be consistent with your answers to avoid the necessity of further investigation.

Your Medical Records – After review of the details provided on your application, exam and phone interview, the insurance company may require a review of your medical records. The request for records, your signed authorization to release information and associated fee will be sent directly to your doctor. On average, the process takes 4 to 6 weeks. Once you know a request has been sent, we encourage you to contact your doctor to expedite handling. It is also helpful to inform your advisor if you have any scheduled appointments or medical tests pending.



The Insurance Company's Decision and the Cost of Your Policy

While variations exist from one insurance company to another, many carriers have adopted the following underwriting classifications listed from least costly to most costly; Preferred Plus Non-tobacco, Preferred Non-tobacco, Standard Non-tobacco, Preferred Tobacco and Standard Tobacco. Underwriting classifications have set medical underwriting guidelines and predetermined cost of insurance rates tied to them. Upon review of all the required documents, the insurance company establishes what underwriting classification you are approved for.

Underwriting will also review your finances to determine if you have financial means to afford the coverage you are applying for and if the need for coverage is clearly established. If either of these is not supported through the application and/or phone interview, additional documentation might be required or the amount of coverage might be limited.

On occasion, the insurance company may conclude they are unable to offer coverage due to your medical or financial history. Continue to work closely with your advisor as there may be opportunities to further negotiate with the insurance company or redirect your application to a different insurance company.