



# UNDERWRITING ESTIMATOR

## Reference Guide to Prudential's Preferred Underwriting



# Life Insurance

- ▶ Preferred Underwriting Quick Ratings Estimator
- ▶ BUILD TABLES—Male and Female—Ages 18 and up
- ▶ Age and Amount Exam Requirements

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**Prudential**

# Preferred Underwriting Quick Ratings Estimator

The six rating categories are available for ages 18 and up, with face amounts of \$100,000 and up.

<b>Tobacco/Nicotine</b>	Any within the last 5 years? N↓ Y→	Any within the last 3 years? N↓ Y→	Cigarettes, ecigarettes, clove cigarettes, or vaping products containing nicotine within the last 12 months? N↓ Y→	Cigarettes, ecigarettes, clove cigarettes, or vaping products containing nicotine within the last 12 months? Y→	Cigarettes, ecigarettes, clove cigarettes, or vaping products containing nicotine within the last 12 months? Y↓	Cigarettes, ecigarettes, or vaping products containing nicotine within the last 12 months? Y↓
<b>Blood Pressure</b>	Ages 18 – 49: Blood pressure medication? Do blood pressure readings exceed 130/80? Ages 50 and up: > 1 blood pressure medication? Do blood pressure readings exceed 140/85? N↓ Y→ N↓ Y→ N↓ Y→ N↓ Y→	Do blood pressure readings exceed 135/85 (age 18 – 49) or 145/90 (age 50+)? N↓ Y→	Do blood pressure readings exceed 140/90 (age 18 – 49) or 145/90 (age 50+)? N↓ Y→	Extra rating may be assessed based on actual blood pressure readings. ↓	Do blood pressure readings exceed 135/85 (age 18 – 49) or 145/90 (age 50+)? N↓ Y→	Extra rating may be assessed based on actual blood pressure readings. ↓
<b>Cholesterol &amp; HDL (High, Density Lipoprotein) Ratio</b>	Total cholesterol ≥ 300? Cholesterol ratio > 5? N↓ Y→ N↓ Y→	Total cholesterol ≥ 300? Cholesterol ratio > 6? N↓ Y→ N↓ Y→	Total cholesterol ≥ 300? Cholesterol ratio > 7? N↓ Y→ N↓ Y→	If cholesterol exceeds 350, an additional rating may be assessed. ↓	Total cholesterol ≥ 300? Cholesterol ratio > 6? N↓ Y→ N↓ Y→	If cholesterol exceeds 350, an additional rating may be assessed. ↓
<b>Family History</b> Not applicable if proposed insured is adopted or over age 60.	Any death of parents or siblings from coronary artery disease, stroke, or cancer <sup>1</sup> prior to age 60? N↓ Y→	Death of more than one parent from coronary artery disease, stroke, or cancer <sup>1</sup> prior to age 60? N↓ Y→	No restrictions apply. ↓	No restrictions apply. ↓	Death of more than one parent from coronary artery disease, stroke, or cancer <sup>1</sup> prior to age 60? N↓ Y→	No restrictions apply. ↓
<b>Personal History</b>	Any personal history of: Preferred Best: • Coronary Artery Disease (CAD) • Diabetes Mellitus • Cancer (except skin cancer, excluding melanoma) • Hepatitis C • Glucose Intolerance/Prediabetes Preferred Non-Tobacco & Preferred Smoker: • Coronary Artery Disease (CAD) • Diabetes Mellitus • Cancer (except skin cancer, excluding melanoma) • Glucose Intolerance/Prediabetes N↓ Y→	Any personal history of: Preferred Best: • Coronary Artery Disease (CAD) • Diabetes Mellitus • Cancer (except skin cancer, excluding melanoma) • Hepatitis C • Glucose Intolerance/Prediabetes N↓ Y→	Any rateable history? N↓ Y→	A history of any form of glucose intolerance, coronary artery disease, diabetes, cancer, or stroke may result in an extra rating. ↓	Any personal history of: Preferred Best: • Coronary Artery Disease (CAD) • Diabetes Mellitus • Cancer (except skin cancer, excluding melanoma) • Hepatitis C • Glucose Intolerance/Prediabetes Preferred Non-Tobacco & Preferred Smoker: • Coronary Artery Disease (CAD) • Diabetes Mellitus • Cancer (except skin cancer, excluding melanoma) • Glucose Intolerance/Prediabetes N↓ Y→	A history of any form of glucose intolerance, coronary artery disease, diabetes, cancer, or stroke may result in an extra rating. ↓
<b>Alcohol or Drug</b> Treatment or counseling for alcohol or drug use.	Currently using drugs or ever been treated or counseled for alcohol or drug use? N↓ Y→	Currently using drugs or ever been treated or counseled for alcohol or drug use within the last 10 years? N↓ Y→	Any rateable history? N↓ Y→	Extra rating may be assessed for history. ↓	Currently using drugs or ever been treated or counseled for alcohol or drug use within the last 10 years? N↓ Y→	Extra rating may be assessed for history. ↓
<b>Driving Record</b> Adverse driving record.	DWI, DUI, OUI, or reckless driving in the past 5 years? Preferred Best: DWI, DUI, OUI or reckless driving in the past 5 years? More than 2 moving violations and/or accidents in the last 3 years? License currently suspended? N↓ Y→ N↓ Y→ N↓ Y→ N↓ Y→ Preferred Non-Tobacco & Preferred Smoker DWI, DUI, OUI or reckless driving in the past 5 years? More than 3 moving violations and/or accidents in the last 3 years? License currently suspended? N↓ Y→ N↓ Y→ N↓ Y→	DWI, DUI, OUI, or reckless driving in the past 5 years? Preferred Best: DWI, DUI, OUI or reckless driving in the past 5 years? More than 2 moving violations and/or accidents in the last 3 years? License currently suspended? N↓ Y→ N↓ Y→ N↓ Y→ Preferred Non-Tobacco & Preferred Smoker DWI, DUI, OUI or reckless driving in the past 5 years? More than 3 moving violations and/or accidents in the last 3 years? License currently suspended? N↓ Y→ N↓ Y→ N↓ Y→	Any rateable history? N↓ Y→	Extra rating may be assessed for adverse driving record. ↓	DWI, DUI, OUI, or reckless driving in the past 5 years? Preferred Best: DWI, DUI, OUI or reckless driving in the past 5 years? More than 2 moving violations and/or accidents in the last 3 years? License currently suspended? N↓ Y→ N↓ Y→ N↓ Y→ Preferred Non-Tobacco & Preferred Smoker DWI, DUI, OUI or reckless driving in the past 5 years? More than 3 moving violations and/or accidents in the last 3 years? License currently suspended? N↓ Y→ N↓ Y→ N↓ Y→	Extra rating may be assessed for adverse driving record. ↓
<b>Occupation</b> Hazardous duties.	Any hazardous duties? N↓ Y→	Any hazardous duties? N↓ Y→	Any hazardous duties? N↓ Y→	Extra rating may be assessed for hazardous duties. ↓	Any hazardous duties? N↓ Y→	Extra rating may be assessed for hazardous duties. ↓
<b>Avocation</b> Hazardous activities.	Any hazardous activities? Note: Answer No if recreational SCUBA diving with a Basic Open Water certification, with dives no deeper than 100ft, and fewer than 10 dives annually allowed. N↓ Y→	Preferred Non-Tobacco & Preferred Smoker Rateable participation? Participation in an activity that precludes including the Waiver of Premium Benefit (WP)? N↓ Y→	Participation in any rateable hazardous activities will result in an extra premium. ↓	Participation in any rateable hazardous activities will result in an extra premium. ↓	Preferred Non-Tobacco & Preferred Smoker Rateable participation? Participation in an activity that precludes including the Waiver of Premium Benefit (WP)? N↓ Y→	Participation in any rateable hazardous activities will result in an extra premium. ↓
<b>Aviation</b> Aviation activities other than U.S. commercial airlines.	Any rateable aviation? Age < 30? < 5 yrs or < 1,000 total hours as certified pilot? Any FAA violations? Fly any craft other than powered, fixed-wing aircraft? Valid, current pilot certificate other than Private, Commercial, or ATP or none? < 100 hours in current make/model? Medical certificate with any restrictions (other than for corrective lenses)? N↓ Y→	Any rateable aviation? Age < 30? < 5 yrs or < 1,000 total hours as certified pilot? Any FAA violations in 5 years? Valid, current pilot certificate other than Private, Commercial, or ATP or none? < 100 hours in current make/model? N↓ Y→	Any occupation-related rateable aviation? Age < 25? < 3 yrs or < 600 total hours as certified pilot? Any FAA violations in 3 years? Valid, current pilot certificate other than Private, Commercial, or ATP or none? N↓ Y→	Extra rating will be assessed for rateable activities. ↓	Any rateable aviation? Age < 30? < 5 yrs or < 1,000 total hours as certified pilot? Any FAA violations in 5 years? Valid, current pilot certificate other than Private, Commercial, or ATP or none? < 100 hours in current make/model? N↓ Y→	Extra rating will be assessed for rateable activities. ↓
<b>Residence<sup>4</sup></b>	Permanent resident of country other than the United States, Canada, or "A" countries? N↓ Y→	Permanent resident of country other than the United States, Canada, or "A" countries? N↓ Y→	Available to residents of "A" and "B" countries. ↓	Available to residents of "A" and "B" countries. ↓	Permanent resident of country other than the United States, Canada, or "A" countries? N↓ Y→	Available to residents of "A" and "B" countries. ↓
	<b>Preferred Best</b>	<b>Preferred Non-Tobacco</b>	<b>Non-Smoker Plus</b>	<b>Non-Smoker</b>	<b>Preferred Smoker</b>	<b>Smoker</b>

After completing the above ratings guide, make sure to explain to the client the following:

Any rate and/or rate class presented will be subject to the underwriting criteria of The Prudential Insurance Company of America, Pruco Life Insurance Company, or Pruco Life Insurance Company of New Jersey. A client's actual rates potentially could be higher or lower depending on the rate class determined after the underwriting process has been completed. The underwriting requirements may include, but are not limited to, paramed exams, ECGs, blood tests, and complete medical history. See the Age and Amount Exam Requirements chart for additional information. The eligibility for any particular rate class or eligibility, in general, is in no way guaranteed to be the final decision of The Prudential Insurance Company of America.

<sup>1</sup> Cancer limited to those with a high familial risk (e.g., breast, colon, melanoma, ovarian, pancreas, prostate, and stomach).  
<sup>2</sup> Note: A personal history of hepatitis C will preclude acceptance to the Preferred Best rating.  
<sup>3</sup> May allow PNT/PS with personal history of thyroid cancer, cervical cancer, prostate cancer, and stage 1 seminoma testicular cancer that meet specific parameters.  
<sup>4</sup> Restrictions may apply to certain non-U.S. residents. Contact Underwriting prior to submitting an application.

## BUILD TABLES—Male and Female—Ages 18 and up

Prudential's build underwriting varies based on the age and Body Mass Index (BMI) of the proposed insured. Enter your clients height and weight to calculate their exact BMI to determine whether they will be able to qualify for preferred, standard, or rated underwriting or be declined based on BMI.

	AGES	IC	Preferred Best	Preferred Non-Tobacco / Preferred Smoker	Non-Smoker Plus	Non-Smoker	Table A	Table B	Table C	Table D	Table E	Decline
BMI:	18 – 59	(18 – 39) 17 (40 – 59) 18	29	31	33	37	39	41	43	45	48	>48
	60 & up	18	31	35	38	40	42	44	46	48	50	>50

### ENGLISH VALUES

BMI Calculator:

\_\_\_\_\_

Feet

\_\_\_\_\_

Inches

\_\_\_\_\_

Weight

\_\_\_\_\_

BMI

### METRIC VALUES

BMI Calculator:

\_\_\_\_\_

Meter

\_\_\_\_\_

cm

\_\_\_\_\_

Weight

\_\_\_\_\_

BMI

Use the table below as an approximation when determining whether your clients will be able to qualify for preferred, standard, or rated underwriting or declined based on their height and weight.

BMI	Maximum weight associated with listed BMI																							
	4'11"	5'0"	5'1"	5'2"	5'3"	5'4"	5'5"	5'6"	5'7"	5'8"	5'9"	5'10"	5'11"	6'0"	6'1"	6'2"	6'3"	6'4"	6'5"	6'6"	6'7"	6'8"	6'9"	6'10"
17	86	89	92	95	98	101	105	108	111	115	118	121	125	129	132	136	140	143	147	151	155	159	163	167
18	91	94	97	101	104	107	111	114	118	121	125	128	132	136	140	144	148	151	156	160	164	168	172	176
29	146	151	156	161	166	171	177	182	188	194	199	205	211	217	223	229	236	242	248	255	261	268	275	282
31	155	161	166	172	177	183	189	195	201	207	213	219	225	232	238	245	252	258	265	272	279	286	293	301
33	165	171	177	183	189	195	201	207	213	220	226	233	240	247	253	260	268	275	282	289	297	304	312	320
35	175	181	187	194	200	206	213	219	226	233	240	247	254	261	269	276	284	291	299	307	315	323	331	339
37	185	192	198	205	211	218	225	232	239	246	253	261	268	276	284	292	300	308	316	324	332	341	349	358
38	190	197	203	210	217	224	231	238	245	253	260	268	276	283	291	299	308	316	324	333	341	350	359	368
39	195	202	209	215	223	230	237	244	252	259	267	275	283	291	299	307	316	324	333	341	350	359	368	377
40	200	207	214	221	228	235	243	250	258	266	274	282	290	298	307	315	324	332	341	350	359	368	377	387
41	205	212	219	226	234	241	249	257	264	272	281	289	297	306	314	323	332	340	350	359	368	377	387	396
42	210	217	224	232	239	247	255	263	271	279	287	296	304	313	322	331	340	349	358	367	377	386	395	406
43	215	222	230	237	245	253	261	269	277	286	294	303	311	320	329	338	348	357	366	376	386	396	405	416
44	220	227	235	243	251	259	267	275	284	292	301	310	319	328	337	346	356	365	375	385	395	405	415	425
45	225	233	240	248	256	265	273	281	290	299	308	317	326	335	344	354	363	373	383	393	403	414	424	435
46	230	238	246	254	262	270	279	288	296	305	314	324	333	342	352	362	372	382	392	402	412	423	433	444
48	240	248	256	265	273	282	291	300	309	319	328	338	347	357	367	377	388	398	409	419	430	441	452	463
50	250	258	267	276	285	294	303	312	322	332	342	351	362	372	382	393	404	414	425	437	448	459	471	483

# Age and Amount Exam Requirements

The chart guidelines apply to the currently amount applied for and any amount applied for in the past 12 months.

The standard time limit for exam requirements: 12 months for ages 18 – 70 and 6 months for age 71+, subject to current (within 3 months) non-medical declarations.

For Survivorship coverage: Requirements for each insured are based on the full face amount applied for, including any rider.

POLICY AMOUNT						
AGE	\$100,000 to \$499,999	\$500,000 to \$999,999	\$1,000,000 to \$3,000,000	\$3,000,001 to \$4,999,999	\$5,000,000 to \$9,999,999	\$10,000,000 and up
18 – 40	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR
41 – 45	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx	EXAM, IRP, MRx	ECG, EXAM, IRP, MRx
46 – 50	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx	EXAM, IRP, MRx	ECG, EXAM, IRP, MRx
51 – 60	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx, MVR	EXAM, IRP, MRx	EXAM, IRP, MRx	ECG, EXAM, IRP, MRx
61 – 70	EXAM, IRP, MRx	EXAM, IRP, MRx	EXAM, IRP, MRx	EXAM, IRP, MRx	EXAM, IRP, MRx	ECG, EXAM, IRP, MRx
71 – 75	APS, COG, EXAM, IRP, MRx	APS, COG, EXAM, IRP, MRx	APS, COG, EXAM, IRP, MOBILITY, MRx	APS, COG, EXAM, IRP, MOBILITY, MRx	APS, COG, EXAM, FRAILTY, IRP, MOBILITY, MRx	APS, COG, EXAM, FRAILTY, IRP, MOBILITY, MRx
Over 75*	APS, COG, EXAM, IRP, MOBILITY, MRx, MVR	APS, COG, EXAM, IRP, MOBILITY, MRx, MVR	APS, COG, EXAM, FRAILTY, IRP, MOBILITY, MRx	APS, COG, EXAM, FRAILTY, IRP, MOBILITY, MRx	APS, COG, EXAM, FRAILTY, IRP, MOBILITY, MRx	APS, COG, EXAM, FRAILTY, IRP, MOBILITY, MRx

\* Minimum face amounts: Ages 76 – 80: \$100,000; Ages > 80: \$250,000 (Face amounts of \$200,000 may be considered as an exception—contact underwriting)

## REQUIREMENTS LEGEND

EXAM & IRP requested by the underwriter only on an as needed basis for PruFast Track eligible cases

### EXAM

**The Examiner is a paramed, not a Medical Doctor.** The proposed insured is weighed and measured with both blood pressure and pulse recorded.

**Non-FastTrack eligible Express Worksheet submissions require a Modified Exam.** Part 2 Medical Declarations are obtained via eInterview or via tele-interview.

**Full Exams are required for submissions via traditional paper application.** Part 2 Medical Declarations are obtained by the Examiner.

### DATA REQUIREMENTS (Prudential to order when required)

**Prudential Automated Database Report (PADR)**

Face amounts: \$100,000 – \$9,999,999

**Einspection Report (EIR)**

Face amounts: \$500,001 – \$9,999,999

**Data Verification Report (DVR)**

Face amounts: \$10,000,000 and over

### MEDICAL REQUIREMENTS

<b>APS</b>	<b>Attending Physician’s Statement</b>
<b>COG</b>	<b>Cognitive function testing, administered by examiner</b>
<b>ECG</b>	<b>Electrocardiogram</b>
<b>Frailty</b>	<b>Senior supplement questionnaire, administered by examiner</b>
<b>IRP</b>	<b>Insurance Risk Profile (Comprehensive Blood and Urine Panel)</b>
<b>Mobility</b>	<b>Get Up &amp; Go mobility test, administered by examiner</b>
<b>MRx</b>	<b>Medical Claims Data with Pharmaceutical database check</b>
<b>MVR</b>	<b>Motor Vehicle Report</b>
<b>Rx</b>	<b>Pharmaceutical database check</b>
<b>SPEC</b>	<b>Urine Specimen</b>
<b>UHIV</b>	<b>Urine HIV Testing—Examiner collected urine specimen for HIV testing</b>

### FINANCIAL GUIDELINES (For survivorship, the full face amount is used to determine financial requirements. Additional requirements may be obtained by the underwriter as needed)

Requirement	Age Range	Face Amounts
Financial supplement to the application	Ages ≤ 70	≥ \$5,000,000
	Ages 71 – 80	≥ \$2,500,000
	Ages > 80	≥ \$1,000,000
Third party supporting financial documentation required	Ages 18 – 70	≥ \$10,000,000
	Ages 71 – 80	≥ \$2,500,000
	Ages > 80	≥ \$1,000,000

In addition to the lab slip, please submit any required state-specific HIV consent form.

**NOTE:** Please refer to the Attending Physician’s Statement Requirements Guide (1009569) for additional APS requirements. Data verification report requirements and paramed exam limits and procedures apply to all life insurance products. MD exams may be required based upon the underwriter’s discretion.

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Availability of insurance and rates will vary based on the satisfaction of underwriting criteria.

Underwriting rules are subject to change at our discretion.

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