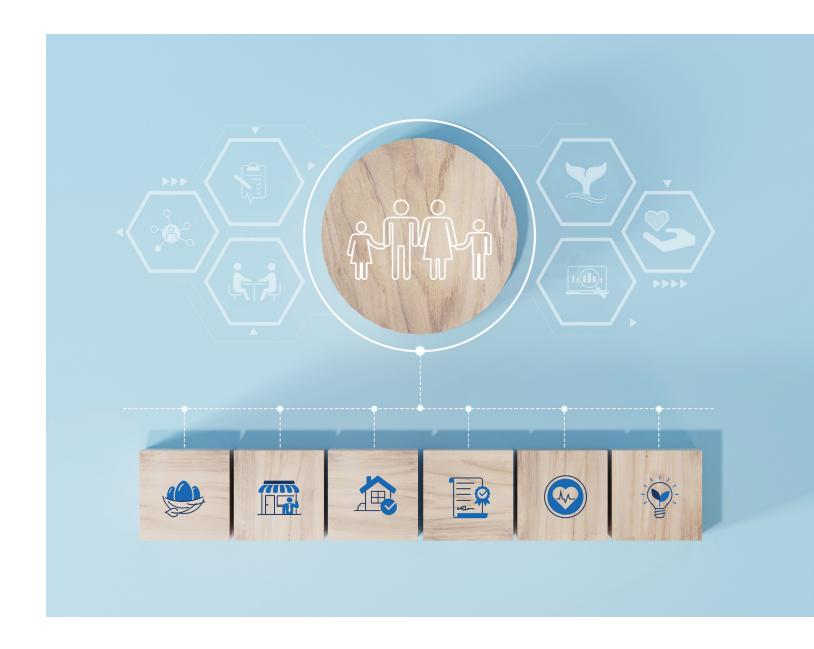


PACIFIC LIFE UNDERWRITING GUIDE: CONFIDENCE FOR GENERATIONS



Investment and insurance products: Not a deposit • Not insured by any federal government agency

Not FDIC insured • No bank guarantee • May lose value

Pacific Life

Insurance Company

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1 UNDERWRITING OVERVIEW

Introduction

Life insurance protection is important to your clients, and so is your ability to help ensure your client's application and underwriting process goes smoothly. This guide provides insights into Pacific Life's clear, consistent underwriting methodology.

Clear, Consistent Underwriting

Pacific Life is committed to making it easier for our customers to do business with us. With a progressive approach to underwriting and an in-depth understanding of the advancements in clinical medicine, our underwriting team continues to look for opportunities for a more holistic approach to risk selection. We focus on providing world-class customer service and a seamless end-to-end experience to give you:

- More personalized evaluations
- More competitive offers
- More consistent decisions
- Quicker turnaround
- Fewer requirements

Pacific Accelerated Life+ (PAL+)

One Seamless Process. Three Possible Pathways.

PAL+, Pacific Life's streamlined underwriting process with three possible pathways—accelerated, modified, and traditional—that allows your clients' applications to be routed through the least invasive underwriting method possible.

For example, if your clients are first considered for accelerated and they do not qualify, they're automatically considered for modified in which an attending physician statement (APS) is ordered, with evidence of a physical exam and lab work within the past 12 months. If your clients don't qualify for the modified underwriting pathway, they're automatically moved to traditional underwriting.

Accelerated	Modified	Traditional
No medical exam ¹ No APS	Physical with labs (completed by a medical provider) required within the past 12 months	We will notify you of any additional requirements as we process your application.
Ages 18–60 Up to \$3M single life or PL Promise Term ² coverage	Ages 18–70 • Up to \$3M PL Promise Term • Up to \$2M PL Promise GUL ³ • Up to \$65M All other products	All face amounts
Standard or better risk class	All risk classes All application methods Online or phone health history eligibility subject to product type	All risk classes All application methods











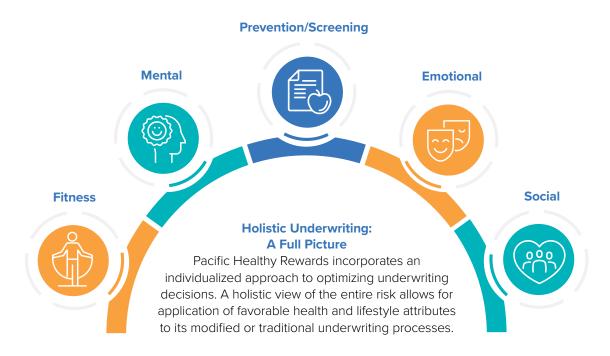
¹The issuance of the policy may depend upon the answers to the health questions contained in the application.

²PL Promise Term level premium term life insurance (Form series P16LYT and S16LYT10, S16LYT15, S16LYT20, S16LYT25, or S16LYT30, varies based on level premium period chosen and state of policy issue).

³PL Promise GUL no-lapse guarantee universal life insurance (Form series P18PRUL, S18PRUL, varies based on state of policy issue).

Pacific Healthy Rewards-Proprietary Crediting for Your Clients

In keeping with Pacific Life's progressive approach to underwriting and its in-depth understanding of the advancements in clinical medicine, our underwriting team continues to look for opportunities for a more holistic approach to risk selection with a focus on delivering our most competitive underwriting decisions. Pacific Healthy Rewards substantiates the value of this holistic underwriting approach and its positive impact on risk class improvements.



Pacific Healthy Rewards—Holistic Underwriting as Unique as Your Client

Best Risk Class Guidelines

Category	Best Class	2nd Best Class	3rd Best Class
Blood Pressure	135/85	140/90	Up to 50 yrs: 140/90 51-85 yrs: 160/90
Drug & Alcohol History	No history of or treatment for alcohol or substance abuse at any time	alcohol or substance abuse at alcohol or substance abuse in	
Tobacco/Nicotine	5+ years since last tobacco/ nicotine use	3+ years since last tobacco/ nicotine use	2+ years since last tobacco/ nicotine use
Build	BMI 18.5 to 30*	BMI 18.5 to 33*	BMI 18.5 to 35*
Motor Vehicle Report	No DWI/DUI, reckless driving, license revocation, or suspension due to moving violations in the last 5-10 years		No DWI/DUI, reckless driving, license revocation, or suspension due to moving violations in the last 3 years
Cholesterol/HDL Ratio	5.5		6.0
Total Cholesterol	rol 300		
Cancer History	Basal cell and squamous cell cancer only		
Family History	No family deaths in parent/sibling before age 50 due to heart disease, hypertension, cancer, or diabetes		
Aviation/Avocation	No two family deaths in parents/siblings before age 60 from the above list All classes available for commercial airline pilots		
Aviation/Avocation	(Standard Plus is the best class available with a flat extra)		

Check <u>Lifeline.Pacificlife.com</u> for availability of risk classes for non-PL Promise products.

Best classes for ages 76-85: Non-PL Promise 3rd Best risk class; PL Promise GUL 2nd best risk class through age 80; PL Promise Term 10 Best risk class through age 80

^{*}Final risk class based on a holistic view of the proposed insured's overall health, wellness, and risk factors.

New Risk Class Names

Previous Non-PL Promise Risk Class Names	Previous PL Promise Risk Class Names	New Aligned Risk Class Names
Super Preferred NonSmoker	Preferred Best No Nicotine	Super Preferred Non Tobacco
Preferred Plus NonSmoker	Preferred No Nicotine	Preferred Non Tobacco
Preferred NonSmoker	Select No Nicotine	Standard Plus Non Tobacco
Standard NonSmoker	Standard No Nicotine	Standard Non Tobacco
Preferred Smoker	Preferred Nicotine User	Preferred Tobacco
Standard Smoker	Standard Nicotine User	Standard Tobacco
Substandard		
NonSmoker Rated	Standard No Nicotine Rated	Non Tobacco Rated
Smoker Rated	Standard Nicotine User Rated	Tobacco Rated

Note: Pacific Horizon Survivorship IUL and MVP Horizon Survivorship IUL, Magnastar, and PAC UL 2 risk classes remain unchanged other than Non Tobacco/Tobacco names.

Tobacco and Marijuana Guidelines

Our tobacco and marijuana guidelines are based on competitive marketing research and feedback. Highlights include:

Tobacco

- Any use of a nicotine/tobacco-containing product within 12 months of the application
- Current urinalysis or results received with another company's labs (within 12 months of application): Positive cotinine
- Occasional cigar/pipe use may be acceptable for Non Tobacco rates, provided no cigarettes in the last five years

Marijuana

- Preferred rate classes may be available for limited/intermittent recreational use
- Non Tobacco rates available for all risk classes
- Medicinal use evaluated by the underlying medical condition

Age and Amount Guidelines

Note: Accelerated and Modified paths will help determine underwriting requirements. The following table is specifically for Traditional Underwriting.

	Juvenile	40 and Under	41–50	51–60	61–70	71+
\$0-\$500,000	Non-Medical or Juvenile Health History	Paramed Exam/Labs	Paramed Exam/Labs	Paramed Exam/Labs	Paramed Exam/Labs APS	Paramed Exam/Labs NT-ProBNP APS MedPlus/Mobil
\$500,000-\$1M	Non-Medical or Juvenile Health History	Paramed Exam/Labs	Paramed Exam/Labs	Paramed Exam/Labs	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS MedPlus/Mobil
\$1,000,001-\$3M	Non-Medical or Juvenile Health History APS	Paramed Exam/Labs	Paramed Exam/Labs NT-ProBNP (starts at age 45 and amounts over \$2,500,000) APS	Paramed Exam/Labs NT-ProBNP APS (Non PL Promise)	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS MedPlus/Mobil
\$3,000,001-\$5M	Non-Medical or Juvenile Health History APS	Paramed Exam/Labs APS	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS MedPlus/Mobil
\$5,000,001-\$10M	Non-Medical or Juvenile Health History APS	Paramed Exam/ Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS MedPlus/Mobil
\$10,000,001+	Non-Medical or Juvenile Health History APS Paramed Labs	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS	Paramed Exam/Labs NT-ProBNP APS MedPlus/Mobil

- The paramed exam and the labs are valid for up to 12 months for insureds age 70 or less who are approved standard or better. For insureds who are over the age of 70, the paramed and labs are valid for six months.
- For ages 65 and over, the APS must include evidence that the proposed insured visited his/her personal care physician (PCP) in the 12 months immediately before the date of application I or II, whichever is later.
- For ages 71 and over, a MedPlus (cognitive assessment) and a Mobil (functional assessment) from approved vendors (see Preferred Providers and Payment Guidelines section) will be required during the paramed.

Underwriting Requirements

Long-Term Care & Chronic Illness Rider Underwriting Requirements

Issue Age	Underwriting Requirement
61+	APS
65–70	MedPlus

Additional Underwriting Requirements

Underwriting Requirements	Issue Age	Death Benefit Amount/Notes
Motor Vehicle Report	16+	\$100,000 and up
Electronic Inspection Report	18+	\$1,000,001 and up
Third-Party Financial Statements or Equivalent	All ages	Upon request

Age of Evidence

Age	Application	Exam (Health History, MD Exam)	Blood Profile/HOS/Vitals
0–70	6 months	12 months	12 months
71–90	6 months	6 months	6 months

Streamlined Underwriting Requirements

Face Amount	Age	Product	Process
\$50,000-\$3,000,000	18–60	All	Accelerated Underwriting ^{4,5,6}
\$50,000-\$65,000,000	18–70	All	Modified Non-Invasive Underwriting using Medical Records to include labs/current history within 12 month ⁴

⁴Additional underwriting requirement may be needed for cause or if insured doesn't qualify for Accelerated UW or Modified UW.

⁵About Me (Online Health History) or a Tele-interview is required.

⁶Excludes Joint Life & Multilife

2 | IMPAIRMENT GUIDE

Uninsurable Conditions/Conditions by Timeline

Your importance in the underwriting process cannot be overstated. Helping identify acceptable risks and qualified applicants will enhance the speed and quality of your clients' underwriting experience. A fully completed and accurate application helps keep the underwriting process as short as possible.

What to Look for

- Proposed insureds should not be taking medications for conditions that are uninsurable.
- The proposed insured cannot have an uninsurable condition.
- Certain conditions will not be considered if they are within an unacceptable period of time.

Applications for your clients with any of the following conditions should not be submitted.

Issue	Timeline
Abdominal aortic aneurysm corrected surgically	Within past 6 months
Alcoholism, alcohol use disorder, alcohol dependence or alcohol addiction (detoxification and/or inpatient alcohol program)	Within past 2 years or history of treatment and currently using or used within last year
Alzheimer's disease/dementia	At any time
Bankruptcy (personal), Chapter 7 and 11	Not discharged
Cancer treated with chemotherapy or radiation therapy	Within 12 months
Cirrhosis of the liver	At any time
DUI/DWI (more than one)	Varies by age, but most are uninsurable within 1-2 years
Heart attack	Within 6 months
Heart bypass surgery (CABG)	Within 3 months
Hospitalization	Within 6-12 months depending upon condition
lllegal drug use (other than marijuana)	Within 3 years
Kidney dialysis	Currently
Lung disorder, on oxygen	Currently
Organ transplant pending or received	At any time for all but kidney and corneal
Probation/parole	Currently serving or ended < 1 year ago
Pregnant with complications (i.e., gestational diabetes toxemia, eclampsia, pre-eclampsia)	Currently
Suicide attempt, one-time only	Within 1-2 year
Stroke (CVA)	Within 6 months
Valve replacement	Within 6 months

This list is not all inclusive, as other medical conditions and timelines could result in an additional underwriting charge or decline of coverage. If your client has a medical condition not listed here, please refer to the <u>Medical Risks</u> section for further information.

Medical Risks

To help provide a more transparent customer experience, it is suggested that you alert your clients to additional information that may be needed if a listed impairment applies to them.

Key Points to Keep in Mind

- The severity of medical conditions varies among individuals, and individuals may have multiple impairments.
- Underwriters also will review the functionality of applicants age 65 or older. This includes their cognition, mobility
 and exercise capacity, weight change and nutritional status, social connectivity, and degree of independent living.
- If medical testing has been advised but not yet completed, the case may be declined, with possible reconsideration after the test results are available. Underwriters' offers depend on the merits of each case and we reserve the right to include additional requirements for cause.

Health Situation/ Medical History	APS Requirement (not required if probable decline)	Possible Underwriting Outcomes
Alcohol Abuse History and/or Treatment	APS from treatment facility required for any treatment within 6 years	 Preferred classes may be available if recovered with no relapse for more than 10 years Otherwise, consideration varies based on severity Likely declined for alcoholic hepatitis, alcohol treatment within last 2 years, OR past history treatment with current alcohol use
Alzheimer's Disease	Not required	Decline
Aneurysm, Aortic	All cases	 Ratings vary depending on extent of disease and recovery Likely declined for surgery pending or surgery completed within last 6 months
Anxiety, Mood, Stress, and Adjustment Disorders	Required: Schizophrenia, bipolar disorder, post-traumatic stress disorder (PTSD), and eating disorders Attempted suicide Treatment/medication changes within the last 6 months or current disability	 Preferred classes may be available depending on diagnosis, severity, and recovery Otherwise, varies by severity and control Likely declined for hospitalization in last year or suicide attempt within 2 years
Asthma	Required: • Hospitalized within 1 year • Oral steroid used continually for more than 1 month in last year	 Preferred classes may be available in best case scenarios, including stable mild disease, no hospitalizations, and no other lung conditions Severe disease declined including such factors as poor control, oxygen use, and frequent hospitalizations

Health Situation/ Medical History	APS Requirement (not required if probable decline)	Possible Underwriting Outcomes
Barrett's	All cases	Varies by diagnosis and severity
Blood Disorder	Required for: Anemia All platelet disorders (e.g., thrombocytopenia, immune thrombocytopenia (ITP), Bone marrow biopsy for polycythemia, hemochromatosis	Varies by diagnosis and severity
Cancer	Required for all cancers except basal cell carcinoma Standard is generally the class for non-skin cancer. Varies by cancer type, so and other factors. Decline for treatment we chemotherapy or radiat 1 year.	
Chronic Lung Disease	Required for:	 Varies by cause and severity of underlying impairment Likely declined if using oxygen routinely in the past 3-6 months
Cirrhosis Not required		Decline
Clotting Disorders	Required for all bleeding/clotting disorders	 Varies by condition and control, Standard may be available Decline for venous thromboembolism or thrombosis within the last 6 months
Colitis/Ileitis (Crohn's Disease, Regional Enteritis, Ulcerative Colitis, Ulcerative Proctitis)	Required for all cases	 Varies by condition and control Possible Standard for mild severity and limited colon involvement Decline for severe attack within 1 year or surgery in last 6 months
Dementia (includes Alzheimer's Disease)	Not required	Decline
Diabetes	Required for all cases	Varies by severity and controlDecline for gestational diabetes in current pregnancy
Drug Abuse History and Treatment	Required for all cases (other than marijuana)	 Individual consideration Preferred may be available if recovered for more than 10 years Decline for illegal drug use (other than marijuana) within 3 years

Health Situation/ Medical History	APS Requirement (not required if probable decline)	Possible Underwriting Outcomes
Epilepsy/Seizures	Required if medications for epilepsy/ seizures were taken within the last 5 years	Standard may be availableDecline for recent diagnosis
Gastric Bypass Surgery	Required for surgery or procedure completed within 1–3 years	 Individual consideration, mild to moderate ratings typically apply Higher ratings up to decline apply for surgical revision(s), ongoing significant complications Decline if gastric bypass surgery within 6 months
Heart Disease Angina, Angioplasty, Bypass (Coronary Artery Disease, Coronary Bypass CABG)	Required for all cases	 Individual consideration Decline if: Uninvestigated unstable angina Angioplasty surgery less than 1 month ago CABG less than 3 months ago Heart attack (MI) within 6 months
Arrhythmia/ Palpitations (including Atrial Fibrillation, Ventricular Tachycardia, etc.)	Required for all cases	 Preferred classes may be available if well controlled or recovered Otherwise, depends on severity and presence of other conditions
Heart Attack/ Myocardial Infarction (MI)	Required for all cases	 Depends on severity and presence of other conditions Decline for event within last 6 months
Murmur, Mitral Valve Prolapse (MVP), Valve Surgery	Required for all cases except MVP with no valve problem	 Preferred classes may be available for mild MVP if no other heart conditions Decline for heart valve surgery within 6 months
Hepatitis B and C	Required	 Depends on severity, treatment, and current viral status If fully recovered, Standard may be available
Hypertension/High Blood Pressure	Varies by individual case	 Rate classes vary by blood pressure levels (see <u>Best Risk Class Guidelines</u> under Underwriting Overview section) Decline for uncontrolled blood pressure, or associated with serious cardiovascular disease
Human Immunodeficiency Virus (HIV)	Required for all cases	Varies based on age, treatment received, compliance with treatment, and other existing medical impairments

Health Situation/ Medical History	APS Requirement (not required if probable decline)	Possible Underwriting Outcomes
Kidney Disease/Disorder	Varies by condition	 Preferred classes may be available for kidney stones, infections, and simple cysts Decline likely for kidney failure, on dialysis, polycystic disease, or kidney transplant pending or received
Lupus/Systemic Lupus Erythematosus (SLE)	Required for all cases	Depends on severityDecline likely for systemic lupus with multiple organs involved
Multiple Sclerosis (MS)	Required for all cases	 Standard may be available for very stable, long-term disease Declined for rapidly progressive disease
Muscular Dystrophy	Required for all cases	Varies by condition and severity
Organ Transplant-Only Kidney and Corneal	Required for all cases	 All other organ transplant recipients are uninsurable, as are those on a transplant list Some best-case kidney transplant recipients may be eligible for high substandard rates Standard may be available for corneal transplants
Pancreatitis	Required for active pancreatitis within the past 5 years	 Varies by underlying cause, severity, recurrence pattern and recovery Standard may be available Declined for active pancreatitis within 6 months or associated with alcohol/substance abuse
Paralysis	Required for all cases	Rated according to cause and severityDeclined for quadriplegia
Bell's Palsy	Varies by individual case	Preferred classes may be available for fully recovered
Parkinson's Disease	Required for all cases	Varies by age and severityDecline likely if rapidly progressive disease or dementia is present
Peripheral Vascular Disease	Required for all cases except varicose veins	Varies by severity and associated vascular conditions
Pituitary Disorder	Required for all cases	Varies by condition and severity

Health Situation/ Medical History	APS Requirement (not required if probable decline)	Possible Underwriting Outcomes
Pregnancy	Not required for normal pregnancies	 Varies by condition and severity Declined for any complication of pregnancy (e.g., gestational diabetes, toxemia, eclampsia, pre-eclampsia)
Prostate Disorder Other Than Cancer	Required for: Prostate intraepithelial neoplasia (PIN) Prostate biopsy within 2 years Prostate-specific antigen (PSA) elevations	 Standard is best available for PIN, Preferred may be available for others May decline if evaluation/diagnosis still in process
Rheumatoid Arthritis (RA)	All cases	 Standard may be available Declined for severe disabling disease or extensive organ involvement
Sleep Apnea	 Required from diagnosing physician and/ or treatment center if within 1 year Varies for all others 	 Preferred classes may be available in best case scenarios Decline for: Uncontrolled, severe cases Multiple motor vehicle accidents Suspended driver's license due to sleep apnea
Stroke Cerebrovascular Accident (CVA) Cerebrovascular Disease (CVD) Transient Ischemic Attack or mini-stroke (TIA)	All cases	 Varies by severity, age of onset, and time since occurrence Must be > 6 months to consider Decline for multiple
Suicide Attempt	All cases	 Rate for underlying cause, severity, and response to treatment Likely declined for attempt within last 2 years
Thyroid Disorder Other Than Cancer	Required for hyperthyroid disorders including Addison's disease	 Preferred classes may be available for many thyroid disorders Decline for uncontrolled Addison's
Tuberculosis (TB)	Required if: Treatment completed within 1 year TB not confined to lungs	Standard available for fully recovered casesDecline for current treatment
Ulcer/Gastritis	Required for bleeding ulcer within 1 year	Rate for cause, severityDecline if associated with alcohol abuse

3 | NON-MEDICAL RISKS

Risk	Questionnaire	Possible Underwriting Outcomes
Aviation (Private piloting)	Aviation Questionnaire	 Subject to risk assessment of aviation activity Flat extras apply for student pilot Aviation Exclusion Rider (AER) for: Ages 75+ Foreign National Comorbid medical history including: Coronary artery disease/stroke, Epilepsy/Seizure disorder, and Insulin-dependent diabetes (Contact your underwriting team for more information)
Bankruptcy	Financial Questionnaire	Decline if any bankruptcy that has not been discharged for >1 year or payment plan confirmed.
Criminal Activity		Decline if: Major and/or multiple felonies Currently in jail or on parole or probation, or if a year or less since discharge Awaiting trial/pending charges
Driving History		 Best class available if qualifies medically and motor vehicle records assessed as Standard Decline if: Single DUI in past 12 months More than 1 DUI/DWI in the past 5 years Significant/numerous traffic violations
Hazardous Occupation or Avocation	Avocation Questionnaire	 Decline for BASE jumping, wing diving Best class may be available for recreational diving less than 130 feet

3 NON-MEDICAL RISKS (continued)

Risk	Questionnaire	Possible Underwriting Outcomes
Foreign Residence	 Foreign Residence and Future Foreign Travel Questionnaire Wealthy Global Citizen Certification May also need a copy of passport and visa 	 Please reference Wealthy Global Citizen guidelines Decline for countries designated as level 4 travel advisory by the U.S. Department of State` Some temporary visa types considered: B-1 visa (business visitor) E-1 visa (treaty traders from countries which have a bilateral trade agreement with the U.S.) E-2 visa (treaty investors from countries which have a bilateral trade agreement with the U.S.) EB-5 visa (for investors and entrepreneurs that provides a path to permanent resident status in the U.S.) H-1B Visa (temporary workers) K-3 Visa (spouses of U.S. citizens) L-1 Visa (intracompany transferees such as executives and managers working with specialized knowledge) O Visas (extraordinary ability—artists, athletes, scientists, etc.)
Foreign Travel (special state guidelines may apply)	 Foreign Residence and Future Foreign Travel Questionnaire or Foreign Travel or Resident Supplement 	 Decline for countries designated as level 4 travel advisory by the U.S. Department of State

4 | WEALTHY GLOBAL CITIZEN

Proposed insureds who are U.S. citizens or permanent residents will generally be considered under the domestic underwriting requirements. Pacific Life defines a "permanent resident" as a non-U.S. citizen with acceptable evidence of permanent residence status. **PL Promise products excluded.**

Criteria	Yes	No
Eligible Person	 Worldwide assets of at least \$5M Resides outside the U.S. for 183 days or more each year Visits the U.S. for at least 15 days each year 	 Aid workers Aviation pilots, including commercial pilots Journalists Judicial personnel Politically exposed persons Military Missionaries Police force personnel Political and government officials Sports figures Trade union officials
Eligible Products and Riders	 Most cash value and fully underwritten life insurance products (including term riders) One life uninsurable not available for joint life insurance products 	 All term life insurance products (Term life insurance is not available for foreign nationals but may be available for U.S. persons living abroad or for U.S. businesses in need of key person life insurance) Any long-term care or chronic illness rider Any other evidence-based rider
Issue Ages	Ages 20-75 for Class A and B countries and max age 70 for Class C	
Minimum Face Amount	\$1M for each policy issued	
Ownership	 All policies must be owned by either a U.S. entity (e.g. a trust or limited liability company formed under U.S. laws) with a U.S. address or an individual with an insurable interest in the proposed insured Foreign entities (e.g. offshore trusts) are not permitted to be policyowners Each policyowner must either have a taxpayer identification or a completed W-8BEN form number 	

4 | WEALTHY GLOBAL CITIZEN (continued)

Proposed insureds who are U.S. citizens or permanent residents will generally be considered under the domestic underwriting requirements. Pacific Life defines a "permanent resident" as a non-U.S. citizen with acceptable evidence of permanent residence status. **PL Promise products excluded.**

Criteria	Yes	
U.S. Nexus	A meaningful U.S. economic tie must include one or more of the following:	
	U.S. business interest/employment	
	 U.S. real estate ownership 	
	 U.S. investment holdings with a minimum deposit of \$250,000 titled to the proposed insured, presence of immediate family member in the U.S. 	

5 FINANCIAL UNDERWRITING GUIDELINES

Financial underwriting is a key part of the underwriting process. For cases over \$3,000,000, Underwriting can go faster and more smoothly if you submit the case with a fully completed application, explanatory cover letter and documentation supporting the amount of insurance applied for. A cover letter should include:

- Reason for the life insurance
- How the amount applied for was determined
- Total amount of life insurance on the insured's life with all companies
- Pending life insurance application
- Life insurance to be replaced
- Reason for unusual or complex ownership and beneficiary designations

With your cover letter, please include the illustrations or quote and financial statements to help demonstrate the need for life insurance.

Use the following financial guidelines but remember, the following charts are intended as a guideline only and are subject to Underwriter financial review and assessment of each case.

You may use these guidelines to help your clients and to determine the information we need in order to evaluate the case.

Personal Life Insurance

Purpose	Parameters		
Income Replacement	The allowable amount of life insurance is a function of earned income multiplied by an age-linked factor.		
	Age	Factor	Example Your 60-year-old client earning \$100,000
	20-30	40	annually may qualify for a \$1.5 million policy
	31-55	70 – Age = Factor	(15 x \$100,000 = \$1.5 million).
	56-60	15	
	61-65	10	
	66-75	5	
	76+	individual consideration	
Estate Preservation	For estates, the maximum death benefit amount is calculated by compounding the client's current net worth using a reasonable growth rate (usually 5–7%), over a number of years equal to 55% of the (younger) client's life expectancy, not to exceed 20 years.		

Purpose	Parameters		
Asset Repositioning	This section applies to individuals who have accrued money in both qualified (401k, IRA, etc.) and nonqualified (savings, certificates of deposit or CDs, etc.) accounts, and choose to convert those funds into life insurance products. To be considered, the applicant should have a minimum net worth of \$1 million. In addition, we'll review the applicant's ability to pay the premium using the affordability guidelines below. NOTE: If an insured otherwise qualifies under Estate Preservation or Income Replacement, this section does not apply.		
	 The following guidelines will be used when liquid assets are used to pay premiums: Under Age 59½: Up to 40% of their liquid net worth. Qualified plans (401(k), 403(b), 457, IRA or Roth IRA) cannot be used as a funding source nor can they be used to factor into the client's liquid net worth. Ages 60–69: Up to 30% of their liquid net worth. Qualified plans may be considered in factoring into the client's net worth and as a funding source. Ages 70+: Up to 20% of their liquid net worth. Qualified plans may be considered in factoring into the client's net worth and as a funding source. 		
Charitable Coverage	 The life insurance amount is based on the insured's established record of giving. Personal insurance needs should already be met. Use the amount of annual giving, 25x the pattern of historical annual giving, up to 50% of personal coverage. 		
Homemaker Spouse Coverage	 An unemployed spouse may qualify for coverage using the Income Replacement factors above, using his/her age, and 50% of the working spouse's income. Consideration is based on the couple's joint income and net worth, the insurance in place on the income-earning spouse, and the total life insurance on both. 		
Juvenile Coverage*	 All siblings are similarly insured. The parent should have a minimum of two times (and preferably four times) the life insurance as that proposed on the child. Consideration is given to the purpose of coverage and the family's net worth. Example Your clients—a couple each with a \$1 million policy—may qualify for \$250,000 juvenile insurance for each of their children. 		

^{*}Coverage only as permitted by individual state laws.

Business Life Insurance

Purpose	Parameters
Key Person	 Used to indemnify the company against the loss of an employee whose skills and contributions are critical to the firm. In most cases, use a factor of 5x–20x the individual's annual regular and recurring income to determine the amount permitted. Age, level of managerial or technical experience, unique and special skills, and prior track record of success are considerations in determining the factor used.
Buy-Sell/Stock Redemption	 It is expected that all owners of the business should be covered, commensurate with their ownership percentages. Establish the value of the business using the net income of the business over the past two to three years. Multiply it by a factor between five and ten (the viability of the business is used to determine the factor used). Then multiply by the percentage of the business owned by the individual.
Cannabis Industry	 Pacific Life does not issue coverage in the cannabis/marijuana industry, either for business owners or employees.
Debt Repayment	 The business usually owns the policy, and the death benefit is assigned to the lending institution. The sum of insurance for this purpose should not exceed 80% of the loan value.
Venture Capital	When coverage is requested due to an infusion of capital into a business, the following guidelines apply:
	 If the policy will be owned by the business itself (not the investment company), general key person/buy-sell guidelines apply, with consideration given to the size of the investment and future expectations of growth for the business. If the policy will be owned by the investment company, it must have purchased a controlling stake in the business. Then, general key person/buy-sell guidelines will apply, with consideration given to the size of the investment and future expectations of growth of the business.

Financial Underwriting Requirements

Issue Age	Amount Underwritten	Requirement
0–17	Consult Risk Selection	Electronic Inspection ReportNo contact with the proposed insured
18–69	\$1,000,000 plus	Electronic Inspection ReportNo contact with the proposed insured
All ages	Upon request	 Third-party financial statements Statements that verify current net worth and income over the last three years Tax returns may be required on a case-by-case basis

Underwriting may require tax returns and/or third-party financial statements, at or below these amounts, when circumstances warrant it.

Reinsurance Limits

Single Life Cash Value-Fully Underwritten

All Tables through Table H

Age	PL Retention	Autobind (exluding retention)	Jumbo
0–19	\$30,000,000	\$10,000,000	\$65,000,000
20-65	\$30,000,000	\$45,000,000	\$65,000,000
66–70	\$30,000,000	\$32,500,000	\$65,000,000
71–75	\$30,000,000	\$25,000,000	\$65,000,000
76–80	\$20,000,000	\$15,000,000	\$65,000,000
81–85	\$10,000,000 (Through Table B)	\$5,000,000 (Through Table B)	\$30,000,000
86–90	\$5,000,000 (Standard Only)	No Autobind	N/A

Joint Survivor Life (JSL) Cash Value-Fully Underwritten

Age	PL Retention	Autobind (exluding retention)	Jumbo
20–65	\$35,000,000	\$45,000,000	\$65,000,000
66–70	\$35,000,000	\$32,500,000	\$65,000,000
71–75	\$35,000,000	\$25,000,000	\$65,000,000
76–80	\$25,000,000	\$15,000,000	\$65,000,000
81–85*	\$15,000,000 (Through Table B)	\$5,000,000 (Through Table B)	\$30,000,000
86–90**	\$10,000,000 (Standard Only)	No Autobind	N/A

For JSL, if one life is uninsurable, use Single Life Cash Value—Fully Underwritten limits on the healthy life to determine retention and autobinding limits.

^{*}For ages 81–85, Substandard Table Ratings higher than D are considered uninsurable.

^{**}For ages 86–90, Substandard Table Ratings higher than Standard are considered uninsurable.

Reinsurance Limits (continued)

PL Promise Term

Age	PL Retention	Autobind (Excluding Retention)	Jumbo
18–70	\$30,000,000 (Available through Table H)	\$40,000,000 (Available through Table H)	\$65,000,000
71–75	\$30,000,000 (Available through Table H)	\$4,000,000 (Available through Table F)	\$65,000,000
76–80	\$20,000,000 (Available through Table H)	\$4,000,000 (Available through Table F)	\$65,000,000

PL Promise GUL

Age	PL Retention	Autobind (Excluding Retention)	Jumbo
0–19	\$30,000,000 (Available through Table D)	\$20,000,000 (Available through Table D)	\$65,000,000
20–70	\$30,000,000 (Available through Table H)	\$20,000,000 (Available through Table H)	\$65,000,000
71–75	\$30,000,000 (Available through Table H)	\$6,000,000 (Available through Table B)	\$65,000,000
76–80	\$20,000,000 (Available through Table H)	\$6,000,000 (Available through Table B)	\$65,000,000

Auto Excess





Available on Pacific Life single life and survivorship life insurance applications⁷ (now includes **Pacific Elite Term**⁸)



Available to all individuals ages 18 to 70



Includes all risk classes up to Table D

⁷Final amount determined by available capacity. Excludes PL Promise GUL (Form series P18PRUL, S18PRUL, varies based on state of policy issue) and PL Promise Term (Form series P16LYT and S16LYT10, S16LYT15, S16LYT20, S16LYT25, or S16LYT30, varies based on level premium period chosen and state of policy issue).

⁸Pacific Elite Term (Form series P12TRF and P12TRF 10,20,30, varies based on level premium period chosen and state of policy issue) is term life insurance with level premium periods.

6 | PREFERRED PROVIDERS AND PAYMENT GUIDELINES

Vendor Name	Contact Information	Services Provided
American Paramedical Systems, Inc. (APPS)	(800) 727-2101 (516) 822-6230 appslive.com	Paramed
ExamOne	Customer Service & IRS (800) 768-2058 Paramed (877) 922-9261 examone.com	Paramed
Insurance Medical Services Inc. (IMS)	(510) 962-9315 (877) 808-5533 imsparamed.com	Paramed
JetStream	(310) 826-3759 jetstreamaps.com	APS
Parameds.com (PDC)	(718) 575-2000	APS
Release Point	(800) 999-9589	APS
Express Imaging Services (EIS)	(888) 846-8804	APS
Clinical Reference Lab (CRL)		APS

Important Payment Guidelines

- Pacific Life will make direct payments only to the medical requirement providers that are contracted with Pacific Life (refer to Approved Vendors list).
- Life insurance producers or firms choosing to use medical requirement vendors not included on the Approved Vendors list will do so pursuant to their own business arrangements and only the cost of the requirement will be reimbursed, excluding any procurement costs.
- Upon receipt of a request for reimbursement of fees associated with an APS from a non-preferred provider, Pacific Life will only reimburse APS expenses up to \$150. Please refer to the <u>FAQs</u>.

6 | PREFERRED PROVIDERS AND PAYMENT GUIDELINES (continued)

FAQs

1. How do I order an Inspection or Motor Vehicle Report?

These requirements are ordered by Pacific Life upon receipt of the application. There is no action necessary by the firm or producer.

2. Will Pacific Life pay for medical requirement fulfillment services arranged by a firm or producer?

Yes, if the following two conditions are met:

- The requirements are ordered to meet Pacific Life underwriting guidelines, and
- The requirements have been received in connection with the underwriting of a formal Pacific Life life insurance application.

Note: Pacific Life will make direct payments only to the medical requirement fulfillment providers that are contracted with Pacific Life and included on the list of preferred providers. Review answer to Question 4 for additional details.

3. Will Pacific Life reimburse a producer or firm for APS fees?

As noted in Question 2, Pacific Life will pay for underwriting requirements that are required by us and have been received in connection with the underwriting of a formal Pacific Life life insurance application with the following exceptions:

- Producers of firms that choose to use a medical requirement fulfillment provider that is not one of Pacific Life's preferred providers will do so pursuant to their own business arrangements.
- Upon receipt of a request for reimbursement of APS fee associated with medical requirements arranged by a producer
 or firm from a non-preferred provider and proof of payment, Pacific Life will reimburse the producer or firm
 for such expenses up to a maximum of \$100.

4. Will Pacific Life accept a paramedical exam from a non-preferred provider?

Paramedical services preformed by non-preferred providers are subject to approval from a Pacific Life underwriter. If approved, reimbursement of fees will be subject to rates and standards deemed acceptable to Pacific Life. In addition, the exam cannot be performed by the PCP.

5. How should a reimbursement request be submitted?

Submit your requests for reimbursements and include a copy of the invoice and proof of payment. Submit a completed W-9 form, if it is your first reimbursement request. You may submit your reimbursement requests via email to:

- APSReimbursements@PacificLife.com
- Reimbursement requests must be submitted no later than six months after requirement receipt or formal application submission.
- Most reimbursement requests are processed within 30 days from the time Pacific Life receives the request, formal application, and medical requirements. If you have additional questions, please contact APSReimbursements@PacificLife.com.

Pacific Life is a product provider. It is not a fiduciary and therefore does not give advice or make recommendations regarding insurance or investment products.

Pacific Life Insurance Company is licensed to issue insurance products in all states except New York. Product/material availability and features may vary by state.

Insurance products and their guarantees, including optional benefits and any crediting rates, are backed by the financial strength and claims-paying ability of the issuing insurance company. Look to the strength of the life insurance company with regard to such guarantees as these guarantees are not backed by the broker-dealer, insurance agency, or their affiliates from which products are purchased. Neither these entities nor their representatives make any representation or assurance regarding the claims-paying ability of the life insurance company.

Life insurance is subject to underwriting and approval of the application and will incur monthly policy charges.

The home office for Pacific Life Insurance Company is located in Omaha, Nebraska.

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