

# Medical underwriting guidelines

## Overview

In this section, we give you four resources that will help you assess your clients' eligibility for our health plans:

1. Height and weight tables
2. Declinable conditions
3. Probable action guideline
4. IFP Probable Underwriting Decision Request

## How to use this section

We recommend that you cross-reference the four resources in this section as needed to compile a complete picture for your clients. For example, while some forms of aneurysm are listed in the declinable conditions table, there are two scenarios that qualify for possible eligibility at the Tier 1 rate or at a higher tier rate.

### 1. Height and weight tables

The height and weight guidelines are for IFP only, and apply to applicants who do not qualify for HIPAA guaranteed-issue coverage.

### 2. Declinable conditions

IFP applicants age 19 or older and Medicare Supplement applicants with any of the conditions listed in this table may be automatically declined. In this case, clients may qualify for acceptance in a HIPAA guaranteed-issue IFP or Medicare Supplement plan. Find out more by referring to:

- *Application for Blue Shield Individual and Family Health Plans*; or
- *Guaranteed Acceptance Guide for Medicare Supplement plans*.

### 3. Probable action guideline

This section applies only to IFP (HIPAA non-guaranteed-issue) applicants. It lists Blue Shield's probable actions guideline for a single applicant who has a listed condition as the only health condition. The guideline identifies medical conditions and the three possible underwriting determinations:

- Possible eligibility for coverage at the Tier 1 rate
- Possible eligibility for coverage at a higher tier rate
- Possible or probable decline (for applicants age 19 or older)

Remember, approval to add a dependent to an existing contract in a grandfathered plan is not guaranteed. Applicants under age 19 may be declined.

### 4. IFP Probable Underwriting Decision Request form

If you want to know how Blue Shield might underwrite your client in advance of submitting an actual application, complete a Probable Underwriting Decision Request form (available on page 55) and fax it to Underwriting. We can tell you if your client is likely to be covered, and at what tier rating. Underwriting provides this service as a courtesy to help you understand possible eligibility. Blue Shield's response is based on the information provided on the form. *Please note: Blue Shield only makes final decisions for coverage based on a signed, complete application.*

Multiple conditions, treatment type (including medication), and multiple family members with health conditions may affect the probable action and final determination for an applicant.

## Guideline scope

This guideline covers the more common disorders. Of course, not all conditions in existence can be captured in this type of list. Any conditions not on this list would require underwriting, and some conditions on this list might require underwriting upon further review of an individual's application.

### **This chart is not a guarantee of a specific medical underwriting decision.**

- *Only Blue Shield underwriters may make the final decision to accept or decline an application, or determine the rate level or an effective date.*
- Decisions are based on an applicant's medical history, the overall risk the applicant poses, and current underwriting guidelines (which may change throughout the year).
- Blue Shield may use any medical information in reviewing an application, including any medical condition that occurs after the signature and submission of the application and before an underwriting decision is made (or before the effective date of coverage).
- Brokers are not authorized to bind or guarantee coverage for a specific rate or an effective date.

**To help you assess probable underwriting decisions, we offer the IFP Probable Underwriting Decision Request. See the "Broker Resources" section for details.**

## Condition time frames

- Any time frames specified refer to a continuous time period before applicants applied for coverage, during which they were symptom-free and did not require any treatment for the condition.
- If no timeframes are indicated, the applicant must be fully recovered without further treatment anticipated or recommended to qualify for possible eligibility.

Coverage consideration cannot be made if:

- Symptoms are undiagnosed or untreated.
- Recovery from recent treatment or procedures is not complete.
- Further evaluation or treatment for symptoms or conditions is recommended, anticipated, or pending.

## Surrogate pregnancies and coverage

Coverage will be declined until after the delivery of a child, or for two years after the surrogacy process has been discontinued, for applicants who:

- Plan to serve as a surrogate for a pregnancy; or
- Have applied to a surrogate agency; or
- Have begun surrogacy workup or treatment; or
- Intend to contract or have contracted for a surrogate pregnancy; or
- Plan to adopt a baby or babies resulting from a surrogate pregnancy.

## 1. Height and weight table

**General:** These height and weight guidelines apply to all IFP applicants who do not qualify for HIPAA guaranteed-issue coverage. These guidelines do **not** apply to Medicare Supplement plan applicants.

**Overweight:** All IFP applicants whose weight falls between the maximum and overweight categories require underwriting review, and must provide results of a physical examination performed within the past 12 months. However, applicants age 19 and older, whose weight equals and/or exceeds the values in the overweight column, will be declined.

**Underweight:** All IFP applicants whose weight is at or below the minimum weight category require underwriting review.

### IFP adult height and weight table

Male			Height		Female		
Overweight	Maximum	Minimum	Ft.	In.	Minimum	Maximum	Overweight
181	164	95	4	8	94	160	180
185	167	99	4	9	96	163	184
190	170	103	4	10	98	167	188
194	173	107	4	11	99	171	192
199	177	111	5	0	102	175	197
203	181	114	5	1	105	179	202
208	185	116	5	2	107	183	207
213	190	120	5	3	110	187	212
218	195	123	5	4	112	192	217
224	199	127	5	5	115	196	222
230	205	130	5	6	118	201	227
236	210	133	5	7	121	206	232
243	216	137	5	8	124	211	238
249	222	140	5	9	128	217	244
255	228	144	5	10	131	224	251
262	232	148	5	11	135	230	259
269	240	152	6	0	139	238	268
276	248	156	6	1	143	246	275
283	256	160	6	2	147	251	281
290	264	164	6	3	151	258	288
298	272	169	6	4	153	265	296
306	280	173	6	5	156	272	304
314	288	178	6	6	160	279	312
322	296	182	6	7	164	286	320
330	304	186	6	8	171	294	328

### Child height and weight tables

While weight is a consideration when evaluating a child's application for coverage, more than weight is considered. All children applicants are encouraged to apply regardless of their weight.

## 2. Declinable conditions (applies to applicants age 19 and older)

IFP and Medicare Supplement plan applicants who have any of the conditions listed below may be declined without medical record review.

Acromegaly	Back sprain/strain, chronic	Cytomegalovirus	Hemangioendothelioma
Adoption in progress	Banti's disease	Dandy Walker Syndrome (see hydrocephalus)	Hemochromatosis
AIDS	Barrett's esophageal ulceration	Delirium tremens	Hemoglobinuria
AIDS-related complex (ARC)	Basal cell skin cancer, multiple removals in one site	Demyelinating disease	Hemophilia
Alzheimer's	Behcet's syndrome	Dermatomyositis	Hepatitis: all those other than A, B, or E
ALS, Lou Gehrig's disease	Bicuspid aortic valve	Diabetes with hypertension or weight exceeds the normal range or on insulin pump	Hepatitis: any type – present, chronic or persistent
Amputation, single or bilateral foot or leg	Bipolar disease	Diabetic neuropathy	Herpes Zoster: eye or ear Involvement
Anaplastic carcinoma	Bladder stones, present	Diabetic retinopathy	Hirschsprung's, unoperated
Anemia, aplastic	Bradycardia with pacemaker	Dialysis	Hodgkin's lymphoma
Anemia, Cooley's/ Mediterranean/major thalassemia	Breast microcalcifications – severe after biopsy or present without biopsy	Dysplastic nevus syndrome	Huntington's chorea
Anemia, Cooley's/ Mediterranean/minor thalassemia with symptoms	Bypass surgery – all cases	Endometriosis: symptomatic before or after surgical or natural menopause	Hydrocephalus
Anemia, hemolytic, auto-immune	Cancer, all non-localized	Esophageal ulcerations or varicosities	Hyperprolactinemia with tumor
Aneurysm – aortic, abdominal, thoracic	Cancer, liver, all cases	Factor VIII, IX, or XI disorders/deficiencies	Hypertension with diabetes or renal disease or history of stroke
Aneurysm, cerebral artery (brain) with stent/shunt	Cancer, ovarian, all cases	Fanconi's syndrome	Hypertension and exceeds the normal weight guidelines or uncontrolled or hospitalized within 1 year
Angina	Cancer, pancreas, all cases	Fasciitis: chronic or recurrent	Hypogammaglobulinemia
Angioplasty	Cardiomyopathy	Fatty liver	Immunodeficiency disorder, except HIV infection
Aortic obstruction	Carotid artery disease	Fibromyalgia	Infertility treatment within past 2 years
Aortic valve stenosis	Carotid endarterectomy	Flexion contracture	Interstitial cystitis
Apnea (see sleep apnea)	Carotid bruit	Friedrich's ataxia	Ischemic attack, transient (TIA)
Arnold-Chiari syndrome	Cellulitis, chronic	Gallstones, unoperated	Ischemic heart disease
Arteriosclerosis	Chorea, Huntington's	Gangrene, diabetic/ arteriosclerotic	Joint replacements: both knees or hips
Arteriovenous malformation, unoperated	Chronic obstructive pulmonary disease (COPD): moderate to severe or smoking	Glomerulonephritis: nephritis, chronic	Joint replacements: multiple surgeries or shoulder, elbow, wrist, ankle
Arteriovenous malformation, operated but shunt in place or with residuals	Christmas disease	Glomerulosclerosis	Kaposi's sarcoma
Arteritis, necrotizing	Cirrhosis	Goodpasture's syndrome	Kidney dialysis
Arthritis,	Coagulation defects	Gout: tophaceous or with renal involvement	Kidney stones, present
osteoarthritis severe	Colitis, ulcerative: unoperated or with colectomy	Guillain-Barre syndrome: present or with residuals	Kimmelstiel-Wilson syndrome
Arthritis, psoriatic	Colitis, ulcerative with or ileostomy or colostomy	Hamman-Rich disease	Kleinfelter's syndrome
Arthritis, rheumatoid: chronic, severe, or under treatment	Congestive heart disease	Hansen's disease (leprosy)	Leprosy (Hansen's disease)
Atrial fibrillation on blood thinners	Connective tissue disease	Heart attack, myocardial infarction	Leriche syndrome
Atrial tachycardia	Cor pulmonale	Heart enlargement	Leukemia
Asbestosis	Corneal degeneration	Heart pacemaker	Lou Gehrig's disease
	Corneal ulcer: chronic and unoperated	Heart valve replacement	
	Coronary artery/heart disease	Heart valve stenosis	
	Cretinism		
	Cystic fibrosis		

Lupus erythematosus: discoid – chronic	Peripheral vascular disease	Rotator cuff: unoperated, symptomatic	Toxoplasmosis
Lupus erythematosus: systemic	Phlebitis, deep vein: present or on anti-coagulants	Sarcoidosis	Tracheotomy: present
Lyme's disease: chronic or symptomatic	Pleurisy, unresolved	Schizophrenia	Transient ischemic attack (TIA)
Lymphedema	Pneumocystis Carinii	Scleroderma: recurrent, extensive or diagnosed within 1 year	Transplants: all except corneal
Lymphoma (Hodgkin's and non-Hodgkin's)	Polio with bladder or bowel residuals	Sezary's syndrome	Transposition of the great vessels: unoperated
Macular degeneration: exudative	Polycystic kidney	Shingles: eye or ear involvement	Treatment with AZT, HIVID, or pentamidine
Major depression	Polycystic ovaries (Stein Levinthal syndrome) without removal of ovaries	Shunts or stents	Trigeminal pulse
Manic depression	Polycythemia vera	Sick sinus syndrome	Tuberculosis, epididymus
Marfan's syndrome	Polymyositis	Sickle cell anemia	Turner's syndrome
Mitral valve prolapse: more than trace regurgitation or not on prophylactic antibiotics	Polyp, anal or rectal: more than 4 and/or unoperated	Sjogrens syndrome	Ulcer, peptic: active within 2 years or H. pylori positive
Mitral valve stenosis	Polyp, bladder: present or recurrent	Sleep apnea: obstructive or poorly controlled or requiring CPAP (continuous positive airway pressure)	Upper airway resistance syndrome
Multiple myeloma	Polyp, gastrointestinal: unoperated	Spina bifida, cystica: unoperated or operated with residuals	Urethral stricture: chronic, recurrent
Multiple sclerosis	Pott's disease	Spinal curvature: kyphosis, scoliosis or kyphoscoliosis, unoperated	Uterine fibroid tumor: unoperated, multiple, and/or moderate-to-large size
Muscular dystrophy	Pregnancy of self, spouse, or significant other (excludes males applying for individual-only plans)	Stein-Leventhal syndrome (polycystic ovaries)	Valve disease, valve replacement
Myasthenia gravis	Progeria	Stroke within 10 years	Varicose veins: moderate to severe
Myocardial infarction	Prostate stones with prostatitis	Subdural hematoma: unoperated	Ventricular fibrillation
Nephrectomy: persistent renal or cardiovascular abnormalities	Psoriasis, severe	Superior vena cava syndrome	Ventricular tachycardia
Neuroblastoma	Psoriatic arthritis	Surrogacy planned within 2 years with surrogate mother or applicant as surrogate	Von Recklinghausen's disease
Neurofibromatosis	Psychopathic personalities	Syphilis: tertiary	Von Willebrand's disease
Nevus: dysplastic syndrome or giant melanocytic	Psychotic disorders	Syringomyelia	Wegener's granulomatosis
Non-Hodgkin's lymphoma	Pulmonary embolism: present	Systemic lupus erythematosus	Wolff-Parkinson-White syndrome: without cardiac ablation
Obesity with prior surgery	Pulmonary fibrosis	Tabes dorsalis	
Osler-Weber-Rendu disease	Pulmonary hypertension	Tay-Sachs disease	
Otosclerosis, unoperated	Pulmonary osteoarthropathy	Temporal arteritis	
Pacemaker	Pulmonic stenosis	Temporomandibular joint syndrome (TMJ): operated with residuals	
Pancreatitis: recurrent or chronic or secondary to alcoholism	Quadruplegic paralysis	Thalassemia major	
Paralysis: quadriplegia, paraplegia	Reiter's syndrome: symptomatic	Thrombocytosis	
Parkinson's disease	Renal failure: chronic or end stage	Tonsillitis: chronic, recurrent (5 or more attacks per year)	
Pelvic inflammatory disease (PID): present	Retinoblastoma		
Pemphigus	Rett's syndrome		
Pericarditis: constrictive	Rheumatic heart disease		

**3. Probable action guideline** for IFP plan applicants ("Possible or probable decline" applies to applicants age 19 and older)

Important note: A request to add a dependent under age 19 to an existing contract in a grandfathered plan is not guaranteed, and may be declined based on health risk.

**Probable action guideline**

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>A</b>				
<b>Abnormal Pap test</b>	See cervical dysplasia			
<b>Abnormal uterine bleeding</b>	Postmenopausal after 1 year, resolved	X	X	
<b>Abscess</b>				
Brain	After 2 years, fully recovered		X	
Liver	Fully recovered		X	
Lung	After 1 year, fully recovered		X	
Peritonsillar	Unoperated, fully recovered		X	
	Operated	X		
Pilonidal	Fully recovered	X	X	
<b>Acid indigestion</b>	See esophagitis			
<b>Acid reflux</b>	See esophagitis			
<b>Acne</b>	Dependent on severity and treatment	X	X	X
<b>Acoustic neuroma</b>	Operated, after 2 years, fully recovered		X	
<b>Addison's</b>	Within 5 years or chronic			X
	After 5 years, fully recovered		X	X
<b>Agoraphobia</b>	No episodes or medications	X	X	
<b>Alcoholism</b>	After 2 years of abstinence		X	X
<b>Allergies</b>	Testing in progress		X	X
	Most cases	X	X	
<b>Anemia</b>				
Aplastic	All cases			Auto decline
Iron deficiency	Most cases	X		
Hemolytic				
	Auto-immune	Without splenectomy		Auto decline
	After splenectomy, asymptomatic, fully recovered	X	X	
Cooley's (Thalassemia, Mediterranean)	Major or minor with symptoms			Auto decline
	Minor, asymptomatic	X		
Macrocytic	After 1 year, recovered, no treatment	X	X	

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Anemia (continued)</b>				
Pernicious	Normal blood count and hemoglobin after treatment	X	X	X
Sickle	Sickle cell trait only	X		
	Sickle cell anemia			Auto decline
<b>Aneurysm</b>	Unoperated			Auto decline
Cerebral	Operated, fully recovered, after 2 years		X	X
Peripheral artery	Operated, fully recovered, after 1 year		X	
<b>Anorexia nervosa</b>	Recovered, no further treatment, after 1 year	X	X	
<b>Aortic coarctation</b>	See congenital heart defects			
<b>Apnea</b>				
Apnea of the newborn	All cases	X	X	
Sleep apnea	Obstructive, poorly controlled, or requiring CPAP			Auto decline
	Operated, after 6 months, asymptomatic, fully recovered, no CPAP, without tracheotomy		X	
	Tracheotomy present			Auto decline
<b>Arteriovenous malformation</b>				
All cases	Unoperated			Auto decline
Brain	Operated, with shunt			Auto decline
	Operated, no shunt, but residuals			Auto decline
	Operated, no shunt, no residuals, after 1 year	X	X	
Extremity	Operated, no residuals, after 6 months	X	X	
Lung, aorta, gastrointestinal	Operated, no residuals, after 6 months		X	X
<b>Arthritis</b>				
Osteoarthritis	Mild to moderate	X	X	
	Severe			Auto decline
Rheumatoid, juvenile	All cases		X	X
Rheumatoid	After 2 years, no medication, asymptomatic		X	X
	Chronic, severe or under treatment			Auto decline
<b>ASD (atrial septal defect)</b>	See congenital heart defects			
<b>Asthma</b>				
	Mild, occasional episodes, never in emergency room or hospital	X	X	
	Moderate to severe, frequent episodes, history of emergency room visits and hospitalizations		X	X

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Atrial fibrillation or flutter</b>	Resolved, after 4 years		X	X
<b>Atrial septal defect (ASD)</b>	See congenital heart defects			
<b>Attention deficit hyperactive disorder</b>	Counseling and/or medication treatment		X	X
	Controlled, asymptomatic, no meds, no psychotherapy	X		
<b>Autism</b>	Testing complete, depending on treatment		X	
<b>B</b>				
<b>Back sprain/strain</b>	Single episode, no restrictions, fully recovered	X	X	
	Multiple episodes, fully recovered, no restrictions, after 6 months		X	X
	Chronic or present			Auto decline
<b>Bell's palsy</b>	If severe residuals		X	
<b>Bladder infection</b>	Single episode, fully recovered	X	X	
	Multiple episodes, fully recovered, within 1 year		X	X
	Chronic, within 2 years		X	X
	Interstitial			X
<b>Bladder, neurogenic</b>	Fully recovered, Within 2 years		X	X
<b>Bladder stones</b>	See kidney stones			
<b>Bradycardia</b>	No cardiac disease, normal EKG	X		
	Due to complete heart block, resolved, no pacemaker, after 1 year		X	
	Due to sick sinus syndrome			X
	With pacemaker			Auto decline
<b>Brain concussion</b>	Severe or with residuals			X
	Mild without residuals, fully recovered	X	X	
<b>Breast implants</b>	Saline	Fully recovered from surgery and released from care with no complications	X	X
	Silicone	Fully recovered from surgery and released from care with no complications	X	X
<b>Breast reduction</b>	After 6 months, fully recovered	X	X	
<b>Breast microcalcifications</b>	Mild to moderate after benign biopsy		X	
	Severe after benign biopsy or present without biopsy			X
<b>Bulimia</b>	Recovered, no further treatment, after 1 year	X	X	



## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Burns</b>	1 <sup>st</sup> or 2 <sup>nd</sup> degree, treatment concluded	X	X	
	3 <sup>rd</sup> degree, treatment concluded		X	X
<b>Bursitis</b>	Asymptomatic, resolved, no residuals	X	X	
	Chronic, recurrent, after 2 years		X	

## C

<b>Cancer</b>	Localized or Stage 0 or 1 can be considered			
Bladder, urinary	Recovered, no further treatment, after 2 years		X	X
Bone	Recovered, no further treatment, after 3 years		X	X
Brain/nervous	Recovered, no further treatment, after 3 years		X	X
Breast	Recovered, no further treatment, after 5 years		X	X
Cervix	Recovered, no further treatment, after 3 years		X	X
Colon/rectum	Recovered, no further treatment, after 3 years		X	X
Esophagus	Recovered, no further treatment, after 4 years		X	X
Eye (retinoblastosis)	Recovered, no further treatment, after 3 years		X	
Gallbladder	Recovered, no further treatment, after 3 years		X	X
Kidney	Recovered, no further treatment, after 3 years		X	X
Larynx	Recovered, no further treatment, after 2 years		X	X
Liver	All cases			Auto decline
Lung, bronchi	Recovered, no further treatment, after 3 years		X	X
Melanoma	Recovered, no further treatment, after 1 year		X	X
Nasal sinus	Recovered, no further treatment, after 3 years		X	X
Oral cavity, pharynx	Recovered, no further treatment, after 2 years		X	X
Ovary	All cases			Auto decline
Pancreas	All cases			Auto decline
Peritoneum	Recovered, no further treatment, after 4 years		X	X
Prostate	Recovered, no further treatment, after 2 years		X	X
Skin	Basal, treated	X	X	
	Squamous, treated, after 2 years		X	
<b>Cancer (continued)</b>				
Stomach	Recovered, no further treatment, after 4 years		X	X
Testicular	Recovered, no further treatment, after 3 years		X	X
Thyroid	Recovered, no further treatment, after 1 year		X	X

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
Uterine	Recovered, no further treatment, after 1 year		X	X
<b>Cardiac arrhythmia</b>	Present or on long-term blood thinners			X
<b>Carpal tunnel syndrome</b>	Unoperated		X	X
	Operated, recovered, no further treatment	X	X	
<b>Cataracts</b>	Unoperated		X	X
	Operated, recovered, no further treatment	X	X	
<b>Cerebral palsy</b>	Mild only	X	X	
<b>Cervical dysplasia</b>	Abnormal Pap smear			X
	Two (2) normal Pap tests 6 months apart following the abnormal Pap		X	X
<b>Chiropractic treatment or physical therapy</b>	Rating dependent on medical diagnosis and frequency of therapy			
<b>Cholesterol</b>	See hypercholesterolemia			
<b>Chronic fatigue syndrome</b>	Fully functional without restrictions, no symptoms or medications, after 2 years	X	X	
<b>Chronic obstructive pulmonary disease (COPD)</b>	Consider pulmonary function tests, smoking history			
	Mild, after 5 years smoking cessation, no treatment		X	
	Moderate to severe or smoking			Auto decline
<b>Chronic pain</b>	Within 1 year			X
	No further treatment/medications, no symptoms	X	X	
<b>Cleft lip/palate</b>	Operated, within 2 years		X	X
	Operated, correction complete, after 2 years	X	X	
	Unoperated, over age 19		X	X
<b>Club foot</b>	No treatment anticipated/recommended	X	X	X
<b>Coarctation of the aorta</b>	See congenital heart defects			
<b>Coccidioidomycosis</b>	See Valley fever			
<b>Colitis</b>	Ulcerative	Total colectomy		Auto decline
		Partial colectomy or ileostomy or colostomy		Auto decline
		Unoperated		Auto decline
<b>Colitis (continued)</b>				
Non-ulcerative	Mild or moderate, fully recovered	X	X	
	Severe after 5 years, fully recovered		X	
<b>Congenital familial polyposis</b>	Operated, after 5 years		X	X

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Congenital heart defects</b> ASD – atrial septal defect PDA – patent ductus arteriosis VSD – ventricular septal defect	All cases		X	X
Coarctation of aorta	All cases	X	X	X
Dextrocardia	No symptoms or abnormalities	X	X	
<b>Convulsive disorder</b>				
Febrile	After 1 year, seizure free		X	X
Others	After 2 years, seizure free		X	X
<b>Corneal ulcer</b>	Acute	X	X	
	Chronic and unoperated			Auto decline
	Operated, fully recovered	X	X	
<b>Craniosynostosis (infant)</b>	Operated, fully recovered, after 2 years		X	
<b>Crohn's disease</b>	No symptoms, after 3 years		X	X
	Operated, after 12 months, no ileostomy or colostomy		X	X
<b>Cystocele</b>	Operated, fully recovered	X	X	
<b>D</b>				
<b>Depression</b>	See mental/emotional disorders			
<b>De Quervain's disease</b> (stenosing tenosynovitis)	Successful surgery or medical treatment, released from care	X	X	
<b>Detached retina</b>	Operated, fully recovered, after 1 year		X	X
<b>Deviated septum</b>	Unoperated		X	X
	Operated, fully recovered, asymptomatic	X	X	
<b>Diabetes</b>				
Gestational	Normal GTT, after delivery	X	X	
Insipidus	Before 30 years of age, after 2 years from onset		X	X
	After 30 years of age, after 5 years from onset		X	X
Mellitus	Controlled, no complications, within weight guidelines, normal lab work		X	X
• Type 2 – treated with oral medications	Other than above (with hypertension, neuropathy, retinopathy, abnormal lab work, overweight guidelines, etc.)			Auto decline
• Type 1 – insulin dependent	Requiring insulin pump			Auto decline

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Diaphragmatic hernia</b>	Unoperated: See esophagitis			
	Operated, fully recovered	X	X	
<b>Disc disease, herniated</b>	Unoperated, asymptomatic, after 1 year		X	
	Unoperated, symptomatic			X
	Operated, asymptomatic, no treatment, after 6 months		X	
<b>Dislocation – shoulder, elbow, wrist, ankle</b>	Single episode, symptom/treatment-free	X	X	
	Multiple episodes, after 3 years, no residuals	X	X	
<b>Diverticulitis</b>	Resolved, responsive to treatment	X	X	
	Operated, recovered	X	X	
	All others			X
<b>Down's Syndrome</b>	No cardiac or other complications		X	
	Cardiac involvement, operated, asymptomatic, after 1 year		X	X
<b>Drug addiction, history of</b>	After 2 years of abstinence, no residuals		X	X
<b>Dumping syndrome</b>	Most cases		X	X
<b>Dupuytren's contracture</b>	Operated, after 1 year	X		
	Unoperated, no surgery anticipated		X	X
<b>Dwarfism</b>	Achondroplastic		X	
	Pituitary	Over age 20, max growth achieved, no further treatment	X	X
<b>Dysfunctional uterine bleeding</b>	Asymptomatic, after 1 year, no surgery recommended	X	X	
<b>Dyspepsia</b>	See esophagitis			
<b>E</b>				
<b>Ear infections</b>	Infrequent episodes, responsive to medication, even after surgery	X	X	
	Frequent or recurrent episodes, within 6 months, even after surgery		X	X
	After 6 months, asymptomatic, no recurrence, even after surgery	X		
	Chronic		X	X
<b>Emphysema, pulmonary</b>	See Chronic obstructive pulmonary disease (COPD)			

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Endocarditis</b>	Complete recovery, without residuals, after 3 years	X	X	
<b>Endometriosis</b>	Before menopause, minimal symptoms, within 5 years, only on NSAIDS		X	X
	Before menopause, moderate to severe symptoms			Auto decline
	After hysterectomy or menopause, asymptomatic	X	X	
	After menopause, symptomatic			Auto decline
<b>Enuresis</b>	Testing complete, consider medications	X	X	
<b>Epicondylitis</b>	No therapy, no cortisone shots	X	X	
<b>Epilepsy</b>	See convulsive disorder			
<b>Epstein-Barr virus</b>	See chronic fatigue syndrome or mononucleosis			
<b>Erectile dysfunction</b>	Testing complete, consider medications, possible further treatment/surgery		X	X
<b>Erythema multiforme</b>	Single attack, recovered	X		
	Recurrent, severe or chronic	X	X	X
<b>Esophageal stricture</b>	No symptoms or treatment, after 12 months	X	X	X
	Severe symptoms			X
<b>Esophagitis</b>	Infrequent episodes, occasional short course of meds		X	
	Frequent episodes or those requiring long-term or ongoing drug therapy		X	X
<b>Exostosis</b>	Ear involvement, symptomatic			X
	Ear involvement but asymptomatic	X	X	
	Otherwise, recovered	X	X	
<b>F</b>				
<b>Familial polyposis</b>	See congenital familial polyposis			
<b>Fasciitis</b>	Acute, no steroid injections, within 1 year		X	
	Recovered, symptom-/treatment-free, after 1 year	X		
	Chronic/recurrent or steroid injections, within 3 years			Auto decline
	History chronic/recurrent, fully recovered, symptom/treatment free, after 3 years	X		
<b>Fasciitis, necrotizing</b>	Fully recovered, after 2 years		X	X
<b>Fetal alcohol syndrome</b>	Testing complete, no complications or residuals	X	X	
<b>Fibrocystic breast disease</b>	Current, no biopsy		X	X
	Operated, benign biopsy	X	X	
	Asymptomatic, no treatment required	X	X	
<b>Fissure, anal</b>	Recovered, no residuals or further treatment	X	X	
	Chronic			X

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Fistula</b> – anal, rectal, vaginal, tracheoesophageal	Unoperated, all cases			X
	Operated, recovered, no residuals	X	X	
<b>Fractures</b> Spine	Minor – without spinal cord damage, after 1 year	X	X	
	Compression – asymptomatic, no treatment	X	X	
	Symptomatic, recovered, after 2 years		X	X
Hip Simple	Recovered, no limitations or residuals, after 3 years		X	
	No hardware	X	X	
	Hardware after 1 year		X	
<b>G</b>				
<b>Gall stones</b>	Present			Auto decline
	After surgery, no complications	X		
<b>Ganglion cyst</b>	All cases unless surgery anticipated/recommended	X	X	
<b>Gastric bypass</b>				Auto decline
<b>Gastritis</b>	Single attack	X	X	
	All others		X	X
<b>Genital warts</b>	Most cases, resolved, normal Pap test	X	X	
<b>GERD (gastroesophageal reflux disease)</b>	See esophagitis			
<b>Glaucoma</b>	Most cases	X	X	
<b>Glomerulonephritis, Nephritis</b>	Single attack after 1 year	X	X	
	Chronic			Auto decline
<b>Gonorrhea</b>	Single attack, treated	X	X	
	Multiple attacks, treated		X	X
<b>Gout</b>	Mild, occasional attacks	X	X	
	Tophaceous or with renal involvement			Auto decline
<b>Guillain-Barre syndrome</b>	Present or with residuals			Auto decline
	After recovery, no residuals	X	X	
<b>H</b>				
<b>Hammer toe</b>	Unoperated		X	X
	Operated, released from care, asymptomatic	X	X	
<b>Hashimoto's Disease</b>	Most cases, asymptomatic	X	X	

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Headaches</b>	Migraines – see separate guideline			
	Otherwise	X	X	
<b>Hearing loss</b>	Traumatic, no treatment, released from care	X		
	Otherwise	X	X	
<b>Heart attack</b>	All cases			Auto decline
<b>Heart murmur</b>	Functional, no heart disease	X		
	Otherwise, consider cause of murmur		X	X
<b>Hemorrhoids</b>	Unoperated or severe		X	X
	Asymptomatic or mild/moderate	X	X	
<b>Hepatitis</b>	Any type			Auto decline
	A, B, E, or alcohol-related	Present, chronic, or persistent		
	Recovered after 6 months	X	X	
C and all other types	All cases			Auto decline
<b>Hernia</b>	Femoral, inguinal, umbilical	Unoperated		X
		Operated	X	
Hiatal or diaphragmatic	Unoperated: See esophagitis			
	Operated, asymptomatic, no medication	X	X	
<b>Herpes</b>	Genital	X	X	
	Ocular (keratitis)			
	– Recovered, normal vision, no residuals	X	X	
	– Recovered with residuals or active, in treatment			X
	Oral	X	X	
	Zoster (shingles)			
	– Skin, single attack, no residuals	X		
– Skin, multiple attacks, after 3 years	X	X		
– Eye or ear involvement			Auto decline	
<b>Hip dysplasia</b>	Of the newborn, underwritten based on severity and treatment type	X	X	
	Otherwise, see Legg-Calve-Perthes disease			
<b>Hirschsprung's</b>	Unoperated, or operated with symptoms		X	Auto decline
	Operated, asymptomatic	X	X	
<b>HPV (Human Papillomavirus)</b>	See cervical dysplasia and genital warts			

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
Huntington's chorea	All cases			Auto decline
Hyaline membrane disease	All cases	X	X	
Hydrocele	Unoperated		X	X
Hydronephrosis	Recovered	X	X	
Hypercholesterolemia	Controlled, within normal range	X	X	
Hypertension	Controlled, no medication	X	X	
	Controlled on medication		X	
	Uncontrolled or hospital within 1 year			Auto decline
	Complications (diabetes, overweight, etc.)			Auto decline
Hyperthyroidism	See thyroid diseases			
Hypoglycemia	Infrequent, mild attacks, no diabetes	X	X	
Hypospadias	Operated, within 2 years	X	X	
Hypotension	Underwritten based on cause	X	X	X
Hypothyroid	See thyroid diseases			
<b>I</b>				
Impotence	Testing complete, consider medications, possible further treatment/surgery		X	X
Incontinence, stress	Underwritten based on cause or pending surgery	X	X	X
Infertility	Current treatment and/or within 2 years			Auto decline
	No further tests, attempts, meds, etc., after 2 years	X		
Intestinal obstruction	Single attack, unoperated, after 1 year	X	X	
	Multiple attacks after 5 years		X	X
Intussusception	Operated, recovered	X	X	
Iritis	Single occurrence, after 6 months, no residuals	X	X	
	Multiple occurrences, after 1 year, no residuals	X	X	
Irritable bowel syndrome	Mild, infrequent attacks, OTC meds	X		
	Moderate, more frequent attacks, occasional prescription meds		X	X
	Frequent or prolonged attacks, after 5 years, prescription meds		X	



## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>J</b>				
<b>Joint replacement</b>	Single surgery, minimal mobility impairment, asymptomatic			
Hip	One hip, after 1 year		X	X
	Both hips			Auto decline
Knee	One knee, after 5 years		X	X
	Both knees			Auto decline
Shoulder, elbow, wrist, or ankle	All cases			Auto decline
All types of replacement	More than one surgery or persistent pain or significant mobility impairment			Auto decline
<b>Juvenile rheumatoid arthritis</b>	All cases		X	X
<b>K</b>				
<b>Keloids</b>	Most cases	X	X	
<b>Keratois</b>	Most cases	X		
<b>Kidney cyst</b>	Simple, operated or no surgery anticipated, asymptomatic	X	X	
	Polycystic			X
<b>Kidney infection</b>	Single episode, recovered	X		
	Multiple attacks, after 5 years	X	X	
	Multiple attacks, within 5 years or chronic			X
<b>Kidney stones</b>	Present			Auto decline
	Single attack or single stone passed	X	X	
	Multiple attacks or multiple stones passed		X	X
<b>Knee injury</b>	Symptomatic			X
	Asymptomatic, mobility not impaired, operated or unoperated, after 1 year		X	
	Multiple surgeries, same site, asymptomatic, mobility not impaired, after 2 years		X	
	Sprains, strains	X	X	
<b>L</b>				
<b>Legg-Calve-Perthes disease</b>	Unoperated, see Osteoarthritis			
	Operated, see Joint Replacement			
<b>Ligament injuries</b>	Recovered/repared, no pain, swelling, or instability	X	X	
<b>Lupus erythematosus</b>	Systemic			Auto decline
	Discoid, after 2 years	X	X	

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Lyme disease</b>	Asymptomatic, no residuals	X	X	
	Chronic			X
<b>M</b>				
<b>Meniere's disease</b>	Asymptomatic	X	X	
<b>Meningitis</b>	Recovered, no residuals			
	Single attack	X	X	
	Multiple attacks after 1 year		X	
<b>Mental/emotional disorders</b>	<a href="#">Category 1: Single episode</a>			
Neurotic disorders or non-psychotic depression (phobias, obsessive-compulsive disorders, post-traumatic stress syndrome) or anxiety adjustments, reactions, or situational problems	<b>Mild to moderate</b> No medication, no counseling, no hospitalization	X	X	
	With counseling		X	
	Medication and counseling		X	X
Psychotic disorders – schizophrenia, bipolar (manic depression), etc.	<b>Severe</b> Prior hospitalization and/or treatment episode, recovered, no current medication, counseling or psychotherapy, after 1 year	X	X	
	With psychotherapy or counseling		X	X
Suicide attempt	<a href="#">Category 2: Multiple episodes</a>			X
	All cases			Auto decline
<b>Migraines</b>	Within 3 years or multiple attempts			Auto decline
	Mild, infrequent, no emergency room visits	X	X	
	Severe or frequent or seen in ER within 2 years		X	X
<b>Miscarriage</b>	Final rate is dependent on number of miscarriages within 2 years		X	X
<b>Mitral valve prolapse</b>	Diagnosed by echocardiogram, normal or non-classic thickness/displacement	X		
	Classic, trace regurgitation or less, uses antibiotics prophylactically		X	
	More than trace regurgitation or not using antibiotics prophylactically			Auto decline
<b>Moles</b>	Benign pathology report	X		
<b>Mononucleosis</b>	No symptoms	X	X	

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Myofibrositis, myositis</b>	Single attack, mild case, recovered		X	
	Severe or multiple attacks		X	X
<b>N</b>				
<b>Narcolepsy</b>	All cases		X	X
<b>Nephrectomy</b> (non-malignant cause)	No residuals, normal kidney function, after 6 months	X	X	
	Persistent renal or cardiovascular abnormalities			Auto decline
<b>Nephritis, nephrotic syndrome</b>	See glomerulonephritis			
<b>Nevus</b>	Single dysplastic nevus	All cases	X	X
	Congenital melanocytic	Small to medium, removed, benign	X	X
		Giant		
Dysplastic syndrome	All cases			Auto decline
<b>O</b>				
<b>Osgood-Schlatter disease</b>	See osteochondrosis			
<b>Osteoarthritis</b>	See arthritis			
<b>Osteochondrosis</b>	Recovered		X	X
<b>Osteopenia</b>	Mild		X	
<b>Osteoporosis</b>	Mild		X	
	Moderate to severe			Auto decline
<b>Otitis Media</b>	See ear infections			
<b>Otosclerosis</b>	Unoperated			Auto decline
	Operated	X	X	
<b>Ovarian cyst</b>	Spontaneously resolved	X		
	Operated or controlled by birth control pills	X	X	
	Polycystic ovary disease, after ovaries removed	X	X	
	Polycystic ovary disease, before ovaries removed			Auto decline
<b>P</b>				
<b>Pancreatitis</b>	Acute, single attack, unoperated gall stones			X
	Acute, single attack, gall stones removed	X	X	
	Recurrent/chronic, or secondary to alcoholism			Auto decline

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Pap tests, abnormal</b>	See cervical dysplasia			
<b>PDA (patent ductus arteriosus)</b>	See congenital heart defects			
<b>Pelvic inflammatory disease</b>	Present			Auto decline
	Single episode or operated after tube removal	X	X	
	Multiple episodes within 2 years		X	X
<b>Pericarditis</b>	Non-constrictive, no residuals			
	Due to viral infection or unknown cause, after 3 years	X	X	
	Due to bacterial infection, after 1 year	X		
<b>Peyronie's disease</b>	All cases	X	X	
<b>Phlebitis</b>	Superficial	X	X	
	Deep vein, present, or on anticoagulants			Auto decline
	Deep vein, resolved – single attack		X	X
	Deep vein, resolved – multiple attacks, after 2 years		X	X
<b>Pleurisy</b>	Unresolved			Auto decline
	Resolved, without effusion	X	X	
	Resolved, with effusion after 5 years	X	X	
<b>Pneumothorax</b>	Most cases	X	X	
<b>Poliomyelitis</b>	With bladder or sphincter function involvement			Auto decline
	With limb weakness		X	
<b>Polymyositis</b>	After 1 year		X	
<b>Polyp</b> Anal or rectal	Unoperated, more than 4 polyps			Auto decline
	Unoperated, less than 4 polyps		X	X
	Operated, benign, less than 4 polyps		X	
	Operated, benign, multiple polyposis or adenomatosis, after 5 years		X	X
	Bladder	Single, benign, after 12 months	X	X
	Multiple, after 5 years	X	X	
	Present or recurrences within 5 years			Auto decline
<b>Polyp</b> Cervical	Pathology negative, no symptoms or recurrence	X	X	
	Endometrial	Pathology negative, no symptoms or recurrence after 6 months	X	X

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
Gastrointestinal	Unoperated			Auto decline
	Operated, benign, less than 4 polyps		X	
	Operated, benign, multiple polyposis or adenomatosis, after 5 years		X	X
Nasal or vocal cord	Benign, single	X	X	
	Benign, two or more recurrences, after 3 years		X	
<b>Premature birth</b>				
Good weight gain, normal development, no residuals or complications	33-37 weeks gestation	X	X	
	29-32 weeks gestation, after 2 years	X	X	
<b>Proctitis</b>	Single episode	X	X	
	Multiple or recurrent, after 1 year	X	X	
<b>Prostate stones</b>	Most cases	X	X	
	With prostatitis			Auto decline
<b>Prostatic hypertrophy, benign</b>	Unoperated, PSA normal • Asymptomatic or minimal symptoms, no medications, recent ultrasound/biopsy negative		X	
	Unoperated, PSA elevated but stable for 2 years • Asymptomatic or minimal symptoms, no medications, recent ultrasound/biopsy negative		X	X
	Operated • Asymptomatic, no residual operative complications	X	X	
	Otherwise			X
<b>Prostatitis</b>	Single episode, resolved	X	X	
	Chronic, recurrent after 6 months		X	X
<b>Prosthesis</b>				
Eye	Substitution complete, after 3 months	X	X	
Penile	All cases		X	X
Limb	Due to traumatic amputation, after age 18		X	X
<b>Psoriasis</b>	Mild to moderate	X	X	
	Severe			Auto decline
<b>Psychosis</b>	See mental/emotional disorders			
<b>Pulmonary embolism</b>	No residuals, after 3 months	X	X	
<b>Purpura</b>	See thrombocytopenia, purpura			

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>End-stage pyloric stenosis</b>	Operated	X	X	
<b>R</b>				
<b>Raynaud's disease</b>	Operated or unoperated, mild, non-progressive, no complications, asymptomatic	X	X	
	Otherwise			X
<b>Rectocele</b>	Operated	X	X	
<b>Reiter's syndrome</b>	Occasional mild symptoms		X	
	Within 6 months of diagnosis			Auto decline
<b>Renal failure/insufficiency</b>	Complete recovery, normal kidney function, after 1 year	X	X	
	End-stage renal failure or dialysis			Auto decline
<b>Retinitis pigmentosa</b>	All cases	X	X	
<b>Rheumatic fever</b>	Single attack, recovered, no complications	X	X	
	Multiple attacks, after 1 year, no complications	X	X	
<b>Rotator cuff</b>	Operated, recovered, released from care	X	X	
	Unoperated, asymptomatic		X	
	Unoperated, symptomatic			X
<b>S</b>				
<b>Sarcoidosis (Boeck's)</b>	Stable, non-progressive, no pulmonary impairment		X	X
<b>Scarlet fever</b>	Recovered without residuals	X	X	
<b>Schizophrenia</b>	See mental/emotional disorders			
<b>Scleroderma</b>	Minimal, localized, superficial, after 1 year		X	
	Recurrent, extensive or within 1 year			Auto decline
<b>Seizures</b>	See convulsive disorder			
<b>Shingles</b>	See herpes: zoster			
<b>Sinusitis</b>				
Smoker	Within 6 months, acute, no ENT abnormality, less than 3 episodes	X	X	
	Chronic		X	X
	Operated within 1 year		X	
Non-smoker	Acute, no ENT abnormality	X		
	Recurrent within 12 months		X	
<b>Sleep apnea</b>	See apnea			
<b>Spermatocele</b>	All cases	X	X	

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Spina bifida</b>	Cystica			Auto decline
	Unoperated or operated with residuals			
	Operated, asymptomatic	X	X	
Occulta	Unoperated under age 20		X	X
	Operated or over age 20 years	X	X	
<b>Spinal curvature</b>				
All cases	Operated, recovered after 1 year	X		
Lordosis	Asymptomatic	X		
Kyphosis	Unoperated			Auto decline
Scoliosis/ Kyphoscoliosis	Unoperated, more than 30 degree curvature			Auto decline
<b>Spondylolisthesis or Spondylosis</b>	Best cases after 1 year		X	
<b>Sponge kidney</b>	No history of infections, stones, or renal insufficiencies		X	
<b>Sprains – knee, shoulder</b>	See back sprain/strain			
<b>Stasis dermatitis</b>	No history of ulcerations/cellulites: mild, non-progressive		X	
	History of ulcerations/cellulitis			
	– Single episode, fully recovered		X	
	– Present or recurrent, after 3 years		X	
<b>Strabismus</b>	Unoperated, congenital or traumatic, within 6 months		X	X
	Operated, recovered, after 6 months	X	X	
<b>Stroke</b>	Acute, no residuals, no underlying disease, fully recovered, after 10 years		X	
<b>Subdural hematoma</b>	Unoperated			Auto decline
	Operated after 1 year, no residuals	X	X	
<b>Substance abuse</b>	See alcoholism or drug addiction			
<b>Surrogacy</b>	2 years with no planned surrogate or applicant as surrogate	X		
<b>Synovitis</b>	Single attack	X	X	
	Multiple attacks		X	X
<b>T</b>				
<b>Temporomandibular joint syndrome (TMJ)</b>	Unoperated, asymptomatic, no treatment	X	X	
	Operated	X	X	
	Surgery anticipated or operated with residuals			Auto decline
<b>Tennis elbow</b>	See epicondylitis			
<b>Tetralogy of fallot</b>	See congenital heart defects			

## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Thoracic outlet syndrome</b>	Best cases	X	X	
<b>Thrombocytopenia, purpura</b>	After 6 months, without splenectomy	X	X	
	After 3 years, with splenectomy	X	X	
<b>Thymoma</b>	Benign, after 5 years		X	
	Malignant, after 10 years		X	
<b>Thyroid diseases</b>				
Hypothyroidism	All cases	X	X	
Hyperthyroidism, Grave's disease	Surgically or medically controlled, after 6 months	X	X	
Thyroiditis	Recovered	X	X	
<b>Tic douloureux</b>	Unoperated, or treated with injections after 1 year		X	
	Operated	X	X	
<b>Tonsillitis</b>	4 acute attacks per year, recovered	X		
	Chronic, recurrent, 5 or more attacks per year			Auto decline
<b>Tourette's syndrome</b>	Best cases	X	X	
<b>Tracheo-esophageal fistula</b>	See fistula			
<b>Transplants</b>	All except corneal			Auto decline
	Corneal, recovered, no residuals	X	X	
<b>Transposition of the great vessels</b>	See congenital heart defects			
<b>Tuberculosis</b>				
Positive skin test, negative chest X-ray	After release from drug therapy	X	X	
Pulmonary	Arrested, after 2 years		X	
Skin	After 2 years	X	X	
Epididymus	All cases			Auto decline
<b>U</b>				
<b>Ulcer, peptic</b>	Currently active or unoperated, single attack within 2 years			Auto decline
	Recovered without surgery, single attack, after 2 years	X	X	
	Operated, no recurrence	X	X	
	Unoperated, multiple attacks after 2 years		X	
	Recurrent ulcer, H Pylori positive			Auto decline



## Probable action guideline

Condition	Specifics	Possible eligibility at Tier 1 rate	Possible eligibility at higher tier rate	Possible or probable decline
<b>Undescended testicle</b>	Operated	X	X	
<b>Ureteral stricture</b>	Recovered or operated after 2 years	X	X	
<b>Urethral stricture</b>	Full recovery, after 6 months	X	X	
	Chronic, recurrent			Auto decline
<b>Uterine fibroid tumor</b>	Unoperated, moderate to large or multiple tumors			Auto decline
	Unoperated, single, small, no size change, after 1 year		X	
	Operated by myomectomy		X	X
	Operated by hysterectomy	X	X	
<b>Urinary tract reflux (VUR: vesico-ureteral reflux)</b>	Unoperated, after 1 year, no symptoms/medication, or evidence of infection or renal impairment	X	X	
	Operated, no symptoms/medication, normal renal function	X	X	
<b>V</b>				
<b>Valley fever</b>	Treated and recovered	X	X	
<b>Varicocele</b>	Unoperated after 2 years	X	X	
	Operated, recovered	X	X	
<b>Varicose veins</b>	Operated	X	X	
	Unoperated			
	– Mild	X		
	– Moderate to severe			Auto decline
<b>Ventricular septal defect (VSD)</b>	See congenital heart defects			
<b>Volvulus</b>	Operated, no complications or residuals		X	X
<b>W</b>				
<b>Wolff-Parkinson-White syndrome</b>	With cardiac ablation, asymptomatic, after 1 year		X	
	Without cardiac ablation			Auto decline