

Which Express solution is right for your client?



As Transamerica expands its instant decision Express products, financial professionals should understand that each solution follows distinct underwriting protocols, which may result in varying approval outcomes.

Common conditions that may not be approved for either *Transamerica Financial Foundation IUL® II Express* or *Transamerica FE Express Solution*SM:

- ALS
- Alzheimer's disease/Dementia
- Intellectual disability
- Down syndrome
- Organ transplant
- Paralysis
- Suicide attempt
- Single DUI (within two years)

| Condition | FFIUL II Express | FE Express |
|---|---|------------------------|
| BMI | BMI >39 Decline | BMI >48 Decline |
| Diabetes Type 2 | Diagnosed <age 60 Decline No insulin use No tobacco use | Accept |
| Asthma (Severe) | Decline | Accept |
| Hospitalized more than 2x's in last 12 months | Decline | Accept |
| CAD (Coronary artery disease) | Decline | Accept |
| Bipolar Disorder | Decline | Accept |
| Seizure or Epilepsy | Decline if within last 2 yrs | Accept |
| Diabetes Type 1 | Decline | Accept |
| Felony Criminal History | Decline within 10 yrs | Decline within 2 years |
| Multiple Sclerosis | Decline | Accept |
| Congestive Heart Failure | Decline | Accept |
| COPD/Emphysema | Decline | Accept |
| Stroke | Decline | Accept |
| Peripheral Vascular Disease (PVD) | Decline | Accept |
| Dialysis | Decline | Accept |
| Pacemaker | Decline | Accept |
| Cirrhosis | Decline | Accept |

Accepted applications are subject to other underwriting information and approval isn't guaranteed.

This list is limited for ease of use. Conditions not listed may be eligible for coverage, however, multiple condition combinations or severe manifestations of conditions may also result in disqualification for the IUL Express process. Refer to the complete agent guides for FFIUL II Express and FE Express for full underwriting details.



Living benefit riders

If any of the conditions listed below apply, the client will be ineligible for a living benefit rider. However, the base policy may still be considered for approval.

In the past five years, has your client been diagnosed, treated, tested positive for, or been given medical advice by a medical professional for the following:

- Blindness (complete or partial)
- Chronic pain (longer than 6 months)
- Connective tissue disorder
- Immune system disorder
- Peripheral neuropathy
- Myasthenia gravis
- Optic neuritis
- Neuromuscular disease or neurodegenerative disorder
- Polio or post-polio syndrome
- Rheumatoid arthritis or Psoriatic arthritis
- Ulcerative colitis or Crohn's disease
- Vasculitis or arteritis

In the past year, has your client:

- Been advised by a member of the medical profession to use a motorized scooter, walker, cane, urinary catheter, Hoyer Lift, or crutches (other than for a temporary condition lasting less than three months)
- Required assistance with the following daily activities: taking medications; dressing; eating; walking; bathing; toileting; or transferring from chair or bed
- Been unable to work or perform normal activities due to chronic illness or permanent injury
- Received Medicaid (not including Medicare)
- Had a handicap sticker, handicap placard, or handicap license plate

**When it comes to preparing for the future,
there's no time like the present.**



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