

Think about this: “**Underwriting a client with hypertension (elevated blood pressure)**”

Fact #1: 1 in 4 adults in the United States has elevated blood pressure (approximately 50 million Americans) and more than 30 percent are unaware of their condition.

Fact #2: High blood pressure plays a role in about 700,000 deaths a year from stroke, heart and kidney disease.

*(From the Sixth Report of the Joint National Committee on Detection, Evaluation, and Treatment of High Blood Pressure)

The 1st step:

- Ask your client/s when the hypertension was diagnosed, what medication (if any) they are taking, how often they see their doctor for follow-ups, and when they last had their blood pressure taken.
- Ask about client’s smoking habits, if any.
- Ask client/s if current lifestyle includes diet, exercise, reduced intake of alcohol, quit smoking, etc, if applicable.

The next step:

The underwriter will usually request an APS from the doctor who is treating the hypertension. The APS should provide a series of blood pressure readings that will indicate how well controlled the blood pressure has been over a period of time.

Will my client be rated?

- No, if the blood pressure is well-controlled.
- Probably yes, if the blood pressure is not well controlled, particularly if there is poor compliance on the client's part with respect to treatment.
- Occasionally, a case will be postponed or declined and the client will be advised to see a doctor for a thorough assessment.
- **Depending on the date of onset, duration, severity and treatment, a client could qualify for preferred rates too.**

Cheat Sheet for possible rates (Currently well controlled with or without treatment):

Preferred Plus: with no readings in the past two years greater than 136/86

Preferred: with no readings in the past two years greater than 146/90

Standard: with no readings in the past two years greater than 160/95.

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