



Cognitive Impairment *or Normal Decline?*

At a Glance

- Nicholson
- Male
- Age 72
- Takes drug for memory deficit
- Preferred non-tobacco offer

Challenge: ILB insists on rigorous mental evaluations so a client won't be denied coverage for fighting a slippery memory.

Life insurance carriers had issued standard policies to 72-year-old Nicholson for his entire adult life—his last policy had been approved just two years ago. However, his latest attempt at coverage was denied when medical records revealed that Nicholson took a prescription drug typically used to treat dementia and Alzheimer's.

A year ago, Nicholson's wife complained that he was beginning to forget minor instructions and conversations. After consulting his physician, Nicholson was prescribed Aricept, which typically is cause enough for carriers to decline an application, regardless of whether a person's medical records indicate cognitive impairment.

After contacting Nicholson's broker, the ILB team knew that his memory deficit was not strong enough to preclude coverage. Nicholson still worked full time, running his own business. He had always been intellectually above average with a sharp memory. Using Aricept was his strategy for stalling the normal mental decline that comes with age—not for fighting severe cognitive impairment.



Testing Secures Preferred Status

Although it was a risky move, we decided to hold Nicholson's trial application and order a thorough medical examination. We insisted on several specialized tests (above and beyond required norms) to assess Nicholson's cognitive abilities.

The tests backed up Nicholson's claims, and we secured a preferred non-tobacco policy for his broker. Nicholson's success is extraordinary. We've worked on similar cases involving Aricept and cognitive impairment that other general agents could not place. For those cases, we use the same strategy and typically receive a standard offer rather than Nicholson's preferred status.

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