LONG-TERM CARE INSURANCE

Condition-Related Marketing: **Sleep Apnea**

So, your client has a history of sleep apnea... what does that mean for their LTCi application?

Sleep apnea (from the Greek "apnea" meaning "without breath") is a sleep disorder where breathing is started and stopped throughout the sleep cycle. This may lead to the brain or the rest of the body not receiving the oxygen it needs to thrive and function.

Risks of untreated sleep apnea may include cognitive impairment, dementia, Alzheimer's disease, stroke, heart problems, high blood pressure, diabetes, depression and more. Health conditions like these can factor into whether someone is deemed insurable for long-term care.

Underwriting Tips

Just because your client may have a sleep apnea diagnosis, that doesn't mean they are ineligible for long-term care insurance. The key is the severity of the disorder and the treatment plan prescribed.

Here are some insights you may want to consider when someone says they have sleep apnea or a history of sleep apnea:

- If it is mild, it may be acceptable with no treatment. This must be noted in medical records.
- If it is suspected, but not fully evaluated, Mutual of Omaha requires the applicant to have it fully evaluated. If a treatment plan is prescribed after evaluation, the applicant must show documented compliance with treatment plan for at least a three-month period prior to applying for a long-term care insurance policy.

Sometimes, an applicant may tell you they have sleep apnea, but no treatment is needed. Listed below are some acceptable and unacceptable reasons.

Acceptable:

- The sleep apnea was resolved with weight loss. If the weight loss and resolution of symptoms can be corroborated in medical records, our underwriting team would not be concerned about the diagnosis.
- If an initial treatment, like using a c-pap, was prescribed but a different device or treatment was prescribed thereafter. If the effectiveness of the new treatment plan is documented in medical records, then there will be no underwriting concerns.
- Surgery resolved the sleep apnea, and the surgery is detailed in the applicant's medical records.

Unacceptable:

- The applicant performs the treatment on an "as needed" basis.
- The applicant does not like the treatment, so they forgo it altogether.
- The applicant says sleep apnea is "resolved," but they cannot provide an objective reason, or any type of evidence that could dispel the resolution of the condition.

Planning Corner: Good Health Matters

There are many factors that go into evaluating an application for long-term care insurance – your client's medical history, their current health, the medications they take and their daily activities. While certain chronic medical conditions may make them ineligible for coverage, there are other situations, like sleep apnea, where simply waiting a short time before applying can result in a policy being issued.

Understanding the specific needs and coverage factors that impact your client's long-term care helps you both feel confident about the timing of their application.

Download the "Your Good Health Matters" consumer flyer* to share these best practices with your clients.

If you are unsure and need help to evaluate someone with sleep apnea, please contact the LTC Underwriting Department at ltcunderwriting@mutualofomaha.com or 800-551-2059.

*Version may differ by state.

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