

Seattle Office:
1702 North 34th Street
Seattle, WA 98103
Phone: 206.633.2922
Fax: 206.633.0185

St. Louis Office:
230 South Bemiston Ave.
Suite 1425
St. Louis, MO 63105
Phone: 314.678.2576
Fax: 314.721.1047

Toll Free Phone: 877.455.9580
www.pacificadvisors.net

Providing you with:

- Top Rated companies
- Multi-life DI & LTC
- Case Design
- Proposals within 24 hours
- Advanced Sales Ideas
- Competitive Analysis
- Superior Support

Managing Partners of



For agent use only, not to the public

PRESORTED
STANDARD
US POSTAGE
PAID
SEATTLE, WA
PERMIT #1445

Fourth Quarter 2011

Volume 12 Issue 4

Brokerage News

Complete Blood Count (CBC)

Underwriters often see the results of a Complete Blood Count (CBC) when reviewing medical records. Because the CBC measures several types of cells, a DI underwriter must spend sufficient time to analyze the multiple causes of abnormalities.

The first type of cell to be considered is the white blood cell. If the white blood cell count is markedly elevated, a DI application would be postponed since it may indicate a malignancy such as leukemia. If it is seriously low, consideration must be given as to whether the proposed insured has a history of recurrent infections and hopefully a work up for this has been done in the past by a doctor.

The next cell type is the red blood cell. If this count is elevated, a DI application would usually be postponed until the count can be evaluated. Marked elevations could be caused by a disease called polycythemia vera, which is a serious abnormality. More commonly, the underwriter sees anemia, a decrease in the number of red blood cells. As long as the attending physician has adequately evaluated the anemia, this usually does not present a problem in making an offer.

The last cells to be measured are the platelets, which are involved with coagulation of the blood. If elevated, this is usually serious and would result in a DI application being postponed until an evaluation can be done. The most common cause for a low platelet count is a disease referred to as immune thrombocytopenic purpura (ITP). This condition is treatable and in the vast majority of cases, the platelet count is not dangerously low and an offer can be made.

News You Can Use

- The Standard increased I&P limits. 4P physicians can now obtain \$17,000 monthly benefit.
- A new Guarantee Standard Issue offering is available to physician groups. The program includes a minimum of 15 lives, discounted unisex rates and availability in all states. Contact us for more details.

Inside this issue:

Complete Blood Count	1
News You Can Use	1
Attorneys - A Great Marketing Opportunity	2
Become a Long-Term Care Detective	3
Become a Long-Term Care Detective cont.	4

If there are specific topics you'd like to see covered in future newsletters, please contact:
Kelsie Van Tine
at kelsie@pacificadvisors.net

Become a Long-Term Care Underwriting Detective *continued*

(continued from page 3)

- If your client mentions taking a medication for "arthritis," you should suspect rheumatoid arthritis or another serious condition and rate accordingly
- If your client lists pain medications, specifically narcotics, it's very important to find out the reason the medication is used, how often it's taken and how long the client has used it. For example, does your client use it only after he mows the lawn or does he have pain on a daily basis

Question everything.

If you have a client who is young, but not working, ask why. Does he have chronic health conditions that prevent him from working? Is he collecting disability benefits? The underwriter needs to know.

What's next?

If the client's medical condition seems questionable or if multiple medical conditions and multiple medications are listed on the application, it's a good idea to submit the case for pre-qualification. For an LTC pre-qualification form, you can visit the Library section of our website at www.pacificadvisors.net, or contact us at 877.455.9580.

Attorneys - A Great Marketing Opportunity

There are over 650,000 attorneys employed in the American economy. Of those, approximately 212,000 are self-employed, practicing either in solo practices or as partners in a law firm. The number of attorneys is expected to rise approximately 13% over the upcoming decade, with the fastest growth seen in the areas of healthcare, intellectual property, bankruptcy, corporate and security litigation, antitrust, and environmental law.

As in any industry the salaries earned by attorneys can vary widely. The following chart, provided by Internet Legal Research Group, provides a breakdown of salaries of legal professionals working in the United States. The data reflects the low and high range of the national averages.

SENIOR ATTORNEY (10-12 years experience)	LOW / HIGH RANGE OF SALARIES
Large law firm	\$157,500 - \$240,750
Midsized law firm	\$132,500 - \$218,750
Small/midsized law firm	\$108,000 - \$163,000
Small law firm	\$89,750 - \$147,500
LICENSED ATTORNEY (4-9 years experience)	
Large law firm	\$137,500 - \$189,000
Midsized law firm	\$106,250 - \$163,000
Small/midsized law firm	\$77,250 - \$145,000
Small law firm	\$63,250 - \$118,000
LICENSED ATTORNEY (1-3 years experience)	
Large law firm	\$107,250 - \$148,000
Midsized law firm	\$78,750 - \$116,250
Small/midsized law firm	\$62,750 - \$97,500
Small law firm	\$53,250 - \$85,750
FIRST YEAR ASSOCIATE	
Large law firm	\$107,250 - \$132,000
Midsized law firm	\$73,500 - \$102,000
Small/midsized law firm	\$56,500 - \$83,000
Small law firm	\$50,250 - \$73,500

*Attorney's in New York, California, Texas and New Jersey are among the highest paid in the country.

Many attorneys do not have sufficient income protection plans and would be financially devastated if an injury or illness prevented them from working. Some firms do provide group LTD plans, however in most situations they do not adequately cover income. Nationally, only about 11% of attorneys own their own disability insurance which provides a unique opportunity to talk to legal professionals about one of the numerous discounted programs available.

Pacific Advisors has made available discount programs for attorneys who are members of any of the following associations: American Bar Association, Washington Bar Association, Utah State Bar, Idaho State Bar and the Oregon State Bar. These discount programs provide a 10% -15% discount on individual DI as well as overhead expense policies. Additionally with groups of 5 or more guaranteed issue programs can be made available!

For more information on DI for attorneys contact Pacific Advisors at 877.455.9580

Become a Long-Term Care Underwriting Detective

In order to help our underwriters get your LTCi cases issued quickly, you need to do a little detective work. Here are six things you can do to help uncover important information the underwriter needs to issue your case.

Ask about specialty physicians.

Knowing if a specialist is treating your client gives the underwriter clues about his health condition. For example:

- If your client had bypass surgery, ask whether he has a cardiologist
- If he had joint replacement, ask if he has an orthopedist
- If he has rheumatoid arthritis, ask if he sees a rheumatologist
- If your client is taking multiple medications for depression and anxiety, ask if he has a psychiatrist
- If he has diabetes, ask if he sees an endocrinologist

Pay attention to the date of diagnosis.

A recent diagnosis (within six months to one year) may not be enough time to assess the client's stability.

Note the date of the last doctor's visit.

If it's been over two years since your client's last physical exam and lab work, she won't qualify for preferred underwriting. Also, pay attention to recent doctor's visits. Ask your client if she has a follow-up visit planned. Knowing an applicant is undergoing treatment allows the underwriter to order an attending physician's statement immediately, instead of waiting until the client mentions it during the personal health interview.

Listen carefully for these things:

- Pending tests – Be sure to ask if the client is scheduled for a test that has not yet been performed
- Recent surgeries – Ask what type of surgery the client had. Was a malignancy found? Has the wound healed? You also should ask if the client is released from care or requires further follow-up
- Physical therapy – Ask about the diagnosis. Is the pain or condition resolved? Does he require further treatment? Find out if the physical therapy helped or if surgery has been recommended

Try to identify the diagnosis behind the medication.

Many people refer to a medication in terms of the symptoms it addresses. For example:

- Your client says she takes a "water pill for fluid." This can mean several things, from occasional lower extremity edema to something more serious, like heart failure. Also, pay close attention to the medication dosage as this can be a clue to your client's condition
- Many applicants will indicate they take a "blood thinner." Ask about the diagnosis. Is there a history of stroke or mini-stroke? Has the client had any type of heart surgery and, if so, when? Has the client had blood clots? If so, how long ago? Has the client had surgery of the leg?
- If your client says she takes a medication for "bones" or to "prevent osteoporosis," ask if she's had a bone density test done in the past two years and what the doctor told her about her bone density. Typically, these medications aren't prescribed unless bone density tests have indicated the applicant has some type of bone loss, which impacts insurability

(continued on page 4)