

Annuity Care® Ineligible Impairments

If you meet any of the conditions below, you will not be considered for Annuity Care coverage. Keep in mind that this list is not all inclusive.

You have any of the following conditions:

- Activities of daily living deficits
- Active duty military personnel
- Alcoholism-active
- Alzheimer's/dementia
- Amyotrophic Lateral Sclerosis (ALS)
- Balance disorder/gait impairment
- Cerebral palsy
- Cirrhosis
- Down syndrome
- Drug addiction/illicit drug usage-within 10 years
- Huntington's disease
- Intellectual disability
- Internal cancers (Stage 4 or not cured or not in remission)
- Macular degeneration/progressive/"wet"
- Memory loss
- Multiple myeloma
- Multiple sclerosis (MS)
- Muscular dystrophy
- Non-ocular myasthenia gravis
- Organic brain syndrome
- Organ transplants (except kidney)
- Osteoporosis with compression fracture(s)
- Paralysis (paraplegia/quadriplegia)
- Parkinson's disease
- Receiving SSDI (eligible for Annuity Care or Indexed Annuity Care, no COB Rider)
- Stroke-multiple or with residuals
- Surgery pending-will consider after surgery and release from physician's care with no use of assistive devices and normal activity level
- Ventricular tachycardia

You exceed the height and weight guidelines:

Height and weight guidelines

Height	Max weight	Height	Max weight
4'10"	222	5'10"	324
4'11"	230	5'11"	333
5'0"	238	6'0"	342
5'1"	246	6'1"	352
5'2"	254	6'2"	362
5'3"	262	6'3"	372
5'4"	270	6'4"	382
5'5"	279	6'5"	392
5'6"	288	6'6"	402
5'7"	296	6'7"	412
5'8"	305	6'8"	423
5'9"	314	6'9"	433

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You require or utilize any of the following:

- Assisted living facility (including continuing care retirement community or receipt of home care assistance)
- Cane (quad or 3-prong)
- Chair lift or stair lift
- Defibrillator (qualifies for Annuity Care or Indexed Annuity Care, no COB Rider)
- Dialysis
- Medicaid coverage (not Medicare)
- Oxygen
- Physical therapy, current
- Wheelchair, walker or scooter

You have been prescribed any of the following medications:

- Antabuse®
- Aricept®
- Artane®
- Avonex® (if treatment for MS)
- Azilect®
- Betaseron® (if treatment for MS)
- Campral®
- Cogentin®
- Cognex®
- Comtan® (if treatment for MS)
- Copaxone® (if treatment for MS)
- Depade®
- Donepezil
- Eldepryl® (if treatment for Parkinson's)
- Exelon®
- Fentanyl
- Galantamine
- Hydergine®

- Interferon®
- Larodopa®/L-Dopa (if treatment for Parkinson's)
- Lucemyra®
- Memantine
- Methadone
- Mirapex® (if treatment for Parkinson's)
- Namenda®
- Namzaric®
- Parlodel® (if treatment for Parkinson's)
- Permax® (if treatment for Parkinson's)
- Razadyne®
- Reminyl®
- ReVia®
- Rivastigmine®
- Sinemet® (if treatment for Parkinson's)
- Suboxone®
- Symmetrel® (if treatment for Parkinson's)
- Vivitrol®

Note: Products issued and underwritten by The State Life Insurance Company® (State Life), Indianapolis, IN, a OneAmerica company that offers the Care Solutions product suite. Annuity Care Form numbers: SA34, R508. Annuity Care II Form numbers: ICC15 SA35, ICC15 R521 PPA ND, ICC15 R521 PPA, ICC R522 PPA, SA35. Indexed Annuity Care Form numbers: ICC14 SA36, ICC14 R529 PPA, ICC14 R530 PPA; SA36, R529 PPA, R530 PPA. Not available in all states or may vary by state.

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