

# Intelligent underwriting tool for Advisers - world first for Health Insurance.

Jason Withell

Accuro Health Insurance



# accuro

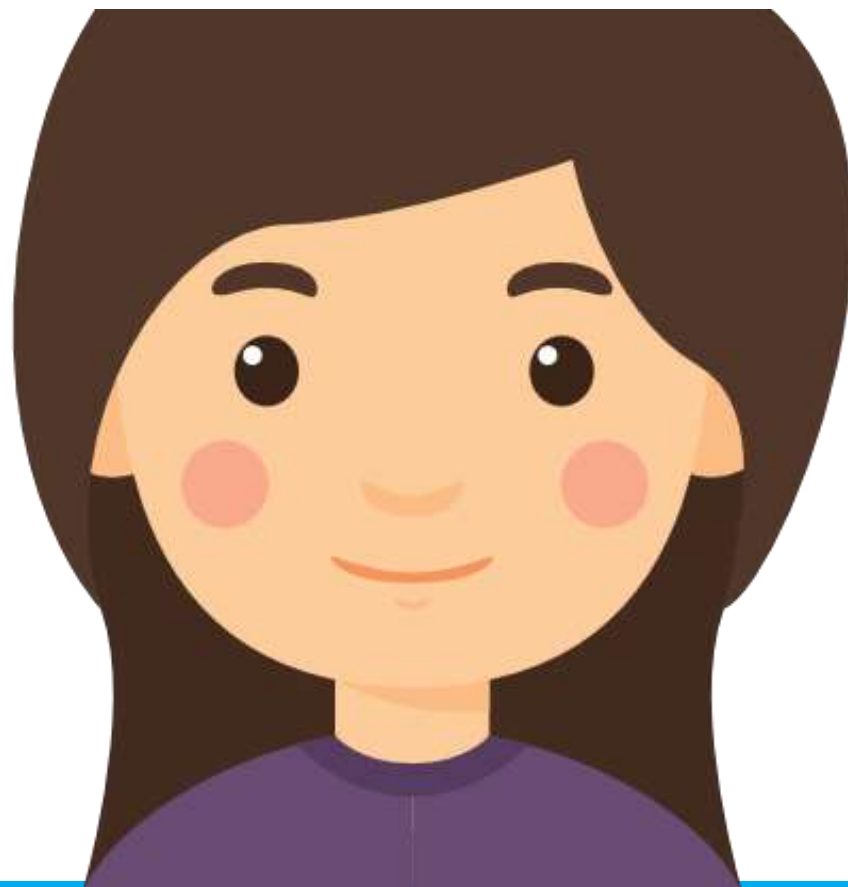
health insurance

- Established in 1971
- Founded by health professionals
- Not-for-profit and New Zealand owned
- Based in Wellington with around 33,000 members

# This is Kevin



# This is Sue



# Parties involved



# What prompted this development

- Giving Accuro a point of difference from other Health Insurance companies in New Zealand
- Realised there could be a way to make the underwriting process easier for members
- In an age where people want things now, this was a new process we could see members liking

# Complexities of health insurance

- Automated life insurance already exists
- Health is much more complicated due the health conditions that Health insurance is concerned with
- Due the higher premiums that Life Insurance collect, they are able to afford to request medical notes. Cost is too high for us to do so.

# Accuro's exclusions

- No loadings
- Time period exclusions
- We can underwrite off application or medical notes. Both options are available through Hugo



# The process we went through

- Map our underwriting guide into a process flow
- Work out end to end process for both Quotemonster and through our own website
- Update our system and exclusions so that it would work seamlessly for all parties involved

# Hernia on paper app

**12 Digestive disorders: stomach, intestine, liver or gall bladder problems**

Have you, or any of the participants to be insured, ever experienced, had symptoms of, been treated for or been advised to seek testing or treatment for gastritis, ulcers, reflux, irritable bowel, Crohn's disease, colitis, celiac disease, bowel polyps, abdominal pain, pancreatitis, liver inflammation, fatty liver, cirrhosis, gallstones or hernias?

Yes  No (go to Q15)  Yes  No (go to Q15)

	Name of participant	Name of participant
Please provide details of the type of digestive disorders and/or stomach, intestine, liver or gall bladder problems.		
When did you first experience symptoms of this condition?	Year & month & hour	Year & month & hour
Do you still experience symptoms of this condition? If <b>no</b> , when did you last experience symptoms? If <b>yes</b> , how many times per year?	<input type="radio"/> Yes <input type="radio"/> No If <b>no</b> , when did you last experience symptoms? If <b>yes</b> , how many times per year?	<input type="radio"/> Yes <input type="radio"/> No If <b>no</b> , when did you last experience symptoms? If <b>yes</b> , how many times per year?
Have you been referred to or consulted a GP or specialist about symptoms of any of the above?	<input type="radio"/> Yes <input type="radio"/> No If <b>yes</b> , please provide details.	<input type="radio"/> Yes <input type="radio"/> No If <b>yes</b> , please provide details.
Have you ever undergone or been advised to undergo any investigations of the gastrointestinal tract (e.g. gastroscopy, endoscopy, colonoscopy)?	<input type="radio"/> Yes <input type="radio"/> No If <b>yes</b> , please provide details.	<input type="radio"/> Yes <input type="radio"/> No If <b>yes</b> , please provide details.
Have you undergone or been advised to undergo any treatment (including surgery)?	<input type="radio"/> Yes <input type="radio"/> No If <b>yes</b> , please provide details including dates and outcome.	<input type="radio"/> Yes <input type="radio"/> No If <b>yes</b> , please provide details including dates and outcome.
Have you in the past or are you currently taking any medication for this condition?	<input type="radio"/> Yes <input type="radio"/> No If <b>yes</b> , please provide details.	<input type="radio"/> Yes <input type="radio"/> No If <b>yes</b> , please provide details.

# Hernia through HUGO

In relation to any of the following conditions, have you ever sought medical advice, undergone testing or treatment, used medication, or experienced any signs or symptoms?

- Arthritis, rheumatism, gout, occupational overuse syndrome, chronic fatigue or any disease, disorder, injury or ongoing pain to muscles, bones, tendons or joints, including hips, shoulders, back, neck, knees or wrists
- Bowel disorder, ulcers, colitis, ongoing abdominal pain, or any other disease or disorder of the gastro-intestinal tract, pancreas, or gall bladder
- [Hernia \(e.g. hiatus, inguinal, umbilical, incisional, femoral or epigastric\)](#)
- High blood pressure or raised cholesterol
- Rheumatic fever, heart murmur, unexplained chest pain, heart disease or disorder (e.g. angina)
- Indigestion or difficulty with swallowing
- None of these

Which types of hernia have you had?

- Hiatus hernia
- [Inguinal hernia](#)
- Umbilical hernia
- Incisional hernia
- Femoral hernia
- Epigastric hernia
- Other hernia

Have you had surgery to repair your inguinal hernia?

Yes  No

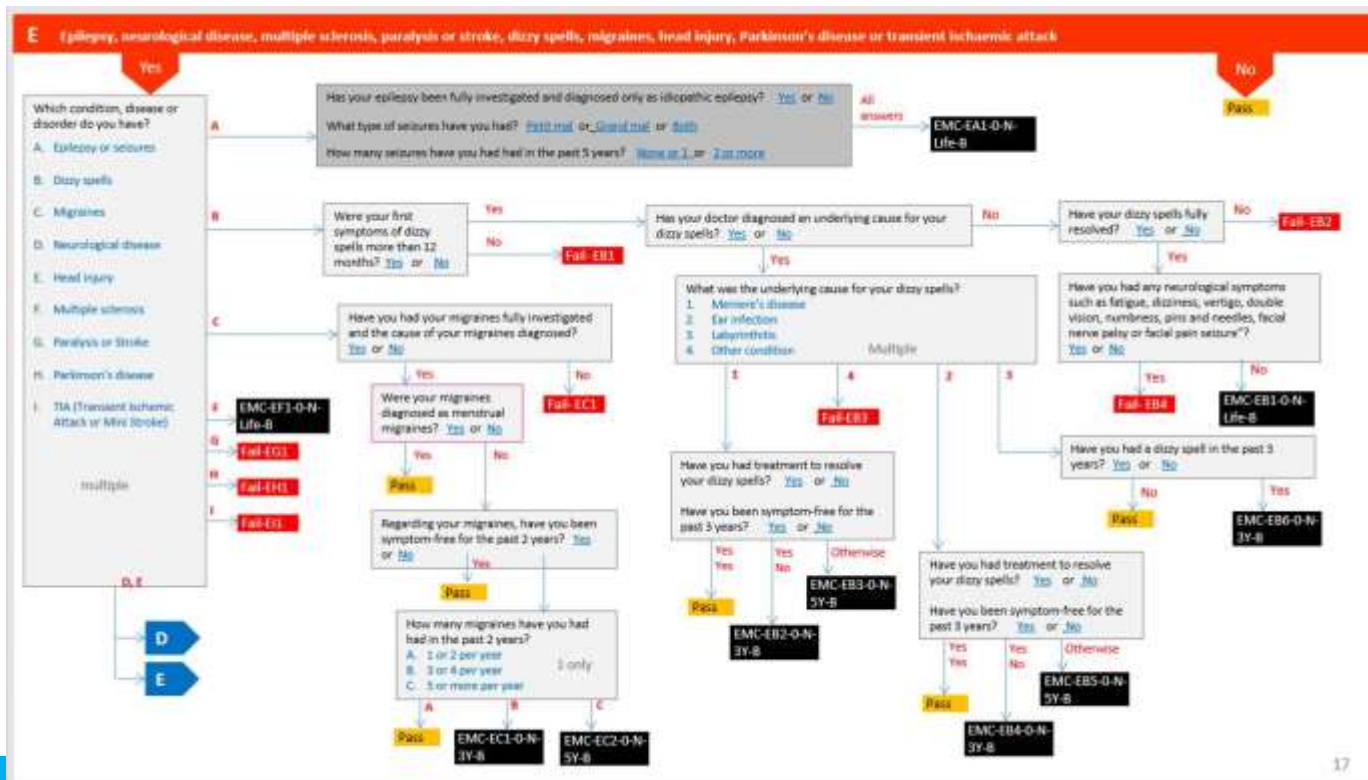
Was your inguinal hernia surgery more than 5 years ago?

Yes  No

Have you recovered fully with no further treatment required?

Yes  No

# Process Flow



# Ed Saul – Intelligent Life

“The key to the service is a new intelligent underwriting engine. This guides users through a series of simple questions, but ‘under the hood’ is a complex system that only asks the questions needed, saving on pages of form filling, while going into detail where necessary. Applications identified by the intelligent underwriting system as possibly requiring extra attention will be sent to an experienced, human underwriter.”

# The challenges we faced

- A wide range of health conditions
- Changing the way we asked health questions
- Working with many parties
- Making sure that medical information was passed through HUGO securely

# The outcome

- An amazing tool that all members who apply through the Accuro website use
- A really easy process for both members and advisors to use
- Future development, auto issue of policies



## Application for Health Insurance

*Agent Assisted via QuoteMonster*

The QuoteMonster logo, consisting of the word "quotemonster" in a white, lowercase, sans-serif font centered within a solid orange rectangular background.

quotemonster



## Find better insurance fast

**Financial Advisers Only!** Life insurance, trauma, TPD, income protection, and health quotes, policy documents, news and brochures. Get them here. Fast, accurate, and free. Independent product research is available on subscription. Quotemonster is used by more than 2000 advisers and industry professionals.

REGISTER NOW



**Quality Product** Life Cover Ratings

Provider	AAA	AMP-LIFE/ACC	AMP-LIFE	ANZ	Astoner	QBE
Star Rating	AAA	AAA	AAA	AAA	AAA	AAA
% of Highest	96%	96%	95%	92%	100%	92%
Financial Stability Rating	A+	A+	A+	A+	A+	A
Rating Company	S & P	S & P	S & P	S & P	S & P	AIF Best

### Using independent research

With Quality Product Research you can view policy ratings based on your client's individual situation. It's an improved approach to insurance analysis.

quotemonster

### Policy Archive

SEARCH 500+ OLD DOCUMENTS

### Policy document library

Use it to search for legacy and current documents for all providers.

quotemonster

### News Feed

Fri Sep 01 2017  
**nib First Choice Network**  
nib have this link with all the

Wed Aug 23 2017  
**TPD in Trauma – Valuable**  
Most insurers do not include

Mon Aug 14 2017  
**Future Premiums on Quotemonster**  
For those Quotemonster users

### Email

greg.intellignetlife@g

### Password

\*\*\*\*\*

- Remember Email
- PA Login

LOG IN

Forgot password?

Enter your email address and password then click 'Log In' to proceed

We now research 28 different companies

VIEW FULL LIST HERE

Quality Product  
RESEARCH LIMITED



Get crunching  
NEW QUOTE

Policy Archive  
OLD DOCUMENTS

Research Tools  
START NOW

Subscriptions  
START NOW

Click 'Get crunching' to start a new application

Saved Quotes Search for...

After logging in, you will arrive on the advisor landing page

Who	When	Report/Buy Now	View	Clone	Delete
Jane Goodall 🧑 x 1	26-09-2017		👁	📄	✖
Morticia Addams & Gomez Addams 🧑🧑 x 3	26-09-2017		👁	📄	✖
Bruce Banner 🧑	26-09-2017		👁	📄	✖
Lebron James 🧑	26-09-2017		👁	📄	✖
Bill Gates & Melinda Gates 🧑🧑 x 1	26-09-2017		👁	📄	✖
Homer Simpson & Marge Simpson 🧑🧑 x 3	26-09-2017		👁	📄	✖
Donald Trumpman & Melania Trumpman 🧑	26-09-2017		👁	📄	✖
Will Smith & Jada Smith 🧑🧑	26-09-2017		👁	📄	✖
Barack Obama 🧑	26-09-2017		👁	📄	✖
Kawhi Leonard 🧑	26-09-2017		👁	📄	✖
Steph Curry 🧑	26-09-2017		👁	📄	✖

Step 1 : Personal Details Next >

First name

Last name

Date of Birth (dd/mm/yyyy)

Age

- Male
- Non-Smoker

- Female
- Smoker

Occupation ? Advanced

Employed

Email

+ Add client

Children Details

This screen is the start of the Application process

Enter the policyholders personal details

Step 1 : Personal Details [Next >]

Harry Goldman

First name

Harry

Last name

Goldman

Date of Birth (dd/mm/yyyy)

6 / 2 / 1971

Age

46

Occupation ?

Advanced

Class 1

Employed

Employed

Email

harry@goldmanfamily.co.nz

- Male
- Non-Smoker

- Female
- Smoker

To add another member to the policy click 'Add client'

+ Add client

Children Details

Step 1 : Personal Details Next >

Harry Goldman X

<b>First name</b> <input type="text" value="First name"/>	<b>Last name</b> <input type="text" value="Last name"/>	<b>Occupation</b> ⓘ ⚙️ Advanced <input type="text" value="Class 1"/>
<b>Date of Birth (dd/mm/yyyy)</b> DD / MM / YYYY	<b>Age</b> <input type="text" value="select an age"/>	<b>Employed</b> <input type="text" value="Employed"/>
<input checked="" type="radio"/> Male <input checked="" type="radio"/> Non-Smoker	<input type="radio"/> Female <input type="radio"/> Smoker	<b>Email</b> <input type="text" value="client@quotemonster.co.nz"/>

You can delete a member by pressing the red 'X'

To add children to the policy click 'Children Details'

+ Add client

Children Details

Next >

Client Benefits Compare Report

Save & Close X

Step 1 : Personal Details Next >

Harry Goldman

Mary Goldman X

+ Add client

Children Details

+ Add Child

Then click 'Add Child'

Next >

Client

Benefits

Compare

Report

Save & Close



## Step 1 : Personal Details

Next >

Click 'Next' to progress to the next screen

Harry Goldman

Mary Goldman



+ Add client

### Children Details

First name

Junior

Last name

Goldman

Male

Female

Age

8

Date of Birth

26/9/2009

Select Date

Email

client@quotemonster.co.nz

Remove

+ Add Child

Next >

[Client](#)[Benefits](#)[Compare](#)[Report](#)

Or you can save and return to the landing page by clicking 'Save & Close'

[Save & Close](#)

## Step 2: Benefits

[← Back](#)[Next →](#)

+ **Harry Goldman** 46 year old Male Non-Smoker - Class 1 With 1

[Add Benefit ▾](#)

+ **Mary Goldman** 43 year old Female Non-Smoker - Class 1

[Add Benefit ▾](#)

You will then need to select a product for each member by clicking 'Add Benefit'

## Quote Result

[Monthly ▾](#)[Crunch](#)



# Step C

Quotemonster Dashboard About Contact Help News Notices 0 Settings Log Out

Client Benefits Compare Report Save & Close X

Step 2: Benefits Back Next

+ Harry Goldman 46 year old Male Non-Smoker - Class 1 With 1 Add Benefit

+ Mary Goldman 43 year old Female Non-Smoker - Class 1 Add Benefit

Quote Result Monthly Crunch

Save Reset

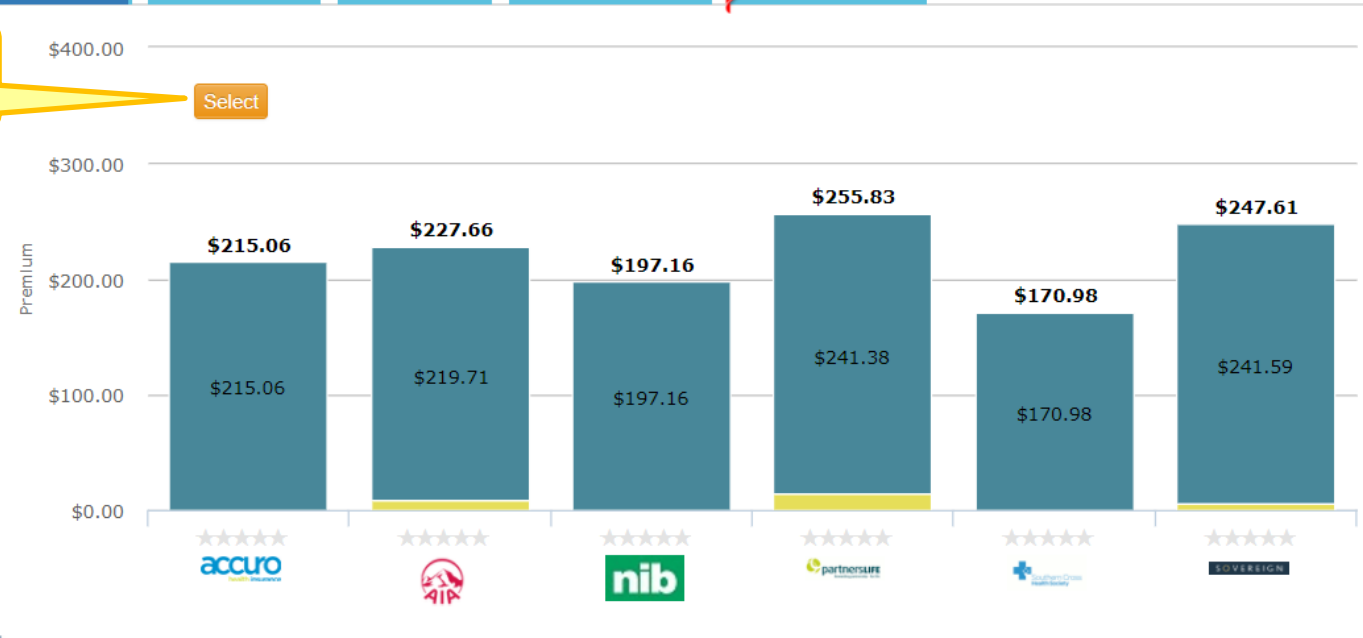
- Health Cover ✓
- Life Cover
- Family Protection
- Trauma
- Total and Permanent Disability
- Income Protection
- Mortgage Repayment Cover
- Redundancy Cover
- Waiver of Premium
- Life Level Premium
- Level Trauma
- Level TPD

To 'buy now' the health benefit must be selected for all members. Once you have selected 'Health Cover' you will need to press 'Save'

Step 3: Compare Insurers Back Next

- Premium
- Documents
- Research
- Head To Head
- NEW** Underwriting

To buy now click 'Select'



# Step D

Quotemonster Dashboard About Contact Help News Notices Settings Log Out

Plan Details Payment Details Confirm Health Questionnaires Back to Quote

Step 4 : Plan Details Next

**Harry Goldman** 40 year old Male Non-Smoker

Title

Email address  
harry@goldmanfamily.co.nz

Date of Birth  
6/2/1971 Select Date

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry

Relationship to Policyholder

**Mary Goldman** 43 year old Female Non-Smoker

Title

Email address  
mary@goldmanfamily.co.nz

Date of Birth  
26/9/1974 Select Date

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry

Relationship to Policyholder

**Junior Goldman** 6 year old Male

Title

Email address  
Email

Date of Birth  
26/9/2009 Select Date

Relationship to Policyholder

Complete all the blank fields for each member

Underwriting engine provided by Intelligent Life

# Step D

Quotemonster Dashboard About Contact Help News Notices Settings Log Out

Plan Details Payment Details Confirm Health Questionnaires Back to Quote

Step 4 : Plan Details Next

**Harry Goldman** 40 year old Male Non-Smoker

Title  
Mr

Email address  
harry@goldmanfamily.co.nz

Date of Birth  
6/2/1971 Select Date

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry

Relationship to Policyholder

**Mary Goldman** 43 year old Female Non-Smoker

Title

Email address  
mary@goldmanfamily.co.nz

Date of Birth  
26/9/1974 Select Date

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry

Relationship to Policyholder

**Junior Goldman** 3 year old Male

Title

Email address  
Email

Date of Birth  
26/9/2009 Select Date

Relationship to Policyholder

Underwriting engine provided by Intelligent Life

# Step D

Quotemonster Dashboard About Contact Help News Notices Settings Log Out

Plan Details Payment Details Confirm Health Questionnaires Back to Quote

Step 4 : Plan Details Next

**Harry Goldman** 45 year old Male Non-Smoker

Title: Mr

Email address: harry@goldmanfamily.co.nz

Date of Birth: 6/2/1971

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry: Professional, Scientific, Technical, Administrative and  
Relationship to Policyholder:

**Mary Goldman** 43 year old Female Non-Smoker

Title:

Email address: mary@goldmanfamily.co.nz

Date of Birth: 26/9/1974

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry:

Relationship to Policyholder:

**Junior Goldman** 8 year old Male

Title:

Email address: Email

Date of Birth: 26/9/2009

Relationship to Policyholder:

Underwriting engine provided by Intelligent Life

Title

Employment Industry

# Step D

Quotemonitor Dashboard About Contact Help News Notices Settings Log Out

Plan Details Payment Details Confirm Health Questionnaires Back to Quote

Step 4: Plan Details Next

Harry Goldman 46 year old Male Non-Smoker

Title: Mr

Email address: harry@goldmanfamily.co.nz

Date of Birth: 6/2/1971

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry: Professional, Scientific, Technical, Administrative and  
Relationship to Policyholder: Policy Holder

Mary Goldman 43 year old Female Non-Smoker

Title:

Email address: mary@goldmanfamily.co.nz

Date of Birth: 26/9/1974

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry:

Relationship to Policyholder:

Junior Goldman 8 year old Male

Title:

Email address: Email

Date of Birth: 26/9/2009

Relationship to Policyholder:

Title

Employment Industry

Relationship to policyholder (There will always need to be 1 policyholder)

Each member will either need to be a New Zealand Resident or hold a work visa of 2 years or more

# Step D

Quotemonster Dashboard About Contact Help News Notices Settings Log Out

Plan Details Payment Details Confirm Health Questionnaires Book to Quote

Step 4 : Plan Details Next

**Harry Goldman** 40 year old Male Non-Smoker

Title: Mr

Email address: harry@goldmanfamily.co.nz

Date of Birth: 6/2/1971

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry: Professional, Scientific, Technical, Administrative and  
Relationship to Policyholder: Policy Holder

**Mary Goldman** 43 year old Female Non-Smoker

Title: Mrs

Email address: mary@goldmanfamily.co.nz

Date of Birth: 26/9/1974

Are you a New Zealand resident?  
 New Zealand Resident  
 Work Visa of 2 years or more  
 Neither of these

Employment Industry: Electricity, Gas, Water and Waste Services  
Relationship to Policyholder: Partner

**Junior Goldman** 6 year old Male

Title: Mr

Email address: Email

Date of Birth: 26/9/2009

Relationship to Policyholder: Child

Once you've completed each members details, scroll down the page

# Choose your plan

## Base plan

**SmartCare+** [Download info](#)

General surgery  
Non-surgical cancer treatment  
Major diagnostic procedures  
Non-PHARMAC subsidised drugs  
Options for having treatment overseas  
Cover while in Australia

**SmartCare** [Download info](#)

General surgery  
Non-surgical cancer treatment  
Major diagnostic procedures

Excess

\$0 excess

You will need to select a base plan by clicking on the button next to the plan names

Select an excess amount from the dropdown menu

## Extras

### Specialist+ plan

**Benefits** [Download info](#)

Specialist consultations  
Minor diagnostic tests

Excess

\$0 excess

- Harry Goldman
- Mary Goldman
- Junior Goldman

### Natural Health+ plan

**Benefits** [Download info](#)

Chiropractic consultations  
Osteopath consultations  
Physiotherapist consultations  
Other health practitioner consultations

- Harry Goldman
- Mary Goldman
- Junior Goldman

### GP+ plan

**Benefits** [Download info](#)

Doctor and nurse visits  
Prescriptions  
Laboratory tests

- Harry Goldman
- Mary Goldman
- Junior Goldman

### Dental and Optical+ plan

**Benefits** [Download info](#)

Dental treatments  
Optical cover

- Harry Goldman
- Mary Goldman
- Junior Goldman

## Payment Summary

\$49.63/weekly

(Incl. 3% direct debit discount)

Payment frequency

weekly

Hospital & Surgical+ \$0 Excess

\$49.63/weekly

(Harry, Mary and Junior)



# Choose your plan

## Base plan

**SmartCare+** [Download info](#)  
 General surgery  
 Non-surgical cancer treatment  
 Major diagnostic procedures  
 Non-PHARMAC subsidised drugs  
 Options for having treatment overseas  
 Cover while in Australia

**SmartCare** [Download info](#)  
 General surgery  
 Non-surgical cancer treatment  
 Major diagnostic procedures

Excess

## Extras

### Specialist+ plan

**Benefits** [Download info](#)  
 Specialist consultations  
 Minor diagnostic tests

Excess

- Harry Goldman
- Mary Goldman
- Junior Goldman

### Natural Health+ plan

**Benefits** [Download info](#)  
 Chiropractic consultations  
 Osteopath consultations  
 Physiotherapist consultations  
 Other health practitioner consultations

- Harry Goldman
- Mary Goldman
- Junior Goldman

### GP+ plan

**Benefits** [Download info](#)  
 Doctor and nurse visits  
 Prescriptions  
 Laboratory tests

- Harry Goldman
- Mary Goldman
- Junior Goldman

### Dental and Optical+ plan

**Benefits** [Download info](#)  
 Dental treatments  
 Optical cover

- Harry Goldman
- Mary Goldman
- Junior Goldman

## Payment Summary

**\$49.63/weekly**

(incl. 3% direct debit discount)

### Payment frequency

**Hospital & Surgical+ \$0 Excess**  
**\$45.63/weekly**  
 (Harry, Mary and Junior)

Select any extras that you would like to include in the policy.

Member names will appear under the 'extra' and need to be individually applied by clicking on the check box next to their name

# Choose your plan

## Base plan

**SmartCare+** [Download info](#)  
 General surgery  
 Non-surgical cancer treatment  
 Major diagnostic procedures  
 Non-PHARMAC subsidised drugs  
 Options for having treatment overseas  
 Cover while in Australia

**SmartCare** [Download info](#)  
 General surgery  
 Non-surgical cancer treatment  
 Major diagnostic procedures

Excess

## Extras

### Specialist+ plan

**Benefits** [Download info](#)  
 Specialist consultations  
 Minor diagnostic tests

Excess

- Harry Goldman
- Mary Goldman
- Junior Goldman

### Natural Health+ plan

**Benefits** [Download info](#)  
 Chiropractic consultations  
 Osteopath consultations  
 Physiotherapist consultations  
 Other health practitioner consultations

- Harry Goldman
- Mary Goldman
- Junior Goldman

### GP+ plan

**Benefits** [Download info](#)  
 Doctor and nurse visits  
 Prescriptions  
 Laboratory tests

- Harry Goldman
- Mary Goldman
- Junior Goldman

### Dental and Optical+ plan

**Benefits** [Download info](#)  
 Dental treatments  
 Optical cover

- Harry Goldman
- Mary Goldman
- Junior Goldman

## Payment Summary

**\$66.75/weekly**  
 (incl. 3% direct debit discount)

Payment frequency

**Hospital & Surgical+ \$0 Excess**  
**\$49.63/weekly**  
 (Harry, Mary and Junior)

**Specialist+ \$0 Excess**  
**\$17.12/weekly**  
 (Harry, Mary and Junior)

As you change your excess amounts or select extras, your quote will update

# Choose your plan

## Base plan

**SmartCare+** [Download info](#)

- General surgery
- Non-surgical cancer treatment
- Major diagnostic procedures
- Non-PHARMAC subsidised drugs
- Options for having treatment overseas
- Cover while in Australia

**SmartCare** [Download info](#)

- General surgery
- Non-surgical cancer treatment
- Major diagnostic procedures

Excess

\$0 excess

## Extras

### Specialist+ plan

**Benefits** [Download info](#)

- Specialist consultations
- Minor diagnostic tests

Excess

\$0 excess

Harry Goldman

Mary Goldman

Junior Goldman

### Natural Health+ plan

**Benefits** [Download info](#)

- Chiropractic consultations
- Osteopath consultations
- Physiotherapist consultations
- Other health practitioner consultations

Harry Goldman

Mary Goldman

Junior Goldman

### GP+ plan

**Benefits** [Download info](#)

- Doctor and nurse visits
- Prescriptions
- Laboratory tests

Harry Goldman

Mary Goldman

Junior Goldman

### Dental and Optical+ plan

**Benefits** [Download info](#)

- Dental treatments
- Optical cover

Harry Goldman

Mary Goldman

Junior Goldman

## Payment Summary

**\$83.29/weekly**

(Incl. 3% direct debit discount)

Payment frequency

weekly

Hospital & Surgical+ \$0 Excess  
**\$49.63/weekly**

(Harry, Mary and Junior)

Specialist+ \$0 Excess  
**\$17.12/weekly**

(Harry, Mary and Junior)

GP+  
**\$16.54/weekly**

(Mary and Junior)

As you change your excess amounts or select extras, your quote will update

# Choose your plan

## Base plan

**SmartCare+** [Download info](#)

- General surgery
- Non-surgical cancer treatment
- Major diagnostic procedures
- Non-PHARMAC subsidised drugs
- Options for having treatment overseas
- Cover while in Australia

**SmartCare** [Download info](#)

- General surgery
- Non-surgical cancer treatment
- Major diagnostic procedures

Excess

\$0 excess

## Extras

### Specialist+ plan

**Benefits** [Download info](#)

- Specialist consultations
- Minor diagnostic tests

Excess

\$0 excess

- Harry Goldman
- Mary Goldman
- Junior Goldman

### Natural Health+ plan

**Benefits** [Download info](#)

- Chiropractic consultations
- Osteopath consultations
- Physiotherapist consultations
- Other health practitioner consultations

- Harry Goldman
- Mary Goldman
- Junior Goldman

### GP+ plan

**Benefits** [Download info](#)

- Doctor and nurse visits
- Prescriptions
- Laboratory tests

- Harry Goldman
- Mary Goldman
- Junior Goldman

### Dental and Optical+ plan

**Benefits** [Download info](#)

- Dental treatments
- Optical cover

- Harry Goldman
- Mary Goldman
- Junior Goldman

## Payment Summary

**\$360.93/monthly**

(incl. 3% direct debit discount)

Payment frequency

monthly

Hospital & Surgical+ \$0 Excess

\$215.06/monthly

(Harry, Mary and Junior)

Specialist+ \$0 Excess

\$74.18/monthly

(Harry, Mary and Junior)

GP+

\$71.69/monthly

(Mary and Junior)

As you change your excess amounts or select extras, your quote will update

You can also change the frequency of your payment

## Choose your plan

### Base plan

**SmartCare+** [Download info](#)  
General surgery  
Non-surgical cancer treatment  
Major diagnostic procedures  
Non-PHARMAC subsidised drugs  
Options for having treatment overseas  
Cover while in Australia

**SmartCare** [Download info](#)  
General surgery  
Non-surgical cancer treatment  
Major diagnostic procedures

Excess  
\$0 excess

### Extras

#### Specialist+ plan

**Benefits** [Download info](#)  
Specialist consultations  
Minor diagnostic tests

Excess  
\$0 excess

- Harry Goldman
- Mary Goldman
- Junior Goldman

#### Natural Health+ plan

**Benefits** [Download info](#)  
Chiropractic consultations  
Osteopath consultations  
Physiotherapist consultations  
Other health practitioner consultations

- Harry Goldman
- Mary Goldman
- Junior Goldman

#### GP+ plan

**Benefits** [Download info](#)  
Doctor and nurse visits  
Prescriptions  
Laboratory tests

- Harry Goldman
- Mary Goldman
- Junior Goldman

#### Dental and Optical+ plan

**Benefits** [Download info](#)  
Dental treatments  
Optical cover

- Harry Goldman
- Mary Goldman
- Junior Goldman

## Payment Summary

**\$360.93/monthly**

(Incl. 3% direct debit discount)

### Payment frequency

monthly

**Hospital & Surgical+ \$0 Excess**  
\$215.06/monthly  
(Harry, Mary and Junior)

**Specialist+ \$0 Excess**  
\$74.18/monthly  
(Harry, Mary and Junior)

**GP+**  
\$71.69/monthly  
(Mary and Junior)

After you have finalised your selection, click 'Next' and you will be taken to the payment screen

# Step F

Quote/monitor Dashboard About Contact Help News Notices Settings Log Out

Plan Details Payment Details Confirm Health Questionnaires Back to Quote

Step 5 : Payment Details Back Next

### Direct Debit

Payment frequency (\$369.93/monthly)  
monthly

Bank Account Holder's Name  
Bank Account Holder's Name

Account number  
13 1234 1234567 890

Bank/Branch:  
Bank/Branch:

First payment date 27/9/2017  
 OR As soon as possible

Details for my bank statement  
On your statement  
Particulars Code Member number

Authorisation Code  
AUTHORITY TO ACCEPT DIRECT DEBITS  
0 3 3 0 2 8 8  
(User number)  
(not to operate as an assignment or agreement)

Terms & conditions  
Please read the conditions of this authority or accept direct debits  
Read direct debit terms & conditions  
 I confirm that I have authority over this bank account and accept the conditions of this authority to accept direct debit

Back Next

Complete all the fields on screen

### Contact Details

Address  
Address  
Phone (Please provide at least one contact phone number)  
Home  
Home  
Work

As you type in the address, you will see it come up underneath. Click on your address when you see it and it will automatically populate the box

### Payment method

Direct debit  
Will be setup to start five days after your health insurance commences unless you state a first payment date. (Please note this is subject to the time it could take to complete the processing of your application.)  
First payment date  
If you have a preference please let us know otherwise we will start payments five days after issuing your policy.  
Please note: your first payment date cannot be after the 28th of the month.

# Step F

Quotemonster Dashboard About Contact Help News Notices Settings Log Out

Plan Details Payment Details Confirm Health Questionnaire Back to Quote

Step 5: Payment Details Back Next

### Direct Debit

Payment frequency (\$380.93/monthly)

monthly

Bank Account Holder's Name

Herry Goldman

Account number

12 3091 6514504 050

Bank/Branch:

ASB

First payment date 27/9/2017

OR As soon as possible

### Details for my bank statement

On your statement

Healthcare AccuroHealth Member number

### Authorisation Code

AUTHORITY TO ACCEPT DIRECT DEBITS

Authorisation Code

0 3 3 0 2 0 8

(User number)

(not to operate as an assignment or agreement)

### Terms & conditions

Please read the conditions of this authority or accept direct debits

Read direct debit terms & conditions

I confirm that I have authority over this bank account and accept the conditions of this authority to accept direct debit.

### Contact Details

Address

123 Ponsonby Road, Auckland, New Zealand

Phone (Please provide at least one contact phone number)

0216154545

Home

Work

### Payment method

Direct debit

Will be setup to start five days after your health insurance commences unless you date a first payment date. (Please note this is subject to the time it could take to complete the processing of your application.)

First payment date

If you have a preference please let us know otherwise we will start payments five days after issuing your policy.

Please note: your first payment date cannot be after the 28th of the month.

Underwriting engine provided by Intelligent Life

Back Next

Complete all the fields on screen

As you type in the address, you will see it come up underneath. Click on your address when you see it and it will automatically populate the box

Confirm the banking declaration once you have completed all fields

Select who will be completing the health questionnaire

Please select who will complete each of the following Health Questionnaires

**Harry Goldman** 46 year old Male Non-Smoker

- Greg Rosen (Agent)
- Harry Goldman via *harry@goldmanfamily.co.nz*
- Mary Goldman via *mary@goldmanfamily.co.nz*

**Junior Goldman** 8 year old Male

- Greg Rosen (Agent)
- Harry Goldman via *harry@goldmanfamily.co.nz*
- Mary Goldman via *mary@goldmanfamily.co.nz*

**Mary Goldman** 43 year old Female Non-Smoker

- Greg Rosen (Agent)
- Harry Goldman via *harry@goldmanfamily.co.nz*
- Mary Goldman via *mary@goldmanfamily.co.nz*

If you will be completing the questionnaires with your client, then select your own name.

If your client will be completing the questionnaire by themselves then select the email address to send the questionnaire completion link to



Clicking on 'Dashboard' will take you back to the advisor landing page

Payment Details Confirm Health Questionnaires

Back to Quote

### Step 7 : Health Questionnaires

You can complete the Health Questionnaire for each of your clients by clicking on the 'EApp' links below and following the on-screen instructions.

- [Harry Goldman](#)
- [Mary Goldman](#)
- [Junior Goldman](#)

Please note that all Health Questionnaires must be completed within 30 days. If not, the link will expire and you will need to reapply.

You will then be able to click one of the following links and a new tab will open with the selected health questionnaire

Get crunching 

[NEW QUOTE](#)

Policy Archive

[SEARCH 500+ OLD DOCUMENTS](#)













































Research Tools

[START NOW](#)

Subscriptions

[START NOW](#)

Saved Quotes

Who	When	Report/Buy Now	View	Clone	Delete
Jane Goodall  x 1	26-09-2017	EApp			
Harry Goldman & Mary Goldman  x 1	26-09-2017	EApp			
Bruce Banner 	26-09-2017	EApp			
Lebron James 	26-09-2017	EApp			
Bill Gates & Melinda Gates  x 1	26-09-2017	EApp			
Homer Simpson & Marge Simpson  x 3	26-09-2017	EApp			
Donald Trumpman & Melania Trumpman 	26-09-2017				
Will Smith & Jada Smith 	26-09-2017	EApp			
Barack Obama 	26-09-2017	EApp			
Kawhi Leonard 	26-09-2017	EApp			
Steph Curry 	26-09-2017	EApp			

Clicking on 'EApp' will present all of the health questionnaire links for the selected application

Get crunching 

NEW QUOTE

Policy Archive

SEARCH 500+ OLD DOCUMENTS

Research Tools

START NOW

Subscriptions

START NOW

Saved Quotes

Who

Jane Goodall  x 1

Harry Goldman & M

Bruce Banner 

Lebron James 

Bill Gates & Melinda

Homer Simpson & M

3

### Accuro Health EApp



























You can complete the Health Questionnaire for each of your clients by clicking on the 'EApp' links below and following the on-screen instructions.

- [Harry Goldman](#)
- [Mary Goldman](#)
- [Junior Goldman](#)

Please note that all Health Questionnaires must be completed within 30 days. If not, the link will expire and you will need to reapply.

Close

Search for...

Report/Buy Now	View	Clone	Delete
EApp			
EApp			
EApp			
EApp			
EApp			
EApp			
Donald Trumpman & Melania Trumpman 			
Will Smith & Jada Smith 			
Barack Obama 			
Kawhi Leonard 			
Steph Curry 			

You and your client will have 30 days to complete **ALL** of the health questionnaires. After this time you will need to reapply

# Step G

If your client has chosen to complete the health questionnaire themselves, they will receive an email containing a link. The link will be valid for **30 days**



Fri 23/06/2017 4:06 p.m.

Accuro Health <info@accuro.co.nz>

Accuro Health Questionnaire: Harry Goldman

To harry@goldmanfamily.co.nz

Hi,

You have been nominated to complete the Health Questionnaire for Harry Goldman. This can be done by clicking on the link below and following the on-screen instructions;

Link: [Application\\_Harry\\_Goldman](#)

Please note this link will expire in 30 days, after which you will need to reapply.

Kind regards

The team at Accuro



- 📍 Level 1, 79 Boulcott Street, Wellington
- 📮 P O Box 10 075, Wellington, 6143
- ☎ 0800 ACCURO (0800 222 876)
- 🌐 www.accuro.co.nz

## Health Information for *Harry Goldman*

next >

After clicking on a health questionnaire "link", you will arrive on the first page of the Accuro health online questionnaire

This questionnaire will open in a new 'tab' on your browser

Welcome to [Accuro Health](#).

Please complete this online Health Questionnaire for [Harry Goldman](#).

We'll ask you some questions about [Harry's](#) health and lifestyle, or alternatively you can upload [Harry's](#) medical records. We need this information to confirm if we can offer the policy as quoted.

It is important that you answer all questions as fully and accurately as you can.

Please click 'Next' to continue...

Click 'next' to continue

You have two options for providing your health information which tells us about any pre-existing conditions. You can complete either the medical records section or the health questionnaire section.

**Complete health questionnaire**

You will be asked 23 yes/no questions related to your health. For each 'yes', you may be asked more detailed questions about that medical condition.

Your health information is passed on to Accuro via a secure network and will only be used for underwriting your initial application and at claim time. Your health information will be retained throughout the extent of your membership and for the six years that follow, which is our legal obligation.

**OR**

**Upload medical records**

Obtain and upload to your application your full medical records. You will need to answer a few quick questions then upload your documents and you're done. This provides you with peace of mind knowing that you have provided Accuro with all of your medical history and when it comes to claiming, you won't need to provide us a medical report about the condition you are claiming for.

Please click 'Next' to continue...

You will then have 2 options.

Complete a health questionnaire

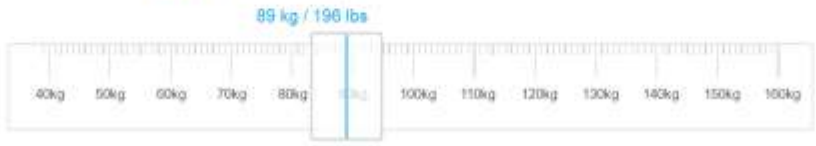
**OR**

You can choose to upload your  
medical records

What is your **height** in centimetres?



How much do you **weigh** in kilograms? ⓘ



Select height and weight by sliding the blue line to the appropriate position

Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

Click on the checkbox next to the conditions that your client has experienced or sought medical advice for

In relation to any of the following conditions, have you ever sought medical advice, undergone testing or treatment, used medication, or experienced any signs or symptoms?

- Diabetes, abnormal blood sugar, insulin resistance, thyroid disorder or any other glandular condition
- Any breathing problems including asthma, lung, chest, respiratory disorders or bronchitis, TB, emphysema
- Liver disease or disorder (e.g. hepatitis, abnormal liver function tests)
- Kidney disease, kidney stones, kidney infections or urinary tract reflux
- Epilepsy, neurological disease, multiple sclerosis, paralysis or stroke, dizzy spells, migraines, head injury, Parkinson's disease or transient ischaemic attack
- None of these



Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

Click on the checkbox next to the conditions that your client has experienced or sought medical advice for

In relation to any of the following conditions, have you ever sought medical advice, undergone testing or treatment, used medication, or experienced any signs or symptoms?

- Diabetes, abnormal blood sugar, insulin resistance, thyroid disorder or any other glandular condition
- Any breathing problems including asthma, lung, chest, respiratory disorders or bronchitis, TB, emphysema
- Liver disease or disorder (e.g. hepatitis, abnormal liver function tests)
- Kidney disease, kidney stones, kidney infections or urinary tract reflux
- Epilepsy, neurological disease, multiple sclerosis, paralysis or stroke, dizzy spells, migraines, head injury, Parkinson's disease or transient ischaemic attack
- [None of these](#)

If none of these are relevant select 'None of these'

Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

In relation to any of the following conditions, have you ever sought medical advice, undergone testing or treatment, used medication, or experienced any signs or symptoms?

- Arthritis, rheumatism, gout, occupational overuse syndrome, chronic fatigue or any disease, disorder, injury or ongoing pain to muscles, bones, tendons or joints, including hips, shoulders, back, neck, knees or wrists
- Bowel disorder, ulcers, colitis, ongoing abdominal pain, or any other disease or disorder of the gastro-intestinal tract, pancreas, or gall bladder
- Hernia (e.g. hiatus, inguinal, umbilical, incisional, femoral or epigastric)
- High blood pressure or raised cholesterol
- Rheumatic fever, heart murmur, unexplained chest pain, heart disease or disorder (e.g. angina)
- Indigestion or difficulty with swallowing
- None of these

Repeat this step for the next set of questions

Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

Depending on your selections, you may be asked additional questions

## Which condition, disease or disorder do you have?

- Arthritis
- Rheumatism
- Gout
- Occupational overuse syndrome (OOS) or carpal tunnel syndrome
- Disease or disorder of muscles, joints or bones
- [Injury to muscles, joints or bones](#)
- Chronic Fatigue
- Other ongoing pain associated with muscles, joints or bones

Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

**What injuries have you had?**

- Injured head or skull
- Fractured arm or leg
- Injured hand or foot
- Sprain, strain or dislocation of a major joint
- Injury to the face
- [Injury to the back or neck](#)
- Other injury to muscles, joints bones, tendons or cartilage.

Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

## What back or neck injuries have you had?

- Neck
- Upper back
- Lower back
- Sacrum
- Coccyx (tailbone)
- Other

Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

Did the injury to your lower back require surgery?

Yes

No

You may also be asked a series of Yes or No questions

Did the injury cause you to be hospitalised for more than 2 days?

Yes

No

Did the injury cause you to be off work or off school for more than 1 week?

Yes

No

Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

In relation to any of the following conditions, have you ever sought medical advice, undergone testing or treatment, used medication, or experienced any signs or symptoms?

- Cancer, tumour, cyst, polyp, breast lump, moles, skin or any other lesion, abscess or ulcer
- Allergy, psoriasis, eczema or any other skin condition or disorder
- Varicose veins, haemorrhoids, rectal bleeding, blood or bleeding disorder (e.g. anaemia or haemophilia), HIV or AIDS
- Eye disease or vision disorder other than wearing glasses (e.g. cataracts or glaucoma)
- Disease of the ears, nose or throat including sinusitis, recurrent sore throat, tonsillitis, ear infections, or hay fever
- Disease or disorder of the mouth / oral cavity including unerupted or impacted teeth
- [None of these](#)

At any point throughout the questionnaire you can go back and change your answers by clicking 'back'

Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

In relation to any of the following conditions, have you ever sought medical advice, undergone testing or treatment, used medication, or experienced any signs or symptoms?

- Prostate problem, testicular disorder, hypospadias or any sexual dysfunction likely to require treatment
- Other genito-urological or bladder disorders, including urinary tract infections, problems passing urine, increased urinary urgency, blood in the urine, or disease or disorder of the urethra or ureters
- Have you ever had a parent, brother, sister or child who, prior to age 65, was diagnosed with cancer, heart disease, stroke, diabetes, kidney disease, Huntington's disease, muscular dystrophy, cystic fibrosis, multiple sclerosis (MS), familial polyposis or an inherited neurological or blood disease?
- Any other illness, injury, condition, medical treatment, surgery, medication, accident or disorder not covered above
- [None of these](#)

You can also save your answers and complete the questionnaire at a later time by clicking 'save'



Health Questionnaire for *Harry Goldman*

&lt; back

save

next &gt;

**Your usual GP**

Doctor's name

Dr Who



Name of practice

(Optional)

**Your usual Dentist**

Dentist's name

(Optional)



Name of practice

Teeth'R'Us

The fields on this page are optional and are not required to continue

Health Questionnaire for *Harry Goldman*

&lt; back

save

submit &gt;

Congratulations.

All questions for **Harry** have now been answered. To review and change your answers, just click 'Back' and edit as required.

Then when you're done, [read and accept the Policy declaration](#), and click 'Submit'.

When you arrive on this page you will need to read and accept the policy declaration by clicking on blue text

Read the  
declaration and  
scroll down to the  
bottom

## Declaration and authorisation to obtain and use information

I/We, the person(s) applying for this Accuro Health Insurance Plan, confirm that I/we:

1. Agree that this application and any other information obtained/provided about persons to be included on my/our plan forms the basis of the contract.
2. Declare that the information I/we have given is correct and complete and that no material fact has been omitted. I/We undertake to advise Accuro Health Insurance of any health condition or event that may affect me/us or any of the other people named in this application or any relevant information that may affect the policy between the date I/we sign this application and the date I/we receive a membership certificate from Accuro Health Insurance.
3. Declare that any information supplied in this application, whether written by me/us or not, is true and accurate and that I am/we are authorised, where any person insured is less than 16 years of age, to act on their behalf.
4. Have read and understand this declaration and authorisation and its applicability to the Privacy Act 1993 and Health information Privacy Code 1994 (see below for further information).
5. Understand the nature of the plan(s) chosen and believe they meet my/our requirements.
6. Understand that, upon issuance of the membership certificate, I/we have fourteen (14) days to cancel my/our plan(s) ("14-day

4. Accuro Health Insurance is also a registered financial service provider under the Financial Service Providers (Registration and Dispute Resolution) Act 2008.
5. The Board of Directors of the Society reserves the right, at all times, to vary the terms and conditions and benefits of plans however it deems appropriate.
6. This application forms the basis of any contract that eventuates and must be completed truthfully and accurately. Applicants are obliged, beyond that which is requested, to volunteer information that would have a material impact on the cover offered. If you have doubts, you should disclose the information to Accuro Health Insurance for determination of significance.
7. Premiums are subject to change on 21 days' notice.

I/We acknowledge the information provided in this declaration, including in relation to my/our privacy, and accept the terms and conditions (including the limitations and exclusions) of the policy, including Accuro Health Insurance General Policy Terms and Conditions.

Financial strength rating: Accuro has achieved a B (Stable) AM Best financial strength rating. For more rating information visit [www.ambest.com/ratings/guide.pdf](http://www.ambest.com/ratings/guide.pdf). The rating scale is: A++, A (Superior), A, A- (Excellent), B++, B+ (Good), B, B-(Fair), C++, C+ (Marginal), C, C- (Weak), D (Poor), E (Under Regulatory Supervision), F (In Liquidation), S (Suspended)

After reading the declaration click 'I accept'



Health Questionnaire for *Harry Goldman*

&lt; back

save

submit &gt;

The declaration will close  
after accepting

Congratulations.

All questions for **Harry** have now been answered. To review and change your answers, just click 'Back' and edit as required.

Then when you're done, [read and accept the Policy declaration](#), and click 'Submit'.

## Application summary

[UW result >](#)

Thank you for submitting **Harry Goldman's** Health Questionnaire.

Just to confirm, the following Health Questionnaires have now been submitted...

Harry Goldman	<input checked="" type="checkbox"/>	Health Questionnaire submitted
Mary Goldman	<input type="checkbox"/>	In progress
Junior Goldman	<input type="checkbox"/>	In progress

This screen will let you know whose health questionnaires are still outstanding

This will only be visible in the test environment (qa.quotemonster.co.nz)

You can now leave by closing this tab on your browser.

Once all Health Questionnaires have been submitted, Accuro will process the application.

You and your client can now exit this page. The health questionnaire is complete.

## Review of underwriting outcomes

### This screen is for test purposes only

#### MEMBER DETAILS

Name:	Harry Goldman
Date of Birth:	Saturday, February 6, 1971
Age:	46
Gender:	Male
Smoker:	NonSmoker

#### EMCS

EMC-FF21-0-N-Life-B: Any consequence of the Lumbar/Lumbosacral Spine (including but not limited to disorders of the nerve root, supporting musculature structure and/or connective tissue) and the investigation, treatment and/or any complications thereof for life.

#### AUTO DECISIONING

Accepted with exclusions

#### ANSWERS PDF

[Your Accuro Health Answers.pdf](#)

For test purposes you will be able to see the automated underwriting decision and any exclusions that will be applied to the policy

---

You have two options for providing your health information which tells us about any pre-existing conditions. You can complete either the medical records section or the health questionnaire.

**Complete health questionnaire**

You will be asked 23 yes/no questions related to your health. For each 'yes', you may be asked more detailed questions about that medical condition.

Your health information is passed on to Accuro via a secure network and will only be used for underwriting your initial application and at claim time. Your health information will be retained throughout the extent of your membership and for the six years that follow, which is our legal obligation.

OR

**Upload medical records**

Obtain and upload to your application your full medical records. You will need to answer a few quick questions then upload your documents and you're done. This provides you with peace of mind knowing that you have provided Accuro with all of your medical history and when it comes to claiming, you won't need to provide us a medical report about the condition you are claiming for.

---

Please click 'Next' to continue...

---

Alternatively, you can opt to upload medical records instead of answering the health questionnaire



## Upload Medical Records for *Junior Goldman*

[< back](#)[save](#)[next >](#)

Have you ever experienced, had symptoms of, been treated for or been advised to seek testing or treatment for any other illness, accident, injury, condition, complaint, disability, medication or disorder not already stated in your GP medical notes?

 Yes No

Have you ever been hospitalised or had any tests, medical treatment or investigations in the last five years or be intending to for any condition not already stated, including, but not limited to blood and/or urine test, X-ray, ultrasound, CT scan, mammogram, MRI, gastroscopy, colonoscopy, endoscopy, hysteroscopy or laparoscopy?

 Yes No

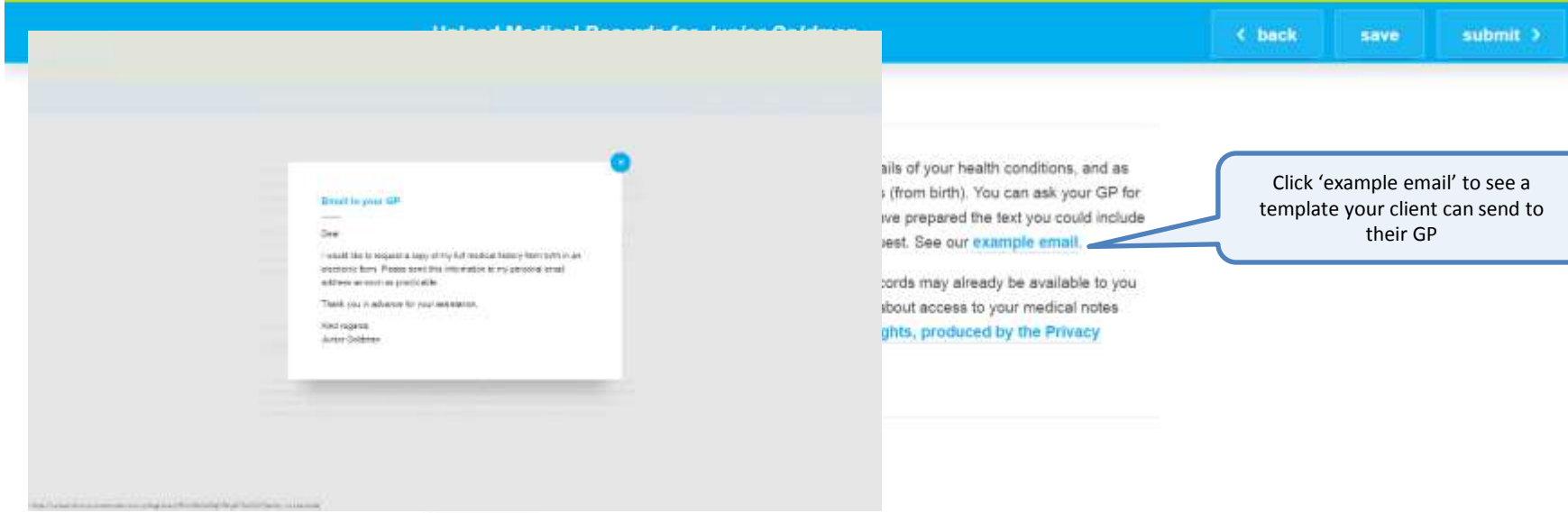
Have you ever had oral surgery or experienced, had symptoms of, been treated for or been advised to seek testing or treatment for wisdom teeth, impacted or unerupted teeth, cysts or gum disease?

 Yes No

Have any of your parents, brothers, sisters or children (living or dead) had or been diagnosed with any of the following: cancer, stroke, heart disease, diabetes, kidney disease, Huntington's chorea, muscular dystrophy, cystic fibrosis, familial polyposis, polycystic kidney disease, multiple sclerosis, inherited neurological or blood disease or any familial and/or congenital disease or disorder?

 Yes No

You will then be asked 4 Yes or No questions



You can upload your medical records from your computer in .jpeg, .tif, .png and .pdf file formats. The file size per document should not exceed 25MB. If you have multiple documents, please browse and upload your documents one at a time. Once all documents you require appear in the uploaded documentation section, click Finish to continue your application. If you need time to gather your medical records, you can save and return later.

## Upload Medical Records for *Junior Goldman*

< back

save

submit >

We understand that it can be hard for you to remember all the details of your health conditions, and as such, we are happy to underwrite based on your full medical notes (from birth). You can ask your GP for an electronic copy of this for little or no charge. To help you, we have prepared the text you could include in an email or use as a script when calling them to make your request. See our [example email](#).

Note: Your GP may provide a patient portal. If so, your medical records may already be available to you once you have registered to use the portal. For more information about access to your medical notes please see Health information [Check-up: Know Your Privacy Rights, produced by the Privacy Commissioner](#).

Or you can view your privacy rights

### UPLOAD A FILE

Choose a file

You can upload your medical records from your computer in .jpeg, .tif, .png and .pdf file formats. The file size per document should not exceed 25MB. If you have multiple documents, please browse and upload your documents one at a time. Once all documents you require appear in the uploaded documentation section, click Finish to continue your application. If you need time to gather your medical records, you can save and return later.

Upload Medical Records for *Junior Goldman*

&lt; back

save

submit &gt;

We understand that it can be hard for you to remember all the details of your health conditions, and as such, we are happy to underwrite based on your full medical notes (from birth). You can ask your GP for an electronic copy of this for little or no charge. To help you, we have prepared the text you could include in an email or use as a script when calling them to make your request. See our [example email](#).

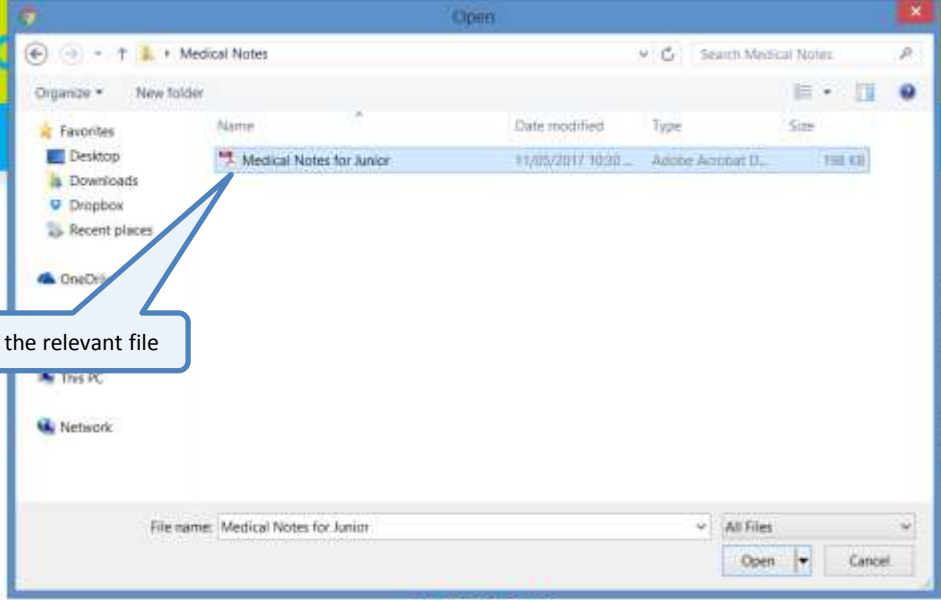
Note: Your GP may provide a patient portal. If so, your medical records may already be available to you once you have registered to use the portal. For more information about access to your medical notes please see Health information [Check-up: Know Your Privacy Rights, produced by the Privacy Commissioner](#).

## UPLOAD A FILE

Click 'Choose a file' to select your file to upload

You can upload your medical records from your computer in .jpeg, .tif, .png and .pdf file formats. The file size per document should not exceed 25MB. If you have multiple documents, please browse and upload your documents one at a time. Once all documents you require appear in the uploaded documentation section, click Finish to continue your application. If you need time to gather your medical records, you can save and return later.

# Step H



< back save submit >

of your health conditions, and as  
rom birth). You can ask your GP for  
prepared the text you could include  
t. See our [example email](#).

ds may already be available to you  
ut access to your medical notes  
s, produced by the Privacy

### UPLOAD A FILE

Choose a file

You can upload your medical records from your computer in .jpeg, .tif, .png and .pdf file formats. The file size per document should not exceed 25MB. If you have multiple documents, please browse and upload your documents one at a time. Once all documents you require appear in the uploaded documentation section, click Finish to continue your application. If you need time to gather your medical records, you can save and return later.



## Upload Medical Records for *Junior Goldman*

< back

save

submit >

We understand that it can be hard for you to remember all the details of your health conditions, and as such, we are happy to underwrite based on your full medical notes (from birth). You can ask your GP for an electronic copy of this for little or no charge. To help you, we have prepared the text you could include in an email or use as a script when calling them to make your request. See our [example email](#).

Note: Your GP may provide a patient portal. If so, your medical records may already be available to you once you have registered to use the portal. For more information about access to your medical notes please see Health information [Check-up: Know Your Privacy Rights, produced by the Privacy Commissioner](#).

### UPLOAD A FILE

Choose a file

Medical Notes for Junior.pdf [delete](#)

You can upload your medical records from your computer in .jpeg, .tif, .png and .pdf file formats. The file size per document should not exceed 25MB. If you have multiple documents, please browse and upload your documents one at a time. Once all documents you require appear in the uploaded documentation section, click Finish to continue your application. If you need time to gather your medical records, you can save and return later.

You will now see that the file has been uploaded

Application summary

UW result >

Thank you for submitting **Junior Goldman's** Health Questionnaire.

Just to confirm, the following Health Questionnaires have now been submitted...

Harry Goldman	✓	Health Questionnaire submitted
Mary Goldman	✓	Health Questionnaire submitted
Junior Goldman	✓	Medical records uploaded

You can now leave by closing this tab on your browser.

Your application for health insurance is currently being processed and you will be notified of Accuro Health's decision through your Financial Adviser [greg rosen](#).

Once all health questionnaires are complete you will see the following message

Once all questionnaires have been completed, you will receive one of three automated emails informing you of the underwriting outcome

**Options**

1. The application has been accepted with no exclusions
2. The application has been accepted, but exclusions will be applied
3. The application requires manual review by an underwriter



Mon 26/06/2017 1:43 p.m.

Accuro Health <info@accuro.co.nz>

Accuro Health Application: Harry Goldman

To greg rosen

Dear greg,

Your client Harry Goldman has completed the application for health insurance and we are pleased to advise that we have accepted the application and no individual exclusions have been applied.

The application has been passed to the Membership team to commence the cover and issue the policy document within the next few working days.

The policy document will then be emailed to Harry.

If Harry has a preferred start date or would like us to place the application on hold, please let us know as soon as possible.

Thank you for your support of Accuro Health Insurance.

Kind regards

The team at Accuro



- Level 1, 79 Boulcott Street, Wellington
- P O Box 10 075, Wellington, 6143
- 0800 ACCURO (0800 222 876)
- www.accuro.co.nz

OPTION 1  
 You will receive this email if the application has been **accepted with no exclusions**





# Step 1



Mon 26/06/2017 2:07 p.m.

Accuro Health <info@accuro.co.nz>

Accuro Health Application: Harry Goldman

To: greg.rosen

Dear greg,

Your client, Harry Goldman, has completed their application for health insurance and based on the medical information provided, we will be applying exclusions to the policy.

The exclusions, as they would appear in the policy, are set out below. If you require clarification regarding these exclusions or how they may affect your client at claim time, please don't hesitate to ask.

Exclusions for Harry Goldman

- Any consequence of the Lumbar/Lumbosacral Spine (including but not limited to disorders of the nerve root, supporting musculature structure and/or connective tissue) and the investigation, treatment and/or any complications thereof for life.

Exclusions for Mary Goldman

- No exclusions

Exclusions for Junior Goldman

- No exclusions

Please confirm with your client if they wish to either proceed with the above exclusions or seek a review, by clicking on one of the following links:

- [Accept Exclusions »](#)
- [Seek Review of Exclusions »](#)
- [Don't wish to continue this application »](#)

If your client accepts the exclusions, then the application will immediately be passed to the Membership team to commence the cover and issue the policy document within the next few working days.

If your client seeks a review, we'll contact them to discuss their health and reassess the exclusion, however there is no guarantee the exclusion will be removed.

Thank you for your support of Accuro Health Insurance.

Kind regards

The team at Accuro



Level 1, 79 Bouverie Street, Wellington  
P O Box 10 076, Wellington, 6143  
0800 ACCURO (0800 223 275)  
www.accuro.co.nz

Underwriting engine provided by Intelligent Life

OPTION 2  
You will receive this email if the application has been **accepted with exclusions**

You will be offered three options – you simply click the appropriate link...

- You can;
1. Accept the exclusions
  2. Seek a manual review of the exclusions by an Accuro Underwriter
  3. Withdraw the application

Once you have clicked the link, Accuro will immediately be notified of your/your client's decision and will take the requested action



Mon 26/06/2017 1:24 p.m.

Accuro Health <info@accuro.co.nz>

Accuro Health Application: Harry Goldman

To greg rosen

Dear greg,

Your client Harry Goldman has completed their application for health insurance and, based on the medical information provided, we'll need further health-related information before we can complete our assessment of the application.

We'll endeavour to make contact with your client in the next 5 working days, explaining specifically what information is needed. Then once we have that information, we will make a decision regarding your application as quickly as possible.

Meanwhile, should you have any queries in regard to this application, please don't hesitate to contact us.

Kind regards

The team at Accuro



- Level 1, 79 Boulcott Street, Wellington
- P O Box 10 075, Wellington, 6143
- 0800 ACCURO (0800 222 876)
- www.accuro.co.nz



**OPTION 3**  
 You will receive this email if the application needs to be manually reviewed by an underwriter



Great work... you're done!