

# **Allstate Health Questionnaire**

- 1) Is any applicant now pregnant, an expectant parent, in the process of adopting, in the process of surrogate pregnancy or undergoing infertility treatment?
- 2) Within the last 5 years, has any applicant received medical or surgical treatment, consulted a health care professional, or has medication been prescribed or recommended for the following:
  - a) Coronary Artery Disease (CAD)
  - b) Heart disorder
  - c) Heart Attack, or a heart procedure,
  - d) Stroke, Transient Ischemic Attack (TIA)
  - e) Carotid Artery Disease, Crohn's Disease
  - f) Ulcerative Colitis
  - g) Liver disorders
  - h) Kidney disorders
  - i) Emphysema
  - j) Chronic Obstructive Pulmonary Disease (COPD)
  - k) Diabetes
  - l) Prediabetes
  - m) Cancer
  - n) Tumor, Lump, or Mass
  - o) Alcoholism, Alcohol or Chemical Dependency, or Drug or Alcohol Abuse
  - p) Neck or Back Disorder
  - q) Joint Replacement
  - r) Bipolar Disorder or Schizophrenia
  - s) Systemic Lupus Erythematosus
  - t) Multiple Sclerosis (MS)
- 3) Within the last 5 years, has any applicant received medical or surgical treatment, consulted a health care professional, or has medication been prescribed or recommended for Acquired Immune Deficiency Syndrome (AIDS) or tested positive for Human Immunodeficiency Virus (HIV)?
- 4) In the last 12 months, has any applicant:
  - a) Been recommended or scheduled for testing (excluding routine), treatment, follow-up, or surgery that has not been completed?
  - b) Consulted a health care professional for signs and symptoms of a medical condition for which a diagnosis has not been determined or a final diagnosis has not been communicated or determined?
- 5) When last have you used tobacco in any form, or used nicotine products including a patch gum, or electronic cigarettes?

- 6) Have all adult applicants had other major medical health insurance (including Short Term) for at least 9 months within the last 12 months?
- 7) Are you rewriting an existing Allstate Health Solutions Short Term Medical customer on a new Allstate Short Term Medical plan? (This applies to Allstate Health Solutions Short Term Medical Rewrites only)
- 8) Does any adult applicant lease/own a motorcycle?
- 9) Has any adult had any citations for DUI/DWI or more than 1 moving violation including speeding ticket(s) within the past 2 years?
- 10) Within the last 5 years, has any applicant received medical treatment or has medication been prescribed or recommended for the following: High Blood Pressure, High Cholesterol, Anxiety, or Depression?