

LifeLines

Competitive Underwriting Alert

Prostate Cancer Improved Underwriting Guidelines

Aside from skin cancer, prostate cancer is the most common cancer in American men¹. About one man in nine will be diagnosed during his lifetime with prostate cancer. With one man in 41 dying from prostate cancer, it is the second-most common cause of cancer death for men². It is estimated that in 2019, there will be nearly 175,000 new cases of prostate cancer diagnosed. This means that about 20% of the most dangerous cancers in men are prostate cancer. Nearly 32,000 men will die from prostate cancer, accounting for about 10% of all cancer deaths in men. The risk increases with age (the median age at diagnosis is 66), and with a family history of prostate cancer³.

There are several methods of treating prostate cancer. Among those methods are surgery (prostatectomy), radiation therapy, or very close monitoring for signs of progression, called active surveillance.



All underwriting offers are subject to usual requirements and guidelines, complete medical history and underwriter discretion.

¹ www.cancer.org/cancer/prostate-cancer/about/key-statistics.html

² Siegel, CA Cancer J. Clin. 2019;69:7-34,12.

³ seer.cancer.gov/statfacts/html/prost.html

**FOR FINANCIAL PROFESSIONAL USE ONLY.
NOT FOR USE WITH THE PUBLIC.**

The prognosis, or risk of death, from prostate cancer is categorized into stages that include three factors.

- Anatomic features, using the "TNM" system: "T" refers to the primary tumor itself; "N" to the spread to nearby lymph nodes; and "M" to metastasis to distant sites.
- Microscopic features that indicate how aggressive the cancer is, meaning how quickly the cancer is likely to spread, measured by a scale called the Gleason Score. The most dangerous score is 10.
- When elevated, PSA, a protein produced by the prostate, is a marker for prostate cancer. How high it was at diagnosis is the third factor.

Prostate cancer staging is based on various combinations of all three factors. Recently doctors have revised those combinations of factors so that the stages are better able to represent the prognosis of prostate cancer.

MassMutual® underwriting guidelines have been updated to mirror this recent prognosis-based reclassification of prostate cancer. These revisions include dividing prior prostate cancer groupings into groups that are more common and less severe, and those that are less common but more severe. Use of these reclassifications, along with the use of the latest information on mortality improvements based on current treatments, have resulted in major favorable revisions in the Prostate Cancer section of the Life Underwriting Medical Manual.

Key Changes

New guidelines take into account the most recent prognosis-based refinements in prostate cancer staging, which enable greater accuracy in determining the mortality risk.

- The prognosis with low-stage prostate cancer is generally excellent. Therefore, no postponement beyond completion of treatment for some low-stage cancers may be needed.
- Postponement periods and temporary flat extra ratings for higher stages of prostate cancer have generally been reduced.
- Some permanent declines were eliminated.

Case Study #1

George is a 67-year-old manager of a pet supply store. At his annual exam about 8 months ago, his PSA was found to be elevated at 7.1 ng/mL. Biopsy of the prostate revealed cancer, and he underwent a prostatectomy. The tumor was found to have extended throughout the prostate, but did not spread beyond it. The cancer was noted to be Gleason Score 6. George's PSA is now so low that it is undetectable by the laboratory.

Prior Rating	Revised Rating
\$7.50 Flat extra for 3 years	Standard

Because his prostate cancer was localized and had favorable prognostic features, George may qualify for a Standard rating!

Case Study #2

Ralph is a 57-year-old dentist. At his annual exam 2-½ years ago, his PSA was found to be elevated at 9.2 ng/mL. Biopsy of the prostate revealed cancer, Gleason Score 8. There was no sign of progression of the cancer beyond the prostate by exam or by an MRI. Ralph opted for treatment with radiation. His PSA has remained stable at a low level, 0.4 ng/mL, when last checked 3 months ago.

Prior Rating	Revised Rating
Declined	\$10 Flat extra for 5 years

Ralph's prostate cancer was fairly aggressive at Gleason Score 8, but he was successfully treated and may now qualify for a rated policy rather than be declined for coverage!

For additional information, please contact
Life Underwriting at 1-800-767-1000, option 2.

All underwriting offers are subject to usual requirements and guidelines, complete medical history and underwriter discretion.

FOR FINANCIAL PROFESSIONAL USE ONLY. NOT FOR USE WITH THE PUBLIC.

