

Auto Decline

Do you (or any applicant in your family) currently have any of the following conditions?

- Alzheimer's Disease
- Autism Spectrum Disorders
- Cerebral Palsy
- Cholera
- Cancer
- Chronic Kidney Disease
- Chronic Obstructive Pulmonary Disease
- Cystic Fibrosis
- Dementia
- Diabetes Type I
- Down's Syndrome
- Emphysema
- Fragile X Syndrome
- Hepatitis (Chronic Viral B & C)
- HIV/AIDS
- Lyme's Disease
- Muscular Dystrophy
- Parkinson's Disease
- Schizophrenia, Paranoia, or Psychosis
- Sickle-Cell Disease
- Spina Bifida
- Typhoid