



Brighthouse SmartCare®

What to Expect During the Application and Underwriting Process



Thank you for considering Brighthouse Financial for your insurance needs. This guide provides a general overview of the application and underwriting process for Brighthouse SmartCare*, a hybrid life insurance and long-term care policy. To expedite the application process, follow these instructions and have all necessary information available. Additional steps may be required by your financial professional's firm.

Preparing for the Telephone Interview Application

1. Participants needed for the telephone interview application

Policy Owner

The person, business, trust, or entity with the right to make all decisions regarding the policy. The policy owner and proposed insured may be the same person.

Proposed Insured

The person to be insured by the proposed coverage. If the insured becomes eligible for benefits, the policy owner will receive the payments. Upon the insured's death, the named beneficiaries will receive the death benefit.

2. Scheduling the telephone interview application

Proposed Insured

Brighthouse Financial® will send an email that includes a link to the proposed insured. The proposed insured must click this link to review and consent to all required forms. The telephone interview and forms are in English and aren't available in any other language.

Under Age 66

Once the proposed insured reviews and consents to all forms, they will schedule the telephone interview based on their own availability. The proposed insured will then receive an email confirming the date and time for their telephone interview.

Ages 66 and Older

A cognitive screening assesses impairments with attention, memory, learning, decision-making, and problem-solving. Once the proposed insured reviews and consents to all forms, they will schedule the cognitive screening interview based on their own availability. The proposed insured will then receive an email confirming the date and time for their cognitive screening interview. The BHF Client Consultant will also receive a confirmation email and will schedule the proposed insured's telephone interview to immediately follow the cognitive screening. Interviews requiring a cognitive screening are typically scheduled Monday through Friday, 9:00 a.m. – noon ET and take about 30 minutes to complete.

3. Information needed for the telephone interview application

Policy Owner

- Name, Social Security number or taxpayer identification number, and state of residence of the policy owner
- List of any life insurance and/or long-term care insurance policies for the policy owner (in force and/or applied for), including policy numbers, face amount, and full address of carrier
- · Financial information: Household annual income and net worth
- Green card/visa information and immigration status (if applicable)
- For each beneficiary (both primary and contingent): Name, date of birth, Social Security number or taxpayer identification number, and address
- Name and address of additional designated person to receive lapse notice (if selected)

Proposed Insured

- Name, Social Security number or taxpayer identification number, and state of residence of the proposed insured
- Names, addresses, and phone numbers of licensed health care practitioners and/or medical facilities that have treated the proposed insured in the past 10 years
- Prescriptions, over-the-counter medications, and at-home remedies: Name, dosage, length of use, and details about the reason(s) for each
- · Medical history, including any history of alcohol or drug use
- Current and past use of tobacco products
- · Driving history along with driver's license number and state of issue
- List of any life insurance and/or long-term care insurance policies for the proposed insured (in force and/or applied for), including policy numbers, face amount, and full address of carrier
- · Financial information: Household annual income and net worth
- Green card/visa information and immigration status (if applicable)

4. Complete the telephone interview application

Policy Owner and Proposed Insured

A Brighthouse Financial underwriter will conduct the telephone interview application with the policy owner and proposed insured. The telephone interview may last approximately 60 minutes. After the interview is complete, all parties will receive the application, any supplemental forms, and the illustration for signature.

Additional Information

When people apply for life insurance, they're asking an insurer to assume the risk of loss. The insurer needs to fully understand the risk it's taking to determine the premium needed to insure that risk. Every application is different; your requirements and results may vary from those mentioned here.

All information gathered by Brighthouse Financial will be kept confidential. You will receive a copy of the consumer privacy notice that explains how we will obtain, use, and protect your personal information.

What happens after the telephone interview application is complete?

Once the application is complete and the signed application is received by Brighthouse Financial, the information will be used to determine the proposed insured's eligibility for coverage. Many factors are considered when evaluating the application. If no additional requirements are needed, a decision will generally be made within 24 hours. For applications that require an Attending Physician Statement, the process can take up to 4 weeks to complete.

Attending Physician Statement (APS)

We may request additional details from the proposed insured's health care practitioner(s) providing an APS so we can fully understand their current health and medical history. To help speed up the process, the proposed insured can authorize us to collect their data, have the contact information for all of their medical providers available, and alert their health care practitioner(s) that this request may come. The health care practitioner(s) may have their own authorization. The proposed insured may be contacted by ExamOne to complete this additional authorization. These special authorizations cannot be electronically signed; they need a manual signature. We will request an APS on all proposed insureds ages 66 and older.

Paramedical Exam

For applicants ages 60-69 who have not seen a health care practitioner in the past 2 years for routine care, we may require a paramedical exam. The examiner will record your height and weight, check your blood pressure, collect a blood sample and a urine sample, and conduct a brief medical history interview. The examiner will also conduct a long-term care screening, which will contain a short cognitive exam. These appointments usually take 30-45 minutes.

Decision and delivery

Underwriter Review and Decision

After all requirements are met, the underwriting decision will be communicated to the policy owner's financial professional.

Policy Delivery and Confirmation

If the policy owner accepts the coverage, a premium payment will be required before we issue the policy. After the premium is received, the policy owner will receive an email with a link to download the policy and electronically sign any applicable delivery requirements. When they receive the policy, the policy owner should:

- Confirm that all information in the policy, including the application, is accurate; they should alert their financial professional if anything has changed or requires updating
- Review any amendments to the application (if applicable)
- Review the statements below the "Right to Examine Your Policy" on page 1 of the policy to learn about their rights to return and cancel the policy within a specified period of time
- · Sign, date, and return the revised illustration, Policy Receipt, and (if applicable) the Amendment form

No insurance coverage will take effect until a policy is delivered to the policy owner, the first premium is paid in full, and all applicable delivery requirements are signed and returned to the issuing insurance company. The policy will only take effect at the time it is delivered if: (a) the condition of the proposed insured's health is the same as stated in the application; and (b) the proposed insured has not received any medical advice or treatment from a health care practitioner since the date of the application.



If you have any questions about underwriting or the application process, contact your financial professional.

Brighthouse SmartCare® is an indexed universal life insurance policy with long-term care riders issued in New York only by, and product guarantees are solely the responsibility of, Brighthouse Life Insurance Company of NY, New York, NY 10017 ("Brighthouse Financial"). All guarantees, including any optional benefits, are subject to the claims-paying ability and financial strength of the issuing insurance company. The issuing insurance company is solely responsible for its own financial condition and contractual obligations. Brighthouse SmartCare has exclusions, limitations, reduction of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, please contact a financial professional. May not be available in all states or firms.

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