	Who	Can Reco	ord For Who	ο?			
	SC	GA	MD	VA	NJ	DC	DE
Spouse for Spouse							
Max coverage: 20k	✓		✓	✓	✓	✓	✓
Parent for Child if Modified							
Max coverage: 15k	✓				✓	✓	✓
Child for Parent if Modified  Max coverage parent under 60:  10k/Max coverage parent 60 and  over: 15k	<b>✓</b>				<b>√</b>	<b>✓</b>	<b>✓</b>
Parent for Minor Child  Max coverage: 35k/Modified: 15k	<b>√</b>	<b>✓</b>	~	<b>√</b>	✓	~	<b>✓</b>
Owner for Alzheimer/ Dementia Max coverage: 15k	<b>✓</b>		~	<b>✓</b>	<b>√</b>	<b>✓</b>	<b>√</b>
Applicants who are Deaf							
Power of Attorny Max coverage: Modified 15k/FE: 20k	✓ ·	<b>✓</b>	_	<b>✓</b>	<b>✓</b>	<b>✓</b>	<b>✓</b>

- NONE OF THESE APPLY IF APPLICANT IS CURRENTLY IN HOSPITAL, NURSING HOME, INCARCERATED OR BEDRIDDEN. WE CAN NOT CURRENTLY COVER THEM!
- Alzheimer/Dementia; the applicant still needs to do their own signature however, not health questions unless they are able to and can be own owner and insured but must be a different payor.