

MARCH 2011

Field Underwriting Guide
Disability Income Insurance



GUARDIAN®

A guide to help you creatively balance the needs of the client.

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Introduction and Underwriting Philosophy

This *Field Underwriting Guide* is designed to make your job as a field underwriter as easy and rewarding as possible. We view field associates as our partners in the underwriting process. Truly you are a “field underwriter,” the one who knows the client and is best positioned to give us the information we need to make good decisions that are fair to everyone. The better the quality of information you give our underwriters, the more quickly a decision can be made and the more favorable the outcome is likely to be.

Our underwriting philosophy is to strive for accurate, fair and consistent risk assessment. We assess each applicant’s risk for disability insurance on an individual basis with the following objective:

To make the best possible offer for disability income insurance, creatively balancing the needs of the client and risk management; and where necessary to offer practical, solid solutions through a combination of rating, riders or offers of amended contracts with different benefit structures.

The rules outlined in this guide are intended to apply to most situations, but some conditions may justify more liberal or conservative treatment. Our underwriters reserve the right to require additional evidence of insurability.

The Field Underwriting Guide is meant to provide you with guidance on the Company’s practices and procedures, however, it is not intended to provide a complete description of all practices and procedures of the Underwriting Department. Because it is updated periodically, it may not always reflect the Company’s practices or procedures at any given time. Contact the Underwriting Department with any specific questions.

This version of the Field Underwriting Guide Pub4373BL should be used for the following policy series:

Income ProVider 1200
ProVider Plus 1400, 1500 and 1600
Disability Buy-Out 3200
Overhead Expense 4200
Business Reducing Term AH55-A
PayGuard NC56-A

For Disability Buy-Out policy series 3100 and Overhead Expense policy series 4100 please refer to Pub4089BL.

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Disability Products Overview

You must offer the highest quality products in order to meet the requirements of the markets in which you work. That is why we maintain a portfolio of disability products that is second to none. Our products are carefully designed to meet the needs of a well-defined segment of the total market, specifically: professionals, owners of small businesses and executives.

Following is a brief summary of the Berkshire and Guardian policies designed to meet personal and business disability insurance needs. Note that product availability, as well as provisions and features, vary from state to state. For further details refer to our Product and Information Manual (Order #6502) or contact your agency's Disability Income Specialist.

Individual Disability Income Products

ProVider Plus (Berkshire Policy Forms 1400, 1500, 1600)

Our premier individual disability policy provides an own-occupation definition of disability. Non-cancellable and guaranteed renewable to age 65 (or 67 if applicable).

- Policy Form 1400 is used for individual sales, as well as approved Association, Student and Resident and Professional Group programs. Premiums are gender-distinct.
- Policy Form 1500 is used with employer-sponsored Qualified Sick Pay Programs (QSPP). Premiums are unisex.
- Policy Form 1600 is for approved employer-sponsored voluntary income protection (VIP) cases. Premiums are unisex.

ProVider Plus

Issue Ages* and Premium** Structures	Level: 18 – 60*** Graded: 18 – 50
Classes of Risk	Preferred**, Select, Standard
Occupation Classes***	6, 5, 4, 3, 2†, 1† (non-medical markets) 6M, 5M, 4M, 3M, 2M†, 1M† (medical markets)
Elimination Periods††	30, 60, 90, 180, 360, 720 (days)
Benefit Periods***	To age 67, to age 65, 10 years, 5 years, 2 years
Riders Available (Issue ages 18-60 unless otherwise noted)	
Residual Disability Benefit (referred to as Partial Disability Benefit in CA)	Classes: 6 – 3, 6M – 3M
Graded Lifetime Indemnity for Total Disability††† (unavailable with SIS and RPP riders or with any in force or applied for retirement contribution protection)	Classes: 6 – 3, 6M – 3M Issue Ages: 18 – 45**** Benefit Periods: To age 67, to age 65
Retirement Protection Plus (RPP) Disability Benefit***** (unavailable with Graded Lifetime Indemnity for Total Disability rider or with any in force or applied for lifetime benefits)	Rider Elimination Periods: 180 or 360 days Base Policy Elimination Periods*: All available Classes: 6 – 3, 6M – 3M Base Policy Benefit Periods: To age 67, to age 65 Rider Benefit Period: To age 65
Future Increase Option	Classes: 6 – 3, 6M – 3M Issue Ages: 18 – 50
Automatic Benefit Enhancement (a no-charge rider available only at underwriter discretion with level premiums)	Classes: 6 – 3, 6M – 3M Issue Ages: 18 – 50
Catastrophic Disability Benefit**	Classes: 6 – 3, 6M – 3M
Cost of Living Adjustment (3% Compound, 6% Maximum, 4-Year Delayed)	Classes: 6 – 3, 6M – 3M
Social Insurance Substitute† (unavailable with Graded Lifetime Rider)	Classes: 6 – 1, 6M – 1M (where available)
Unemployment Waiver of Premium†††	Classes: 6 – 1, 6M – 1M (where available) Issue Ages: 18 – 55
Partial Disability Benefit (referred to as Residual Disability Benefit in CA)	Rider Benefit Period: 6 Months Classes: 2 – 1, 2M – 1M (where available)

Additional Monthly Benefit exercise only.	Available as an add-on or FIO
Mental and/or Substance-Related Disorders Limitation	There is a 24-month limitation applicable to all policies issued in California and Florida and on policies issued on a guaranteed standard issue basis through the Group Conversion program. In addition there is also a 24-month limitation applicable to all policies issued to Applicants in the following occupations (applies to all states except Vermont); anesthesiologists, anesthetists (MD or DO), nurse anesthetists, emergency room physicians, pain management physicians, and medical residents declaring these specialties.

- * Age last birthday.
- ** Substandard premiums applied on a policy-level basis (before policy fee) to the class of risk premium rates in one of the following increments: 25%, 50%, 75% or 100%.
- *** Maximum issue age for 10-year benefit period is 55.
- **** Issue ages 18-55 for successful exercises of FIO/FPO/GDR rider.
Maximum issue age for VIP is 65.
Maximum issue age for QSPP is 74.
- ♦♦ Preferred available to issue ages 18 – 60 and unavailable to occupation classes 2/2M and 1/1M or with substandard risks.
- ♦♦♦ Classes 2/2M and 1/1M are only available in Employer-Sponsored situations with a mix of occupation classes (at least 50% of participants must be classes 6/6M – 3/3M). Class 2/2M is available to business owners who have owned the business for at least five years and whose income is at least \$50,000.
- † For classes 2/2M and 1/1M, SIS is required (where available) after the first \$500 of monthly indemnity issued. The next \$1,500 will be comprised of coverage issued under the SIS rider (offset by any in force SIS or GLTD coverage). The minimum SIS amount is \$200; amounts thereafter will be issued as monthly indemnity to the stated maximum. Classes 2/2M and 1/1M may have a 2 or 5 year benefit period and the partial disability benefit rider.
- †† 720-day elimination period unavailable with 2 and 5-year benefit periods. 720-day elimination period unavailable in some states regardless of benefit period.
- ††† Unavailable for self-employed applicants, policies issued with a substandard rating and unavailable in all circumstances in CT, MN, NY and TN.
- †††† In California, this rider is only available with successful exercises of Future Increase Option, Future Purchase Option or Group Disability Replacement Option when graded lifetime is on the original policy.
 - The rider elimination period cannot be less than the base policy elimination period.
 - Unavailable in CA, CT and TX.
 - 360-day elimination period unavailable with 2-year benefit period in some states.
 - Unavailable in NJ. Rider unavailable with 720-day elimination period on the base policy.

NOTES: Maximum issue age for graded is 50.
 Not all riders available together with all premium structures.
 Not all benefit periods available with all premium structures.

For more information on the availability of combinations of product features, refer to the Product and Information Manual (Order #6502.)

ProVider Plus (continued)

Discounts[#]	
Association	A permanent 10% policy-level discount for pre-approved associations.
Multi-Policy	A first-year 5% discount when the policy is purchased within six months of a Berkshire DI, LTC or Guardian life policy.
Student and Resident	A permanent 10% policy-level discount for qualifying applicants of pre-approved groups.
Professional Groups	A permanent 10% policy-level discount for employees who work for the same employer where there is no employer-sponsored program in place.
Employer-Sponsored	A permanent 10% policy-level discount for qualifying VIPs and QSPPs.
Annual Policy Fees	
Policy Size ^{##} , \$1,000 or more	\$30
Policy Size ^{##} less than \$1,000	\$75
Successful FIO/FPO exercises where a separate policy is issued	\$15
Premium Modes and factors	Semi-annual – 0.515000 Quarterly – 0.262650 Monthly (list billed) – 0.085833 Guard-O-Matic – 0.083333 1/12th of annual premium

[#] Not all discounts available together. See DI Product and Information Manual 6502 for details and eligibility requirements.

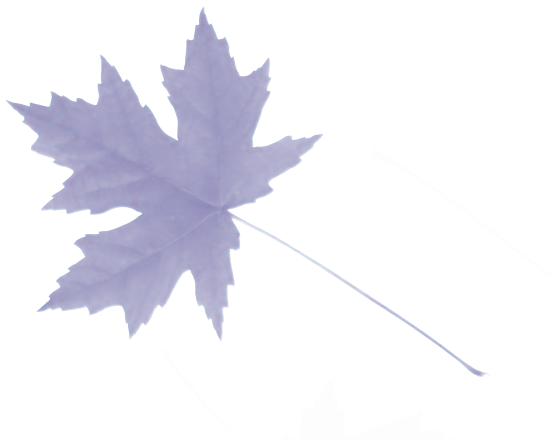
^{##} Included in policy size calculation are: base monthly indemnity, base monthly indemnity of all Additional Monthly Benefit (AMB), monthly indemnity of Automatic Benefit Enhancer (ABE) increases, Social Insurance Substitute rider and Retirement Protection Plus rider monthly indemnity.

PayGuard (Guardian Policy Form NC56-A). A lower cost reducing term policy, designed to provide personal coverage for a specified period of time. PayGuard is designed for the individual market and is not available in employer sponsored plans.*

Issue Ages	18 – 55
Occupation Classes	6, 5, 4, 3, 2**
Elimination Periods	30, 60, 90, 180, 360 days
Benefit Terms	5 – 30 years, not to exceed age 60
Riders Available	None
Premiums	Sex-distinct; age last birthday; level
Discounts	None
Annual Policy Fee	\$15
Premium Modes and Factors	Semi-annual – 0.51 Quarterly – 0.26 Monthly – 0.085
Substandard Premiums	Substandard premiums are applied on a coverage level and are a percentage of premium in one of the following increments: 25%, 50%, 75% or 100% above standard <i>smoker</i> rates.

* Refer to Product and information Manual 6502 for additional details.

** Class 2 is available only to business owners who have owned the business for at least five years and whose income is at least \$50,000.



Business Disability Products

Overhead Expense (Berkshire Policy Form 4200). A policy that provides benefits to reimburse the normal and customary fixed monthly business expenses of a business or practice of a professional or business owner while he or she is disabled.

Overhead Expense insurance is intended to provide financial protection when the absence of a business owner would result in a significant loss of revenue. If Underwriting determines that the absence of a business owner would not result in an immediate, significant loss of revenue to the business, Overhead Expense may not be available.

The basic information Underwriting would need for evaluation is:

- number of employees in the company,
- what their jobs are,
- an explanation as to why revenue would immediately, significantly suffer with the loss of the owner.

Overhead Expense coverage is non-cancellable and guaranteed renewable to age 65.

Overhead Expense

Issue Ages*	18-60
Classes of Risk	Preferred**, Select, Standard
Occupation Classes	6, 5, 4, 3 (non-medical markets) 6M, 5M, 4M, 3M (medical markets)
Elimination Periods	30, 60, 90 days
Benefit Periods	12, 18, 24 months
Riders Available	
Future Increase Option	Issue Ages 18-50
Automatic Benefit Enhancement <i>(a no-charge rider available only at underwriter discretion)</i>	Issue Ages 18-50
Supplemental Overhead Expense Benefit	Issue Ages 18-60
Additional Monthly Benefit	Issue Ages 18-55 Available as an add-on or for FIO exercises only
Annual Policy Fee	\$30
Association Discount	A permanent 10% policy-level discount for pre-approved associations
Premiums	Gender-distinct; age last birthday; level
Premium Modes and Factors	Semi-Annual - 0.515 Quarterly - 0.26256 Monthly - 0.085833 Guard-O-Matic - 0.083333

* Age last birthday

** Preferred available to issue ages 18-60 and unavailable with substandard risks

Business Reducing Term (Guardian Policy Form AH55-A).

A disability policy designed to indemnify business-related contractual/financial obligations that require fixed periodic payments lasting five years or more. Examples of such obligations are business loans/leases and purchase agreements. The policy is conditionally renewable to the specified termination date.

Renewal can be refused only for failure to pay the premium, because of lack of insurable interest or a reduction/termination of the economic need for the policy.

The policy is available in all states except Florida, Montana, North Carolina, South Carolina and Virginia.

Issue Ages	18-55
Occupation Classes	5A, 4A, 3A, 2A
Elimination Periods	1, 2, 3, 6, 12 months
Benefit Periods	5 – 30 years, not to exceed age 60
Riders Available	None
Premiums	Gender-distinct; age last birthday; level
Discounts	None
Annual Policy Fee	\$15
Premium Modes and Factors	Semi-Annual - 0.51 Quarterly - 0.26 Guard-O-Matic - 0.085

Disability Buy-Out (Berkshire Policy Form 3200). This policy provides cash to assist in the purchase of a disabled partner's or shareholder's business interest by the remaining owners. Among the conditions for policy renewal: the insured has an ownership interest in the business and is actively employed by the business.

Issue Ages*	18-60
Classes of Risk	Preferred**, Select, Standard
Occupation Classes	6, 5, 4, 3 (non-medical markets) 6M, 5M, 4M, 3M (medical markets)
Elimination Periods	360, 540, 720 days
Benefit Periods	12, 24, 36, 48, 60 months
Riders Available	
Future Increase Option	Issue Ages 18-50
Additional Benefit Rider	Issue Ages 18-55 Available as an add-on or for FIO exercises only
Annual Policy Fee	\$30
Multi-Client Discount	A permanent 10% discount when three or more lives are issued under the same buy-sell agreement
Premiums	Gender distinct, age last birthday, level
Premium Modes and Factors	Semi-Annual - 0.515 Quarterly - 0.26256 Monthly - 0.085833 Guard-O-Matic - 0.083333

* Age last birthday

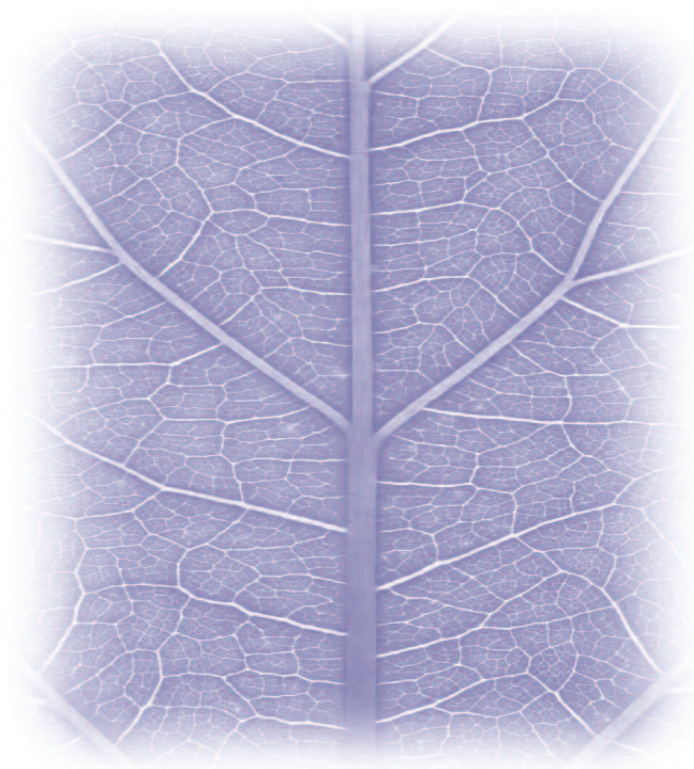
** Preferred available to issue ages 18-60 and unavailable with substandard risks



Underwriting Programs

New Professionals Program

Students, residents, and first-year professionals often lack the earnings history necessary to qualify for disability income insurance, yet have tremendous future earnings potential. Through our Special Limits for New Professionals program, you can offer your new professional clients ProVider Plus disability insurance protection without proof of income. Otherwise, normal underwriting requirements apply.



New (First-Year) Professionals; Residents; Fellows and Specialty Education Students; and Senior Students (Final Year)

Status/Profession	Monthly Indemnity Maximum	Catastrophic Benefit Maximum*	RPP Benefit Maximum**
Physicians			
<i>First-Year Physicians</i>			
General Practice Physicians (and non-specialties not listed), Geneticists, Geriatricians and Psychiatrists (MD)	6,000	6,000	1,000
Allergists/Immunologists, Anesthesiologists, Anesthetists (MD or DO only), Dermatologists, Emergency Room Physicians, Endocrinologists, Family Practice Physicians, Gynecologists, Hematologists, Immunologists, Internists, Nephrologists, Neurologists, Obstetricians, Ophthalmologists, Oral Surgeons, Pain Management Physicians, Pathologists, Pediatricians, Physiatrists (physical medicine, rehab), Plastic Surgeons, Pulmonologists, Rheumatologists and Surgeons (general and surgical specialties not listed)	6,500	6,500	1,000
Cardiologists, Gastroenterologists, Neonatologists, Neurosurgeons, Oncologists, Orthopedic Surgeons, Otolaryngologists, Radiologists and Urologists	7,500	7,500	1,000
<i>Fellows, Residents and Students</i>			
Fellows	5,000	5,000	
<i>Medical Residents</i> - Note that first-year physician limits are available to medical residents who are within 6 months prior to their graduation from a residency program. To qualify, the Application for Insurance must be received by the home office within 6 months prior to the program graduation and the graduation date must be noted on the New Business Transmittal or Application.			
Medical Resident (Year 3 +)	5,000	5,000	
Medical Resident (Year 2 or less)	4,000	4,000	
Sr. Medical Student	2,500	2,500	
Dentists			
<i>First-Year Dentists</i>			
Dentists (General)	4,000	4,000	700
Endodontists, Orthodontists, Periodontists, Prosthodontists and Pediatric Dentists	6,000	6,000	700
<i>Dental Residents and Students</i>			
Dental Specialty School (follows residency)	3,750	3,750	
<i>Dental Residents</i> - Note that first-year dentist limits are available to dental residents that are within 6 months of graduation from their residency program. To qualify, the Application for Insurance must be received by the home office within 6 months prior to the program graduation and the graduation date must be noted on the New Business Transmittal or Application.			
Dental Resident	3,500	3,500	
Sr. Dental Student	2,100	2,100	
Accountants/CPAs			
Accountant/CPA	3,000	3,000	600
Accounting Student (final year)	1,500	1,500	

Status/Profession	Monthly Indemnity Maximum	Catastrophic Benefit Maximum*	RPP Benefit Maximum**
Architects			
Architect	3,000	3,000	600
Architect Student (final year)	1,500	1,500	
Attorneys			
Attorney	3,000	3,000	600
Law School Student (final year)	3,000	3,000	
Business Professionals			
MBA Professional	2,000	2,000	
MBA Program Student (final year)	2,000	2,000	
Computer Scientists			
Computer Science	2,000	2,000	
Computer Science Student (final year)	1,000	1,000	
Engineers			
Degreed Engineer	3,000	3,000	600
Engineer Student (final year)	1,500	1,500	
Nurses and Physician Assistants			
Nurse Practitioner—Certified	1,000	1,000	
Physician Assistant (PA.) Certified	1,500	1,500	
Optometrists			
Optometrist	3,500	3,500	500
Optometry School Student (final year)	3,000	3,000	
Pharmacists			
Pharmacist	3,500	3,500	500
Pharmacy School Student (final year)	1,500	1,500	
Podiatrists			
Podiatrist	2,000	2,000	
Podiatry Resident	1,000	1,000	
Podiatry Student (final year)	1,000	1,000	
Psychologists			
PhD Psychologist	3,000	3,000	
Veterinarians			
Veterinarian	3,000	3,000	
Veterinarian Student (final year)	2,000	2,000	

Note: Overall I & P maximums apply. Group LTD coverage is not considered when determining the amount of available coverage for those applying under the Special Limits for New Professionals program. The Special Limits for New Professionals Program is not intended for a second specialty and can not be combined with other special programs, such as Enhanced Quick Issue. Applicants who provide proof of income (i.e. employment contract) will not be considered under the Special Limits for New Professionals program and normal underwriting guidelines will apply.

* Catastrophic Disability Benefit Rider not available in California, Connecticut and Texas. Catastrophic Benefit Rider is available (in approved states) in an amount equal to the monthly indemnity of the base policy.

** Unavailable with Graded Lifetime Indemnity for Total Disability Rider. Future Increase Option (FIO) rider is available on stand alone policies issued under the Retirement Protection Plus Program (RPP) in an amount equal to the monthly indemnity of the base policy.

Retirement Protection Plus Program

The Retirement Protection Plus (RPP) program provides disability insurance protection for retirement plan contributions. The ProVider Plus policy is issued **with a modified own occupation definition** under the program to help protect both employee and employer contributions. At time of total disability, benefits are paid into an irrevocable trust. The trustee invests the funds at the direction of the insured and distributes them to the insured at age 65. Coverage is available as a rider on a ProVider Plus policy or as a stand alone policy. RPP is unavailable to applicants with lifetime benefits in force or applied for with any carrier.

Note: The RPP program is not a pension or retirement plan or a substitute for such a plan.

Policy Form

1400 or 1500 as appropriate.

Issue Ages

Same as appropriate for Provider Plus base policy form.

Occupation Classes

6, 5, 4, 3, (non-medical markets)

6M, 5M, 4M, 3M (medical markets)

Classes of Risk

Same as appropriate for Provider Plus base policy form.

Elimination Periods

6 months, 12 months

Benefit Periods

To age 65

Eligible Retirement Plans

Money Purchase Plans, Profit Sharing Plans, Simplified Employee Pensions (SEPs), Employee Stock Ownership Plans (ESOPs), 401(k), 457 and 403(b) Plans, SARSEP Plans, IRAs and Roth IRAs, SIMPLE Plans, Keogh Plans.

Note: The plan must have been in effect and funded for at least one year. Non-Qualified Deferred Compensation Arrangements will be considered only on a case-by-case basis.

Riders Available

- Cost of Living Adjustment (3% compound or 6% maximum)
- Additional Monthly Benefit (available only as an add-on rider)
- Automatic Benefit Enhancement (unavailable if FIO rider is selected)
- Future Increase Option (limited to two times the basic benefit applied for, one times base under the Special Limits for Young Professionals Program.) The total of basic benefit and Future Increase Option rider may not exceed \$6,000 (unavailable with ABE rider).

Discounts

All current discounts allowable for the appropriate ProVider Plus base policy form apply to policies issued through the RPP program.

Retirement Protection Plus Program Issue Limits

Maximum issue amounts under the Retirement Protection Plus program may change from year to year as the federal annual defined contribution limits are adjusted. Listed below are the limits for 2011. All normal medical and financial underwriting requirements apply.

Minimum Policy Size: \$500

Issue Limits

Issue Age	Premium Payor	% of Contributions	Maximum Issue Limit*
18 - 49	Employee	100%	\$4,090
50 - 60	Employee	100%	\$4,550
18 - 49	Employer	133%	\$4,090
50 - 60	Employer	133%	\$4,550

* For applicants whose current in force coverage exceeds current I & P limits, the maximum benefit is reduced by the amount of over insurance less \$500.

Note: For determination of over insurance for RPP only, the maximum issue limit cap for physicians and dentists in classes 6, 5, and 4 is not applicable.

Up to 15% of annual earned income (19% when employer paid) can be applied for without actual proof of retirement contributions or proof of existence of a qualified plan. Requires a "yes" response to the application question, "Do you participate in a qualified plan?"

Future Increase Option

Limited to two times the basic benefit applied for. The total of basic benefit and Future Increase Option rider may not exceed \$6,000.

Enhanced Quick Issue Program* (unavailable in CA)

This program provides for up to \$5,000** of total coverage with no financial documentation, labs or paramed exams. Only the TeleMed interview is required. Coverage issued under this program will have no occupation class or policy feature restrictions, and no change to maximum issue and participation limits.

Maximum Monthly Benefit/Total Coverage ***	Issue Ages 18-40: \$5,000** Issue Ages 41-50: \$3,000
Medical Requirement	TeleMed Interview ***
Financial Requirements	None

* Quick Issue means expedited and streamlined underwriting and is only available when an applicant applies for a ProVider Plus policy. Quick Issue applications can not be combined with other special programs. Quick Issue does not mean guaranteed standard issue and does not modify underwriting requirements other than those specifically stated herein. State variations and restrictions apply.

** \$6,000 for Inner Circle producers and \$7,000 for Platinum Level Inner Circle producers (issue ages 18-40 only)

*** Total coverage is the sum of in force and applied-for monthly benefit (excluding Group LTD coverage), Social Insurance Substitute rider and 1/2 of Future Increase. Option rider amounts. Normal issue and participation limits apply.

**** We reserve the right to request medical records based on TeleMed interview results.



Start Up Savvy Underwriting Program

This underwriting approach, specifically for newly self-employed business owners, is designed to deliver more favorable benefit offers, while at the same time eliminating the need for hard-to-obtain financial documents such as profit and loss statements or client contracts. The following, along with the application and usual medical underwriting requirements, is the information needed to underwrite under this program:

Financial Requirement:	W-2 from prior employer
------------------------	-------------------------

Additional Required Information:

- the applicant's age and experience
 - the nature of both the current as well as prior industry/occupation
 - whether the new business is located outside the applicant's home
 - whether the applicant holds any advanced industry or professional degrees
 - whether the new business was started as a voluntary entrepreneurial leap or as a result of adverse events at the prior employer
 - the amount of time between the end of the prior employment and the start of the new business
 - the likelihood of existing clients following the applicant to the new business
 - any indication of high net worth, substantial unearned income, or bankruptcy
-

New business owners who grade out favorably under this criteria should qualify for a monthly benefit based on between 50 - 60% of prior W-2 earnings. Information not included in the application should be provided via a cover letter.

The Company reserves the right to request additional financial information based on the information provided by the applicant.

This underwriting approach does not modify underwriting requirements other than those specifically stated herein. State variations and restrictions apply. Only available with ProVider Plus policy forms 1400 and 1500.

Overhead Expense for Newly Self-Employed Doctors/Dentists

Newly self-employed doctors and dentists can financially qualify for up to \$10,000 (including in force coverage) of Overhead Expense coverage with no expense verification with the following requirement:

Financial Requirement	Completed Overhead Expense Insurance Supplement
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Business Owner Advantage (BOA) Program

Under the Business Owner Advantage Program, non-medical/non-dental business owners qualify for a monthly DI benefit up to a maximum of \$2,000 above normal issue limits.

Business owners in all states are eligible for BOA, including sole proprietors, self-employed individuals and owners of S-Corps, C-Corps, LLCs and partnerships. Those NOT eligible include owners classified as medical/dental in the occupation classification listing, those meeting the criteria of a home-based business owner and those applying under the Enhanced Quick Issue Program. Business owners applying under this program must provide tax documentation verifying at least one full year in business. Otherwise, normal underwriting requirements apply.

Home-Based Business Owners Program

This program is intended for home-based business owners in some occupations who do not have to leave their home on a regular basis or have clients come to their home to conduct business. It is available with any of the ProVider Plus policy forms.

Issue Ages

Level Premium Structure: 18 – 55

Graded Premium Structure: 18 – 50

Occupation Classes

6, 5, 4, 3 (non-medical markets)

Elimination Periods

90, 180 or 360 days

Benefit Periods

2 years, 5 years, 10 years, to age 65

Minimum Policy Size

\$1,000 (base monthly benefit minimum is \$200 – policy size is combination of base and Social Insurance Substitute)

Minimum Income

\$35,000 annually

Riders Available

Social Insurance Substitute (SIS), Cost of Living Adjustment, Future Increase Option, Catastrophic Disability Benefit

Benefit Amount

Monthly indemnity is calculated at 75% of the normal I&P limit for home based businesses.

Home Based Business Owners Program Issue Limit Guidelines

All applicants must show at least a 3 year earning pattern documented by tax returns and complete an Inspection Report. We will require the applicant to be under contract to perform in an appropriate business relationship and proof of existing contracts will be required.

75% of current issue limit on Individual pay table subject to maximums noted below:

- Classes 6, 5, 4: maximum of \$10,000 per month (excluding California and Florida)
- Class 3 and all classes in California and Florida: maximum of \$7,500 per month

Future Increase Option Rider

Limited to one time the basic benefit amount.

Catastrophic Disability Benefit

Maximum issue amount equal to one time the base plus SIS.

Student Loan Protection Program

The Student Loan Protection program covers up to 100% of the monthly payment on student loan debt in the event of total disability up to a maximum of \$2,000 per month. Coverage is only available to eligible occupations that purchase, or already own, Berkshire or Guardian individual disability insurance with a minimum monthly benefit of \$500 (\$1,500 for attorneys).

Eligible Occupations

- Physicians
- Dentists
- Medical/Dental Residents
- Attorneys
- Pharmacists
- Veterinarians

Student Loan Protection is available on Reducing Term Policy form AH55-A*. Program benefits are above regular issue and participation limits for individual disability insurance.

- Each loan obligation must be covered with a separate Reducing Term policy.

* Available in all states except Florida, Montana, North Carolina, South Carolina, Virginia.

Student Loan Protection Program (continued)

- Each policy covering a student loan must have a minimum monthly benefit of \$500.
- To apply, include a completed Reducing Term Insurance Supplement (DI-RT-2007 or DI-RT-2009) and Business Reducing Term disclosure (AA1897-2-2010) with the Application for Insurance, and provide a copy of the loan document.

Policy Form	AH55-A*
Issue Ages	18 - 55
Occupation Classes	6, 6M, 5M, 4M, and 3M
Elimination Periods	1, 2, 3, 6 or 12 months
Benefit Options	Terms from 5 to 30 years, not to exceed age 60
Renewability	Conditionally Renewable

* Available in all states except Florida, Montana, North Carolina, South Carolina, Virginia.

Definition of Total Disability	Modified Own-Occupation
Minimum Policy Size	\$500 per month
Maximum Issue Limit	\$2,000 per month
Class of Risk	Standard
Premiums	Gender Distinct Level Rates
Premium Terms	Annual, Semi-annual, Quarterly, Monthly and Guard-o-matic automatic payment
Available Discounts	None
Optionally Available Riders	None

Government Employee Program (State, municipal, county and town)

Coverage can be issued to government employees (excluding active-duty military personnel and postal employees) when the following guidelines are met:

Occ Classifications	6, 5, 4, 3, 6M, 5M, 4M, 3M
Maximum Issue Age	49
Maximum Years of Service	10
Minimum Annual Earned Income	\$50,000
Maximum Monthly Benefit	\$2,000 *
Maximum Benefit Period	to Age 65
Minimum Elimination Period	90 days
Riders Available	Residual Disability Benefit Catastrophic Disability Benefit **

* includes applied-for and in force coverage with all companies, excluding state, municipal, county and town disability benefits. Excludes coverage issued under the Retirement Provider Plus Program.

** where available

Maximum not applicable for Future Increase/Purchase exercises; however, the applicant's benefit plan books may be required (detailing all sick leave and disability benefits in force or available) along with a copy of the applicant's retirement or pension benefits program information, or proof of an option to permanently opt out of either Group LTD or government pension program.

NOTE: Future Increase Option rider is unavailable under this program

Federal Employee Program

Coverage can be issued to Federal Employees that are covered under the Federal Employee Retirement System ("FERS") with a combination of two DI policies. These policies will have different elimination periods to coincide with the end of the FERS short-term disability benefits. To accommodate the FERS coverage, we use two separate pieces of base coverage, one begins at 90 days, the second begins at 1 year. This must be illustrated in 2 separate illustrations. We will waive the policy fee on the 2nd policy for coverage issued under the FERS program.

For further information refer to the "Federal Employee Disability Worksheet" on Berkshire Life Tools.

Occ Classifications	6, 5, 4, 3, 6M, 5M, 4M, 3M
Maximum Benefit Period	to Age 67
Minimum Elimination Period	90 days policy #1 and 360 days for Policy #2
Riders Available	Residual Disability Benefit Future Increase Option Catastrophic Disability Benefit* Cost of Living Adjustment

* where available

Employer-Sponsored Programs

The concept of employer-sponsored DI is an ideal approach to those who make up our primary markets: business owners; professionals and key executives.

Employer-Sponsored Programs (ESP) come in a number of forms. All of these programs are also referred to as “salary continuation” and all are set up for the benefit of employees. ESPs include:

Qualified Sick Pay Program (QSPP)

The QSPP program offers a 10% permanent employer-sponsored discount applied on a policy level to the 1500 policy form with a minimum of 3 issued lives when coverage is 100% employer paid. The coverage will be issued on a unisex basis under the following conditions:

- The maximum issue age is 74.
- For plans with applicants over age 60, 50% of participants must be under the age 60 and in occupation classes 6/6M-3/3M.

Voluntary Insurance Programs (VIP)

The VIP program will be available when the employer makes coverage available to all employees on a voluntary basis with a minimum of three issued lives.

- The maximum issue age is 65.
- A 10% permanent discount would apply to each policy form 1600 issued under the VIP.
- If less than 3 lives the policies will not be considered VIP and will not receive a discount.
- State variations may apply to the minimum number of lives required to establish such a program.

Multi-Client Discount Programs

Student and Resident Discount Program

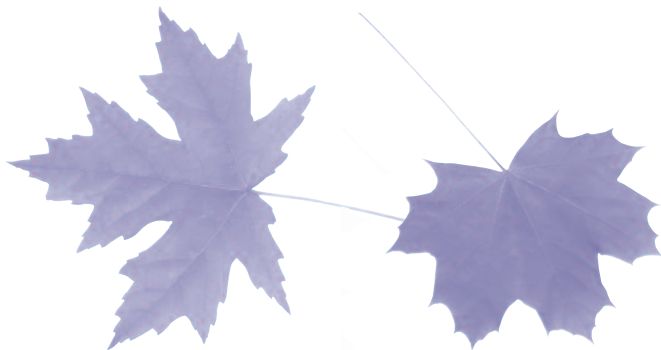
The Student and Resident Discount Program offers a 10% permanent discount on a policy level to the 1400 policy form. This coverage will be issued on a gender-distinct basis under the following conditions:

- Maximum issue age 60
- An assigned plan number must be submitted with the application

Professional Group Discount Program

The Professional Group Discount Program offers a 10% permanent discount on a policy level to the 1400 policy form with a minimum of 3 issued lives. This coverage will be issued on a gender-distinct basis under the following conditions:

- Maximum issue age 60
- An assigned plan number must be submitted with the application



Association Discount Program

The Association Discount program is designed to help producers develop additional target market relationships by gaining the sponsorship of an association. Approved associations will be able to offer our Individual Disability and Overhead Expense policies with a 10% discount.

Prior approval by Berkshire is required for a particular association program to be accepted. We consider local, county, state, or regional associations only. National and multi-state associations are ineligible, as are medical and dental associations. Maximum size should be appropriate for the producer or team of producers to personally solicit business as described in the producer's marketing plan.

Berkshire has approved one national association, the National Association of Women Business Owners (NAWBO), for all products that have this discount available.

Renewal of existing programs are subject to annual review. If you wish to discuss a potential opportunity contact Berkshire's Product Support Team at 866-590-8845.

Group Conversion Program

The Group Conversion program is designed to meet the special needs of medical residents as well as dental and veterinary students. Group LTD coverage is provided during their residency/student years, along with the opportunity to convert to an individual disability income insurance policy upon completion of their programs.

The program requires that a Guardian AbilityGuard Group LTD plan with a conversion option be installed at an approved institution. Once the LTD plan is in place, medical residents or dental or veterinary students covered under the plan will be eligible to convert their group coverage at the successful completion of their medical residency or upon graduation from the student programs. (Note: Podiatric students or residents are not eligible for conversion to ProVider Plus.)

Prior approval by Berkshire for the conversion program is required before a producer may request a quote from Guardian for the Group LTD plan. Among other criteria we require the producer to submit a sound plan for marketing the conversions to participants. If you wish to discuss a potential opportunity contact Berkshire's Product Support Team at 866-590-8845.

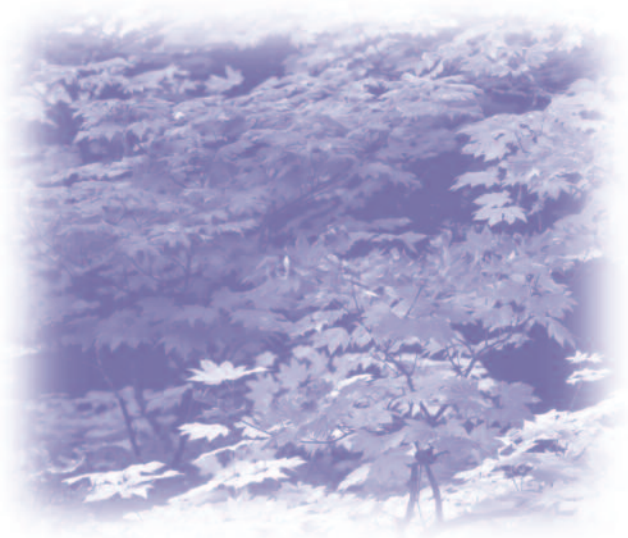
Group Conversion Program Issue Limit Guidelines

Coverage above the maximum conversion limits listed below may be available with full underwriting. (Limits assume compliance with current Issue and Participation limits.)

	ProVider Plus Maximum Conversion Amount
Medical Residents (Standard conversion amount)	4,000
Medical Residents (with prior Guardian Group Approval)	5,000
Dental Students	2,000
Veterinary Students	2,000

- An all base ProVider Plus policy, or
- A combination of base policy, Future Increase Option, and Social Insurance Substitute rider (where available.)

The Future Increase Option total increase amount must be no more than three times the base policy plus Social Insurance Substitute rider (where available), and the base policy must be at least \$200 per month.



2 Occupational Underwriting

Proper classification of occupations is of primary importance in the disability income risk selection process. It is the basis for establishing the premium to be charged for the risk.

Generally, a particular job is classified according to the occupational hazard presented by the actual duties performed. In addition to duties, several other factors influence the ultimate classification. Among these are: educational background, experience, working conditions and environment, moral hazard, stability, size of organization, income level (both personal and corporate), motivation, time spent traveling, etc. In addition, consideration is given to company-wide and industry-wide claims experience.

Determination of all classifications is the final decision of the Home Office Underwriter.

For claim purposes occupation is determined based on the policy terms and provisions.

Job Title vs. Duties

In most instances, job title alone is not sufficient to determine proper classification. It, therefore, is imperative that a full description of the applicant's duties be given on the application. If travel or supervision are involved, the percentage of time spent on these functions should be indicated as well as the amount of time spent on manual or selling duties. Conflicting information concerning duties may require additional documentation.

Part-Time and Dual Occupations

All applicants must be employed on a full-time basis year round. Thirty hours per week is the accepted minimum standard for full-time employment. If an applicant has more than one occupation, the classification will be based on the more hazardous occupation. Part-time work in an uninsurable occupation may cause us to decline issuing coverage on any basis.

Business and Residence Address the Same (Home-Based)

Insured's who use their home as their primary business location, leave the home on a regular basis to conduct business or have clients come to the home on a regular basis, continue to be eligible for disability insurance under our usual underwriting guidelines.

Home-based business owners who do not have to leave their home on a regular basis or have clients come to their residence may be eligible for individual disability insurance. Please refer to the Home-Based Business Owners Program section for additional details.

Recent Changes in Occupations

Applicants who recently changed occupations or are employed by companies less than six months old are generally not eligible for disability income coverage.

Consideration will be given on an individual basis to applicants who take over an existing business or have prior experience in the same or a closely related field and have established some long-term contracts for the new business. Residual coverage will generally not be issued because of the lack of an earnings pattern.

General Occupation Class Descriptions

The occupations listed in this chart fall into twelve classes. Below is a general description of each class, with an alphabetical listing of the most often encountered occupations and their class.

If someone from an undefined occupation applies for coverage, the underwriter will utilize the class definitions and the merits of the case to determine the appropriate occupation class.

“M” classes are for individuals that are in the health care industry. These professions include, but are not limited to, physicians, dentists, nurses, pharmacists, optometrists, etc.

We will continue to monitor the performance of the portfolio. Any future occupation changes will be made in accordance with good risk management.

Class 6 & 6M

Available to the following occupations which have the most favorable experience: actuaries, architects, attorneys, CPAs, engineers (degreed - office and administrative duties only), and business owners or corporate executives who meet the following requirements:

- is employed full time in a business which is financially sound, has been in existence for five years, and has prospects for a stable future;
- works at a business location other than his or her personal residence;
- the business has 10+ full-time employees other than the owner, with at least five employees qualifying for occupation Class 5 or Class 4;
- daily duties are: office, managerial, administrative, or technical; little or no sales or travel, no physical or manual duties; and
- \$150,000 salary and bonus for the past two years.

Class 5 & 5M

Class 5 includes those professional and executive occupations that qualify for preferential classification and underwriting limits because of stability of employment and income; the demand for their service, educational, training and experience qualifications; whose duties are primarily office-only, who would not be totally disabled if unable to travel, and who meet the following requirements:

- is employed full time in a business which is financially sound, has been in existence for five years, and has prospects for a stable future;
- the business has 5+ full-time employees and cannot be supervising anyone with manual duties;
- \$100,000 salary and bonus for the past two years.

Class 4 & 4M

Those who do not qualify for Class 5 but are engaged in office, clerical, executive, professional or semi-professional occupations requiring a high degree of stability and responsibility. Duties generally limited to office, sales and travel with no manual duties involved.

- \$75,000 salary and bonus for the past two years.

Class 3 & 3M

Includes occupations that require more physical activity than Class 4, plus certain occupations which may not be hazardous but where the claim experience has not been the same as Class 4.

Class 2 & 2M

Includes occupations where light manual duties or skilled work are involved, including small businesses where the proprietor has specialized skills. These are uninsurable except in employer-sponsored situations with a mix of other occupation classes (at least 50% of participants must be classes 6/6M-3/3M) unless the applicant is a business owner. Business owners who have owned the business for at least five years and whose income is at least \$50,000 may be issued individual coverage.

Class 1 & 1M

Includes occupations requiring heavy manual duties or where there are real accident or environmental hazards. These are uninsurable except in employer-sponsored situations with a mix of other occupation classes (at least 50% of participants must be classes 6/6M-3/3M).

Evaluating Invasive/Non-Invasive and Surgical/Non-Surgical

To determine whether an individual should be classified as an “invasive/surgical” or “non-invasive/non-surgical” physician, the underwriter will use an income criteria. Individuals who derive 50% or less of their gross income from invasive/surgical procedures will be classified as a 4M or 5M. Those who derive more than 50% of their gross income from invasive/surgical procedures will be classified as a 3M.

Invasive procedures include but are not limited to catheterization, stent placement, angioplasty, pacemaker implantation, retinal surgeries, Mohs procedures, cystoscopies, autopsies.

Determining Occupation Classifications for Residents/Fellows

Most hospitals have a four-year residency program. Residents in their third and fourth year have declared their specialties and should be classed accordingly.

Residents in their first and second year usually have not declared their specialty as they will go through various rotations for the first two years. They are, however, placed in either a “Medical” or “Surgical” residency program. Those residents in a medical residency program will be classified 4M or 5M while those in surgical residency programs will be classified 3M. A fellow who enters a training program in a medical specialty after completing residency will be classified according to their specialty. Fellows in a medical fellowship program will be classified as a 4M or 5M while those in a surgical fellowship program will be classified as a 3M.

Please question carefully so that you can properly classify the client.

Managerial Duties Endorsement

At underwriter discretion, this endorsement will be placed on policies* for risks that may have occasional manual duties that are not material to the insured’s ability to perform managerial tasks.**

Mental and/or Substance Related Disorders Limitation

A 24-month mental and/or substance related disorders limitation is included on all policies issued in the states of California and Florida, as well as to applicants in all other states in the following occupations: anesthesiologists/anesthetists (MD or DO), certified registered nurse anesthetists (CRNAs), emergency room physicians, pain management physicians, as well as medical residents declaring any of these physician specialties.** The 24 month mental nervous disorders limitation is not applicable in the State of Vermont—regardless of the applicant’s occupation.

* Excluding those issued in the states of California, New Jersey and Virginia.

** Excluding Disability Buy Out (Form 3200), PayGuard (Form NC56-A), and Business Reducing Term (Form AH55-A)

Move-Up Options

The Move Up Option is used to recognize certain occupations that, through ownership, income level, stability, experience and business environment can be considered one classification higher. The occupations eligible to move up one class are indicated in the alphabetical occupation class listing, and the criteria necessary are indicated by letters of the alphabet under the column titled, "Move Up Option."

Move-Up Option Criteria

- A. Employed full time in a business which is financially sound, has been in existence for five years, and has prospects for a stable future.
- B. Works at a business location other than his or her personal residence.
- C. The business has 10+ full-time employees other than the owner, with at least five employees qualifying for occupation Class 5 or Class 4.
- D. Daily duties are office, managerial, administrative or technical; little or no sales or travel; and no physical or manual duties.
- E. Salary and bonus of \$150,000 for the past two years.
- F. Salary and bonus of \$100,000 for the past two years.
- G. Salary and bonus of \$75,000 for the past two years.
- H. Travel required less than 25% of time.
- I. Few or no selling duties involved.
- J. Supervisor of Class 4 risks only.
- K. Organization of at least five full-time employees and is not supervising anyone with manual duties.
- L. Income in excess of \$100,000, at least five years in the insurance business, and has at least one of the following designations:
 - CFP • CLTC • CPCU • RHU
 - ChFC • CLU • MDRT
- M. Has at least three years' experience in occupation.
- N. Owner of business for at least five years.
- O. 90% or more of duties are in an office setting.
- P. Has at least five years' experience in occupation.*

* For medical specialties, experience does not include medical training in a residency program or fellowship.

All of the criteria indicated for a particular occupation must be met in order to qualify to move up. The Underwriting department reserves the right to require documentation of each criterion when deemed necessary.

For any risk whose classification cannot be determined from the following list, contact the Underwriting Department.

The Underwriting Department reserves the right to change classification based on information received at the time of underwriting.

Lifetime Limitation

Lifetime benefits from all sources are limited to \$16,000 for occupation classes 5 and 6 and to \$10,000 for occupation classes 3M and 4M and MD's, DO's, DDS's, DMD's in occupation class 5M.

Occupation Classes

Mapping Medical "M" Occupation Classifications among Products

This guide lists the occupation classifications for the ProVider Plus 1400/1500/1600 policy forms, the following table can be used to translate:

ProVider Plus Policy Forms 1400/1500/1600 Occupation Classification	OE (4200) DBO (3200)	BRT (AH55-A)	PayGuard (NC56-A)
	Occupation Classification	Occupation Classification	Occupation Classification
6M	6M	5A	5A
5M	5M	5A	5A
4M	4M	4A	4A
3M	3M	4A	4A
2M	Unavailable	2A	2A
1M	Unavailable	Unavailable	Unavailable

Refer to page 2-24 for FIO/FPO occupation class mappings from pre-1400/1500/1600 policy forms to the current 1400/1500/1600 policy forms.

Occupation Class Listing

Occupation	Class	Move Up Option
Accountants		
• Certified Public Accountant	6	
• College Degree	5	P
• Others	4	
Actuaries	6	
Adjusters	See Insurance	
Administrative Assistants (office duties only)	4	
Advertising		
• Account Executives (advertising)	5	
• Advertising Representatives	3	
• Art Directors (print media)	5	
• Artists or Graphic Artists (full-time, salaried)	4	
• Commercial Artists (full-time, salaried)	4	
• Graphic Artists/Designers (office only, salaried)	4	
• Print Space Salesman	3	
• Writers (full-time, salaried)	4	
Agents	See specific industry	
Air Conditioning		
• Engineers (office and consulting only)	5	
• Engineers (superintending and inspecting)	4	
• Installers, Repairmen, Servicemen	2	
Airport Personnel		
• Managers (office and supervisor duties)	4	
• Dispatchers (office duties only)	1	
• Operations Clerks, Passenger Agents	3	
• Reservation Clerks	3	
Antique Dealers		
• Sales Only	3	
• Purchasing, Repairing, Collecting or Delivering	2	
Appraisers	5	
Architects		
• College or Professional Degree (in office duties)	6	
• Landscape Architects	4	P

Occupation Class Listing *(continued)*

Occupation	Class	Move Up Option
Artists, Graphic Designers		
• Commercial (working full-time away from residence)	4	
• Others	Contact your Underwriter for home-based business owner consideration.	
Assayers (not in mine)	3	
Assessors	4	
Attorneys	6	
• Paralegals	4	
Auctioneers	3	
Auditors	5	
Authors	See Writers	
Automobile Industry		
• Dealers, Salesmen, Dealership Owners (new vehicles)	3	A, G, K, N
• Owners of Multiple Dealerships	4	
• Salesmen (new vehicles)	3	
• Used Vehicles Only	2	
• Garages, Filling and Service Stations and Parking Lot Proprietors, Managers (not repairing)	2	
• Repairmen, Painters, Bodymen, Mechanics	1	
• Car Wash Proprietors and Managers	2	
Bakeries		
• Managers, Proprietors	3	
• All Others	2	
Banks		
• Officers	5	
• Portfolio Managers	4	F, M
• Loan Officers	4	F, M
• Tellers, Clerks	3	
Booking Agents (full-time, office away from home)	2	
Bookkeepers	3	

Occupation	Class	Move Up Option
Brokers		
• Futures-Options	Contact your Underwriter for consideration.	
• Insurance	See Insurance	
• Merchandise		
- Office Duties Only, Not Visiting Market Or Handling Goods	3	
- Others	2	
• Real Estate		
- Commercial	3	G, M
- Residential	3	G, M
• Stocks or Bonds (office duties only)	4	
Building or Apartment House		
• Owners or Managers (supervising only)	3	
Building Industry See Construction		
Business Machines Sales and Service		
• Owners	4	A, F, K, N
• Managers, Salesmen	3	A, K, G
• Servicemen	2	
Buyers (department store)		
• Office Duties Only	4	
• Others	3	
Cabinet Makers		
	2	
Cantors		
	3	
Carpenters		
	1	
Cashiers (office and sales only)		
	3	
Caterers (no food prep or serving, office and sales only)		
	3	
Chemical Industry		
• Foremen Engaged in Process Work	3	
Civil Engineers See Engineers		
Claims Adjusters (Insurance)		
• Not Fire or Marine	4	
• Fire or Marine	3	
Clergymen		
	3	
Clerks (office)		
	3	

Occupation Class Listing (*continued*)

Occupation	Class	Move Up Option
Clothing Manufacturers		
• Proprietors, Managers, Clerks, Inspectors, Designers, Supervisors (office and supervising only)	4	
• Other Workers	2	
Collection Industry		
• Office Only	3	
Comptrollers	4	F, M
Computer Industry		
• Owners, Proprietors (no sales duties)	5	
• Systems Engineers, Design Engineers	5	
• Computer Analysts	4	A, F, K
• Consultants	4	P
• Librarians, Programmers	4	
• Salesmen (duties primarily inside home office)	4	
• Salesmen (duties outside home office)	3	G, M
• Skilled Repairmen, Servicemen, Installers	2	
Construction Industry		
• Owners, Contractors (executive duties only)	5	
• Owners, Contractors, Estimators (supervising and on-site inspection)	4	
• Construction Engineers (see engineers)		
• Owners, Contractors (working)	Classify according to duties.	
• Foremen, Supervisors (on-site)	2	
• Skilled Workers	Classify according to trade.	
Consultants	4	P
Couriers/Express Mail Service		
• Executives	4	A, F, H, I, J, K
• Supervisors	3	
• Others	1	
Curators-Art Gallery/Library/Museum		
Decorators (interior)	4	
• Consulting Duties Only (minimum income \$50K)	5	
• Window and Display	2	
Designers		
• In Office or Studio (away from home)	4	
• Industrial	4	A, F, K

Occupation	Class	Move Up Option
Dieticians		
• Not Preparing Food	3M	
• Others	2M	
Draftsmen (office away from home)	4	
Dry Cleaning		
• Clerks, Managers	3	
• Foremen	2	
• Deliverymen	1	
Editors—Magazine, Newspapers		
(office duties only)	4	A, F, H, I, J, K
Efficiency Experts or Industrial Engineers		
(office duties only)	4	
Electrical Industry		
• General		
-Electrical Engineers (degree, office and consulting only)	6	
- Engineers (consulting and designing)	5	
- Meter Readers	1	
- Installers and Repairmen	1	
- Electricians	2	
Employment Agency		
• Owners, Managers, Recruiters	4	A, F, K, N
Engineers (degree-registered professional)		
• Office and Consulting Duties Only	6	
• Computer Engineers	5	
• Construction Engineers (primarily office duties)	4	G, M
• Non-Hazardous Industry (field duties)	4	
Event Planners (no manual duties)	3	
Executives		
• To upgrade see Occ-Classes 6, 5 and Move Up Options	4	A, F, H, I, J, K
Exporters/Importers		
• Office and Sales Only (no travel)	4	
• Others	2	

Occupation Class Listing *(continued)*

Occupation	Class	Move Up Option
Express, Motor Freight, or Warehouse		
• Agents, Estimators, Owners, Managers (office and sales only)	4	
• Owners, Managers (supervisory)	3	
• Dispatchers, Expressmen, Foremen, Packers	2	
Farmers		
• Proprietors, Farmers (supervisor only)	Contact your Underwriter for consideration.	
Fire Arms		
• Inspectors, Repairers, Sales Dealers	2	
Fishing Industry		
• Hatcheries - Managers, Owners, Superintendents (supervising only)	3	
• Processing and Packing Foremen	2	
Florists		
• Merchants, Managers	4	
• Clerks	3	
• Floral Arrangers (office only)	3	
• Greenhouse-Artificial Flower Makers	1	
Funeral Directors		
• Proprietors, Directors (not embalming)	4	
Furniture Designers	4	
Glaziers	1	
Golf		
• Owners, Proprietors, Managers of Golf Courses, Country Clubs (executive duties only)	Contact your Underwriter for consideration.	
Harbor Masters	See Marine Industry	
Heating Apparatus		
• Dealers or Salesmen (no installing or servicing)	3	
• Installers, Servicemen	2	

Occupation	Class	Move Up Option
Hospitals, Nursing Homes, Long Term Care Facilities		
• Administrators, Executives	5	
• Dieticians (not cooking)	3M	
• Managers, Superintendents, Clerks	3	
• Nurses - RNs	3M	
• Nurses - LPNs	1M	
• Technicians (medical, X-ray)	3M	
Hotels, Motels, Inns (open year-round)		
• First Class		
- Owners, Managers	4	
- Clerks	3	
• Small Operation		
- Owners, Managers	3	
- Clerks	2	
- All Others	1	
Household Appliances		
• Dealers, Salesmen	3	
• Installers and Repairers	1	
Income Tax Services		
• Executives, Owners	4	F, H, I, K, N
• Supervisors	4	
Insurance		
• Adjusters (not fire or marine)	4	
• Office Managers	4	
• Surveyors, Underwriters, Clerical Help	4	
• Claims Examiners (office only)	4	
• Agents, General Agents, Brokers	4	L
• Financial Planners	4	L
• Other Adjusters	3	
Jewelry (excluding diamond merchants)		
• Retail Stores		
- Owners, Managers	4	
- Clerks	3	
- Makers, Repairers	2	
• Manufacturing-Wholesale (Owners, Managers)	3	

Occupation Class Listing *(continued)*

Occupation	Class	Move Up Option
Judges (law degree needed)	Contact your Underwriter for consideration.	
Landscape and Horticultural Services		
• Office Only	4	
• Supervisors	3	
• Landscape Architects	4	P
Lawyers	6	
Librarians	4	
Liquor Industry		
• Manufacturers		
- Office Only	4	
- Others	2	
• Distribution		
- Office and Salesmen	2	
- Retail Stores (no delivery)	2	
Literary Agents	3	
Lobbyists	4	
Locksmiths	2	
Lumber Industry		
• Logging		
- Proprietors, Managers (not in woods)	3	
• Lumber Yards		
- Office Only	3	
Machine Shops		
• Owners, Managers (office duties only)	4	
• Foremen, Machinists, Skilled Workers	2	
Manufacturing (non-hazardous product or industry)		
• Professional Engineers	5	
• Executives, Owners (office duties only)	5	
• Designers, Manufacturers, Representatives, Draftsmen	4	
• Superintendents, Managers, Foremen (supervisory duties only)	3	
• Working Foremen, Electricians, Mechanics, Pipe Fitters, Shipping and Receiving Clerks	2	
• Other Skilled Workers	See specific trade	

Occupation	Class	Move Up Option
Marine Industry		
• Harbor Masters	3	
• Harbor Pilots	2	
• Marina		
- Owners, Managers	3	
- Skilled Workers		See specific trade
Market Research		
• Executives, Owners	5	
• Others (office duties only)	4	
• Others	3	
Mechanics	1	
Medical Laboratories		
• Office Only	4	
• Others	3M	
Medical Market – MD's, DO's, DDS's, DMD's		
• Allergists/Immunologists	4M	
• Anesthesiologists	3M	
• Anesthetists (MD or DO only)	3M	
• Cardiologists (non-invasive or non-surgical)	4M	
• Cardiologists (invasive or surgical)	3M	
• Cardiovascular Surgeons	3M	
• Dentists (general)	3M	
• Dermatologists (non-invasive or non-surgical)	4M	
• Dermatologists (invasive or surgical)	3M	
• Emergency Room Physicians	3M	
• Endocrinologists (non-invasive or non-surgical)	4M	
• Endodontists	4M*	
• Family Practice Physicians	4M	
• Gastroenterologists	5M	
• General Practice Physicians	4M	
• Geneticists	4M	
• Geriatricians	4M	
• Gynecological Oncologists	3M	
• Hematologists	4M	
• Immunologists (non-invasive or non-surgical)	4M	
• Internists (non-invasive or non-surgical)	4M	
• Neonatologists (non-invasive or non-surgical)	4M	

* Class 3M will apply for any policy issued in California or Nevada and on any policy that includes the Graded Lifetime Indemnity for Total Disability in all states.

Occupation Class Listing *(continued)*

Occupation	Class	Move Up Option
Medical Market – MD’s, DO’s, DDS’s, DMD’s <i>(continued)</i>		
• Nephrologists	4M	
• Neurologists	4M	
• Neurosurgeons	3M	
• Obstetricians and/or Gynecologists	3M	
• Oncologists	3M	
• Ophthalmologists (non-invasive or non-surgical)	4M	
• Ophthalmologists (invasive or surgical)	3M	
• Oral Surgeons	4M*	
• Orthodontists	4M*	
• Orthopedic Surgeons	3M	
• Osteopaths (non-invasive or non-surgical)	4M	
• Osteopaths (invasive or surgical)	3M	
• Otolaryngologists	3M	
• Pain Management Physicians	3M	
• Pathologists (non-invasive or non-surgical)	4M	
• Pathologists (invasive or surgical)	3M	
• Pediatric Dentists	4M*	
• Pediatricians	5M	
• Periodontists	4M*	
• Physiatrists (physical medicine, rehab)	4M	
• Plastic Surgeons	3M	
• Prosthodontists	4M*	
• Psychiatrists (MD)	4M	
• Pulmonologists	4M	
• Radiologists (diagnostic, therapeutic)	4M	P
• Radiologists (interventional)	3M	
• Residents (medical)	Classed according to their specialty.	
• Rheumatologists	4M	
• Students (medical)	Classed according to their specialty.	
• Surgeons (all specialties)	3M	
• Urologists (non-invasive or non-surgical)	4M	
• Urologists (invasive or surgical)	3M	
Medical Market – Other		
• Acupuncturists (non-MDs, licensed)	3M	
• Audiologists	4M	

* Class 3M will apply for any policy issued in California or Nevada and on any policy that includes the Graded Lifetime Indemnity for Total Disability in all states.

Occupation	Class	Move Up Option
Medical Market – Other (continued)		
• Chiropractors	2M	
• Dental Assistants	1M	
• Dental Hygienists	1M	
• Dental Lab Workers, Technicians	2M	
• Embalmers	2M	
• Epidemiologists	Classed according to duties.	
• Geneticists (non-MD or non-DO)	4M	
• Lab Workers (in hospital)	3M	
• Medical Assistants	3M	
• Midwives (RN certified in hospital or clinic)	3M	
• Naturopaths	3M	
• Nurse Anesthetists (CRNAs)	3M	
• Nurses – RNs (in hospital or nursing home), Instructors, Directors	3M	
• Nurses – RNs (MD office)	3M	
• Nurses – LPNs	1M	
• Nurse Practitioners (degreed)	3M	
• Occupational Therapists	3M	
• Opticians	4M	
• Optometrists	6M	
• Paramedics (in hospital)	3M	
• Pharmacists	5M	
• Phlebotomists	3M	
• Physical Therapists (salaried)	3M	
• Physician Assistants (degreed, certified, non-surgical)	4M	
• Physician Assistants (degreed, certified, surgical)	3M	
• Physiotherapists	3M	
• Podiatrists	3M	
• Psychologists (PhD)	5M	P
• Psychologists (Masters)	4M	P
• Psychologists – Counselors (others)	3M	
• Respiratory Therapists	3M	
• Speech Therapists	3M	
• Surgical Assistants/Technicians	3M	
• Ultrasound Technicians	3M	

Physicians or Osteopaths not listed – contact your Underwriter for appropriate classification.

Occupation Class Listing (*continued*)

Occupation	Class	Move Up Option
Merchants	See Sales	
Mining (office only)	3	
Mortgage Bankers/Brokers		
• Salaried	5	
• Commission	3	A, G, K, M
Motion Picture Industry	See Radio and TV	
Moving and Storage		
• Executives	3	A, G, H, I, K, N
• Supervisory	2	
Musicians		
• Symphony Orchestra, Conductors (full-time, salaried)	3	
Newspaper Industry		
• Advertising, Business or Circulation Managers, Editors	4	
• Correspondents, Photographers, Reporters, Proofreaders	3	
Photographers (salaried)		
• Commercial (studio)	4	
• On-Site	2	
Piano Repairers or Tuners	2	
Pipefitters	1	
Plasterers	1	
Plumbers	2	
Printing And Publishing Industry		
• Compositors, Layout	4	
• Linotype Operators, Photoengraving, Lithographers, Proofreaders	3	
• Job Printers, Monotype Operators, Pressmen, Stenotypers, Type Casters	2	
• Machine Repairmen, Photoengraving Printers or Routers	2	
• Typesetters	2	
Programmers (data processing)	4	
Proofreaders	3	

Occupation	Class	Move Up Option
Prosthetic Limb Manufacturers		
• Dealers (not making or repairing)	4	
• Makers or Repairers	2M	
Publicity Agents or Managers	3	
Publishers	4	A, F, K
Purchasing Agents	4	
Radio, Television, Motion Pictures, Stage-Theater		
• Announcers, Film or Sound Editors, Radio or TV Production Managers or Program Directors (studio duties only), Radio or TV Engineers (master control)	3	
• Theater Owners or Managers (office and supervising only)	3	
• Film Developers or Colorists, Directors, Producers, Stage Managers, Projectionists, Radio or TV Reporters; Radio or TV Engineers (office, supervisor, not maintenance or transmitting), Sound Engineers	3	
• Boom Men – Cameramen (not aerial or stunt), Property Men, Scenery Shifters, Sound Effects Men	2	
Real Estate Agents	See Brokers	
Restaurants		
• First Class – Liquor Sales Secondary		
- Proprietors, Managers, Hosts or Hostesses, Maitre d's (not cooking or tending bar)	3	
- Head Chefs (primarily supervisory duties)	3	
• Establishments Catering Primarily to Liquor Sales (no food prep) Proprietors, Managers (not tending bar)	3	
• All Others	1	

Occupation Class Listing *(continued)*

Occupation	Class	Move Up Option
Sales		
• Retail (inside, not delivering)		
Merchants, Proprietors	4	
• Managers, Cashiers	3	
• Assistant Managers, Sales Clerks, Supervisors with Sales Duties	3	
• Stock Clerks (light articles)	2	
• Delivering, Stock Clerks (heavy goods)	1	
Outside Sales (no delivery)		
• Manufacturers Representatives	4	
• Other Traveling Sales	3	A, G, M
• Other Sales	3	
• Clothing and Garment Sales	3	
• Liquor Sales	2	
Sales Managers		
(salaried, executive duties, incidental travel)	4	A, F, J, K
Scientists		
• Anthropologists	5	O
• Astronomers	5	O
• Bacteriologists	5	O
• Biochemists		
- Office Duties Only	6	
- Others	3	P
• Biologists	5	P
• Botanists		
- Office Duties Only	6	
- Others	3	P
• Chemists		
- Office Duties Only	6	
- Lab Duties Only and Supervisors	5	O
- Engaged in Process Work	3	P
• Computer Scientists		
(researchers/developers who work primarily in academic settings or in R&D labs)	5	O
• Demographers	5	O

Occupation	Class	Move Up Option
Scientists <i>(continued)</i>		
• Ecologists	5	O
• Economists	5	O
• Entomologists	5	O
• Geologists		
- Office Duties Only	6	
- In the Field	3	P
• Geophysicists	5	O
• Meteorologists	5	O
• Pharmacological Scientists (researchers/developers who work primarily in academic settings or in R&D labs)	5	O
• Physicists	5	O
• Political Economists	5	O
• Political Scientists	5	O
• Sociologists	5	O
• Zoologists	5	O
Secretaries, Administrative Assistants	4	
Social Workers <i>(office only, no investigation)</i>		
• PhD (MSW-Masters of Social Work)	5M	
• Private Agency	4M	
• No Master's (MSW) degree	3M	
Statisticians	5	
Stock or Bond Brokers or Salesmen	See Brokers	
Surveyors	3	
Tailors	2	
Taxicab - Limo Service Company		
• Owners or Managers (office and supervising only)	3	
Teachers		
• Classroom Only, Including Principals	5	
• Music	4	
• Shop, Trade and Physical Education	3	

Occupation Class Listing (*continued*)

Occupation	Class	Move Up Option
Telecommunications		
• Administrators	4	
• Assistant Managers	4	
• Inside Installers, Foremen, Repairmen, Testmen, Inspectors	2	
• Dispatchers, Operators	3	
• Outside Foremen, Inspectors	2	
Textile Industry		
• Superintendents and Foremen (supervising only)	3	
• Other Skilled Workers	1	
Theater	See Radio, TV, and Motion Picture	
Translators	4	
Transportation Industry (truck, airplane and bus)		
• Executives, General Officers (office duties only)	5	
• Announcers, Station Masters (office), Station Agents (office)	4	
• Ticket Agents	3	
• Managers, Superintendents, Surveyors	3	
• Other Skilled Workers	See specific trade	
Travel Agencies		
• Office Only	4	A, F, J, K, N
• Others	3	
Undertakers	See Funeral Directors	
Upholsterers	2	
Vending Machine Industry (office only)	3	
Veterinarians		
• Small Animals	5M	
• Large Animals	3M	
Watchmakers or Repairers	2	
Writers (salaried, full-time)	4	
X-Ray Technicians	3M	P
Zoo Directors	3	

Determination of all classifications is the final decision of the home office underwriter.

FIO/FPO/GDR Exercise Occupation Class Mapping

The following mapping will be used for successful exercises of pre-merger Berkshire Future Purchase Options (policy numbers with an "H" prefix):

BLICO Classification	Policy Forms 1400, 1500, 1600, 3200 & 4200 Occupation Classification
Limited Issue Plus (LI+)	6 or 6M
Limited Issue (LI)	5 or 5M
Class 1	4 or 4M
Class 2	3 or 3M
Class 3	2 or 2M
Class 4	1 or 1M

The following mapping will be used for successful exercises of Future Increase, Future Purchase, and Group Disability Replacement Options from policy numbers with a "G" or "Z" prefix:

BLICOA/Guardian Classification	Policy Forms 1400, 1500, 1600, 3200 & 4200 Occupation Classification
Class 6	Class 6 or 6M
Class 5	Class 5 or 5M
Class 4	Class 4 or 4M
Class 4P	Class 3M
Class 3	Class 3 or 3M
Class 2	Class 2 or 2M
Class 1	Class 1 or 1M

3 Medical Underwriting

Regular Issue Medical Requirements

Please note that while TeleMed is encouraged for all cases, it is required for Enhanced Quick Issue. Please refer to our Programs Section for EQI requirements.

Individual Disability Products and Overhead Expense

Ages	Paramedical Exam	Urine HIV	Blood/ Urine*	EKG**	Inspection Report***
18-40	\$3,000 †	\$500 ↔ 3,000	\$3,000 †	N/A	\$500 †
41-50	2,500 †	500 ↔ 2,500	2,500 †	N/A	500 †
51-60	1,500 †	500 ↔ 1,500	1,500 †	\$10,000 †	500 †
Over 60	All	N/A	All	10,000 †	500 †

Business Reducing Term

Ages	Paramedical Exam	Urine HIV	Blood/ Urine	EKG	Inspection Report
18-55	\$6,000 †	\$500 ↔ 6,000	\$6,000 †	N/A	N/A

Inner Circle

Ages	Paramedical Exam	Urine HIV	Blood/ Urine*	EKG**	Inspection Report***
18-40	\$6,000 †	\$500 ↔ 3,000	\$3,000 †	N/A	\$7,500 †
41-50	5,000 †	500 ↔ 2,500	2,500 †	N/A	7,500 †
51-60	3,000 †	500 ↔ 1,500	1,500 †	\$10,000 †	7,500 †
Over 60	All	N/A	All	10,000 †	7,500 †

† Greater than the amount shown

* Except: California and Florida - \$500 †

New Jersey, New York, District of Columbia and Texas - \$2,000 †

** Required for individual disability products only.

*** Inspection Report is not required for cases submitted thru the TeleMed program (applicant issue ages 18-55).

All Home-Based Business Owner Program applications require an inspection report.

All CA applications require a fully-completed non-medical.

Please note that if an APS is not available with records covering a complete physical exam within the last twelve months, a full physician's exam may be requested.

Disability Buy-Out

Ages*	Paramedical	Blood Profile & Specimen	EKG
18-40	\$200,000 †	\$100,000 †	\$1,000,000 †
41-50	150,000 †	\$100,000 †	500,000 †
51-60	50,000 †	\$100,000 †	250,000 †

To determine underwriting requirements for the Monthly or Down Payment Funding Method, multiply the monthly benefit by the benefit period and add the lump sum amount (if applicable) to the total.

* Inspection reports are required for all amounts.

Requirements - Additional Information

FIO applied for amount cannot exceed 2x the base applied for, plus SIS and Berkshire/Guardian in force coverage (3x for Medical/Dental Residents and Fellows). The total of all in force coverage including Guardian group, plus the applied for FIO cannot exceed the published Issue and Participation Limits.

To determine medical underwriting requirements for ProVider Plus, add half the applied-for FIO amount and all of the SIS amount to the base monthly indemnity amount.

To determine medical underwriting requirements for Overhead Expense and Disability Buy-Out, add half the applied-for FIO amount to the base monthly indemnity amount.

Any amount of coverage in force with Berkshire/Guardian (issued in past five years) must be added to the above limits unless the requirement called for has been obtained in the interim. The application is valid for 90 days. Paramedical exam is valid for six months. Blood profile, specimen, special tests (ex: EKG) and inspections are valid for one year.

Approved Medical Vendors

TeleMed-Interview Only Program

You can use ExamOne or APPS for the TeleMed interview only. The agency orders all other medical requirements (e.g. APSs, Labs) from one of our approved vendors rather than having the TeleMed program order such requirements. Using the TeleMed interview only option can also be used while the producer is with the client, provided that the client conducts the interview in a secure, private location.

TeleMed-All Services Program

When submitting cases through the TeleMed-All Services program, all medical requirements will be ordered for you.

Approved Vendors

When not using the TeleMed-All Services Program, medical requirements must be ordered from the following approved vendors:

Service	Approved Vendors
Paramedical exams, blood and urine collection, EKG and X-Ray	ExamOne, APPS, Parameds.com, Superior Mobile Medics
APS retrieval service	ExamOne, GIS, EMSI
Inspection Reports	ExamOne, GIS

When blood profiles are required on cases within the non-medical limits, the paramedical facility should be advised to obtain the blood profile *only* and not to perform a full exam or obtain a medical history.

The Underwriting Department reserves the right to order special studies, including EKGs, blood profiles and stress EKGs or other tests, whenever the medical history dictates.

General Guidelines

Traditionally in the underwriting process, the agent or agency is involved in the coordination of risk evaluation items such as Attending Physician Statements, Paramedical exams, and following up on outstanding underwriting requirements. Berkshire's TeleMed program streamlines the underwriting process by coordinating these labor intensive tasks and delegating the details to a unit that specializes in completing this work for you. For more information on the TeleMed program contact your agency's Disability Income Specialist.

Preferred Premium Risk Class

Preferred, Select and Standard are the three risk classes offered on ProVider Plus, Overhead Expense and Disability Buy Out. The following pages outline the qualification and disqualification criteria for each.

Preferred Premium Risk Class Underwriting Criteria (ProVider Plus, Overhead Expense, Disability Buy Out)

General Qualification Criteria	
Issue Ages	Up to 60
Occupation Classes	6, 5, 4, 3, and 6M, 5M, 4M, 3M
General Disqualification Criteria	
Motor Vehicle Record	History of driving/operating while under the influence or reckless driving in the past five years; and, not more than two moving violations in the past three years.
Claims History	History of a claim for disability.
Medical Qualification Criteria	
Blood Pressure	Must not exceed the threshold level of 120/80 regardless of issue age.
Cholesterol	Must not exceed the threshold levels of: <ul style="list-style-type: none"> • 200 for issue ages 20 – 44, inclusive • 220 for issue ages of 45 & higher A cholesterol to HDL ratio of 4.0 or lower may be used to offset other lipid elevations and allow for consideration.
Height and Weight	See table on the following page for maximums.
All other lab requirements	Must fall within the normal range as prescribed by the lab.
Medical Disqualification Criteria	
Blood Pressure	Use of blood pressure medication.
Cholesterol	Use of cholesterol lowering medication is acceptable, but resulting cholesterol levels must be within normal parameters.
Tobacco Use	Any use of tobacco in any form in the last 12 months.
History	Any history of: <ul style="list-style-type: none"> • drug or alcohol abuse or dependency • cancer • mental or nervous disorders • diabetes • disease of the heart, kidneys, liver, or lungs. Any deaths of a parent prior to age 60 due to: <ul style="list-style-type: none"> • diabetes • cardiovascular • liver • kidney • pulmonary system
Exclusions or Extra Premiums	Any of the following scenarios requiring a restrictive rider or exclusion: <ul style="list-style-type: none"> • physical or mental condition Any insurance policies issued with a rating.

Please note: There may be a situation where prior health history restricts us from considering an applicant as a preferred risk class, yet allows the applicant to qualify for the Select or Standard risk classifications.

Preferred Premium Risk Class Build Table (ProVider Plus, Overhead Expense, Disability Buy Out)

The same build table is applicable to both males and females – there is no height adjustment for females.

Height	Maximum Weight
4' 6"	122
4' 7"	125
4' 8"	129
4' 9"	133
4' 10"	136
4' 11"	139
5' 0"	150
5' 1"	153
5' 2"	155
5' 3"	160
5' 4"	165
5' 5"	170
5' 6"	175
5' 7"	180

Height	Maximum Weight
5' 8"	185
5' 9"	190
5' 10"	195
5' 11"	200
6' 0"	205
6' 1"	210
6' 2"	215
6' 3"	220
6' 4"	225
6' 5"	230
6' 6"	235
6' 7"	240
6' 8"	245

(PP, OE, DBO) Select Premium Risk Class Underwriting Criteria (ProVider Plus, Overhead Expense, Disability Buy Out)

General Qualification Criteria	
Issue Ages	18 to age 60*
Occupation Classes	6, 5, 4, 3, 2, 1** (non-medical markets) 6M, 5M, 4M, 3M, 2M, 1M* (medical markets)
Disqualification Criteria	
Tobacco use	Any use of tobacco in any form in the last 12 months.

* Where available.

(PP, OE, DBO) Standard Premium Risk Class Underwriting Criteria (ProVider Plus, Overhead Expense, Disability Buy Out)

General Qualification Criteria	
Issue Ages	18 to age 60*
Occupation Classes	6, 5, 4, 3, 2, 1* (non-medical markets) 6M, 5M, 4M, 3M, 2M, 1M* (medical markets)

* Maximum issue age for VIP is 65 and Maximum issue age for QSPP is 74

** Where available.

Inquiry Applications

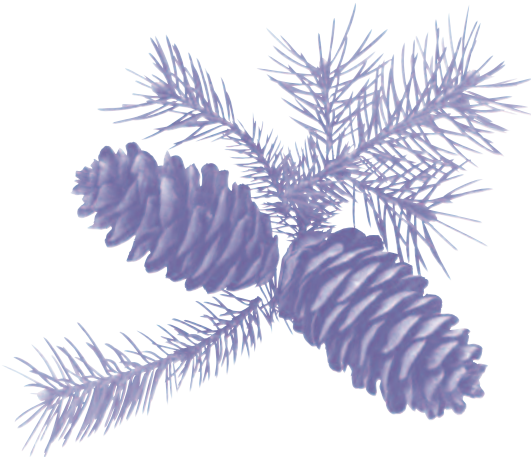
An Underwriting Inquiry form is used when an applicant has significant medical history and insurability is in question. The Underwriting Inquiry form enables the company to obtain medical records and determine on what basis (if any) an offer can be made.

The applicant must sign the form.

- The Underwriting Inquiry* should be as complete as possible. This includes listing what other companies have done including rating, exclusions or modifications, if applicable. Providing this information will greatly help the underwriter reach a decision.
- When multiple physicians are involved, the producer should always find out which doctor has the complete records concerning the impairment. It may be the primary care physician or the specialist. When the producer can tell the underwriter which doctor holds the complete set of records, the time-consuming process of contacting multiple physicians can be avoided.

*Available at Berkshire Life Tools (<http://berkshirelifetools.com>) or from your agency's Disability Income Specialist.

Note: An Inquiry Application is designed to provide you with a preliminary and non binding assessment regarding the medical history as noted on the Inquiry Application. At the time of actual underwriting, evidence of overall insurability and any interim health changes will be considered.



Exclusions and Ratings

Exclusions and premium ratings are tools that allow us to issue coverage in circumstances when an application would otherwise be declined.

Limits and benefit periods may be reduced and/or elimination periods extended, depending upon the nature and severity of any medical impairments involved. Supplemental benefit riders may not be offered.

Extra Premium (Ratings)

An extra premium is a means of providing disability insurance coverage when there is an increase in risk due to current and/or past impairment or medical history. The extra premium enables us to provide coverage for any disability resulting from such an impairment or history. An exclusion rider and an extra premium may both be necessary for some applicants.

Extra premium charges are 25%, 50%, 75%, or 100%.

Exclusion Riders

An exclusion rider is a means of providing disability insurance coverage in certain instances when an applicant might otherwise be uninsurable because of a current or past impairment or medical condition that could be the cause of future disability. The rider excludes coverage for any disability resulting from such an impairment.

Foreign Travel

Applicants planning foreign travel may require the addition of a foreign travel exclusion rider, or in some situations coverage may not be available. Consult the Underwriting Department regarding specific situations.

Residence Requirements

Applicants who are not citizens of the United States of America must intend to reside permanently in the United States. A “green card” is considered evidence of permanent residency.

Sports Hazards

Some types of sports involve hazards which exceed the hazards normally expected in recreation or a hobby and may require an exclusion rider.

It is important to include information regarding the extent of participation in these activities with the application. Questionnaires for the more common sports hazards are on the Berkshire Life Tools site.

Please note we will not accept most applicants who are professional or semi-professional athletes.

Aviation Hazards

Private pilots are usually accepted for disability insurance; however, pilots flying over 300 hours per year or student pilots with less than 150 solo hours may receive a modified contract. This contract would have either an exclusion or a rating.

Pilots who fly nonstandard aircrafts or engage in nonstandard activities, for example acrobatics, may not qualify for coverage. Contact Underwriting in these situations.

Reconsideration of Exclusions and Ratings

When the underwriter approves the policy and it is issued, the agency is notified of the status of the exclusion or rating. If the exclusion or rating is not considered permanent, a time period for reconsideration will be provided. This review, intended to determine if the original offer can be improved upon, will be subject to additional requirements to be determined at that time by the underwriter.

For extra premiums due to weight requirements, we will consider reducing or removing an extra premium after the insured has maintained a standard weight for a period of at least one year. Any consideration for the reduction or removal of an extra premium will be subject to evidence of insurability as we require.

Refer to the publication *How It Works* (Pub3519BL) for additional information.

Reconsideration of Standard Rates Due to Nicotine Use

Insureds may apply for select rates on the policy anniversary following total abstinence from all tobacco use for a period of one year. Refer to the Policyowner Services Agency Toolkit for details. Also, refer to Administrative Practices, in force ProVider Plus Replacement and ProVider Plus Policy Changes section for details of other changes that can be made to the current product after issue.

Probable Underwriting Action Guide

This guide is an alphabetical index of the medical conditions (most commonly) encountered by disability underwriters. This revised edition sets reasonable expectations for probable underwriting actions.

It is extremely important to note that this is only intended to be a guide. Final action on an individual case may vary, and it is ultimately the underwriter's evaluation of the case as a whole that leads to the final decision.

To avoid delays in policy issue, it is important for the agent to gather complete health histories from the client. These details should include dates, types and amounts of medications, procedures performed, and names and addresses of all medical professionals consulted.

To further assess a probable underwriting action, producers are encouraged to complete an Underwriting Inquiry form, along with medical records from the appropriate physician. The Underwriting Inquiry is available at Berkshire Life Tools (<http://www.berkshirelifetools.com>) or from your agency's Disability Income Specialist.

This guide reflects our current underwriting philosophies and accounts for recent changes in clinical patient care and medical treatments.

This guide should assist you in selecting those cases most likely to result in contracts acceptable to the client, the producer and to the company.

Medical Condition	Probable Underwriting Action
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ABSCESS

Definition:	Collection of pus caused by infection
Medical Requirements:	APS
Probable Action:	Standard to decline*

ADDISON'S DISEASE

Definition:	Impaired function of the adrenal cortex
Medical Requirements:	None
Probable Action:	Decline

ADENOMA (See Cancer)**ADHESIONS** (See Intestinal, Pelvic, Peritoneal)**AIDS/HIV**

Definition:	Acquired Immune Deficiency Syndrome/ Human Immuno-Deficiency Virus
Medical Requirements:	None
Probable Action:	Decline

ALCOHOL ABUSE/DEPENDENCE

Definition:	Excessive use of alcohol and/or a diagnosis of alcohol abuse or dependence
Medical Requirements:	APS
Probable Action:	1. 0-5 years abstinence, postpone 2. 5-9 years, rating

ALLERGY (See also Occupational Allergy)

Definition:	Abnormal tissue reaction to foods, pollen, physical agents
Medical Requirements:	APS
Probable Action:	1. Mild (seasonal) - standard 2. Moderate - rating/exclusion 3. Severe - or prolonged use of steroids, decline

ALZHEIMER DISEASE/DEMENTIA

Definition:	Chronic loss of cognitive and other functions
Medical Requirements:	None
Probable Action:	Decline

AMNESIA

Definition:	Loss of memory
Medical Requirements:	APS
Probable Action:	1. After 2 years, rating to decline*

Medical Condition	Probable Underwriting Action
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AMPUTATIONS

Definition:	Loss of limb(s)
Medical Requirements:	APS
Probable Action:	1. Exclude stump of the extremity that was lost 2. If poor adjustment to loss of limb or interferes with ability to work, then decline

AMYOTROPHIC LATERAL SCLEROSIS (ALS, Lou Gehrig's Disease)

Definition:	Disorder of the nervous system
Medical Requirements:	None
Probable Action:	Decline

ANAL FISSURE

Definition:	A tear in the rectal skin
Medical Requirements:	APS
Probable Action:	Standard to decline*

ANEMIA (See Blood Disorder)

ANEURYSM

Definition:	A localized dilation in the wall of an artery
Medical Requirements:	APS
Probable Action:	Depends on location and treatment Standard to decline*

ANGINA PECTORIS

Definition:	Chest pain of cardiac origin
Medical Requirements:	APS
Probable Action:	Rating to decline*

ANKYLOSIS

Definition:	Permanent deformity of the skeleton
Medical Requirements:	None
Probable Action:	Decline

ANKYLOSING SPONDYLITIS

Definition:	Arthritis of the spine
Medical Requirements:	APS
Probable Action:	(Depending on severity, degree of deformity) Exclusion to decline

ANOREXIA NERVOSA, BULIMIA, PICA

Definition:	Eating disorder
Medical Requirements:	APS
Probable Action:	Usually decline

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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ANXIETY (See Mental Disorders)	
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ARRHYTHMIA	
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Definition:	Abnormal rhythm of the heart
Medical Requirements:	APS
Probable Action:	Rating to decline*

ARTERIOSCLEROSIS/ATHEROSCLEROSIS	
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Definition:	Thickening and hardening of the arteries
Medical Requirements:	APS
Probable Action:	Rating to decline*

ARTHRITIS	
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Definition:	Inflammation of a joint or joints
Medical Requirements:	APS
Probable Action:	<ol style="list-style-type: none"> 1. If localized, exclusion 2. Depending on type, duration, severity, time since last attack, treatment, degree of deformity. Rating to decline* 3. If rheumatoid, decline 4. Psoriatic arthritis- decline

ASTHMA	
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Definition:	Shortness of breath, difficulty breathing
Medical Requirements:	APS
Probable Action:	<ol style="list-style-type: none"> 1. Mild (seasonal), standard to exclusion 2. Depending on severity, number of attacks, treatment, exclusion, rating to decline*

ATRIAL FIBRILLATION	
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Definition:	Abnormal heart rhythm
Medical Requirements:	APS
Probable Action:	<ol style="list-style-type: none"> 1. Decline if present or recurrent 2. Otherwise, rating

ATTENTION DEFICIT DISORDER (ADD or ADHD)	
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Definition:	Learning or behavior disorder
Medical Requirements:	APS
Probable Action:	(Depending upon severity.) Standard to decline*

BACK (See Spine Section)	
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Medical Condition	Probable Underwriting Action
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BARRETT'S ESOPHAGUS, ESOPHAGEAL METAPLASIA

Definition:	Potentially precancerous change in lining of esophagus
Medical Requirements:	APS with pathology report
Probable Action:	Exclusion to decline

BASAL CELL (See Cancer)

BELL'S PALSY

Definition:	Facial Paralysis
Medical Requirements:	APS
Probable Action:	1. Complete recovery - standard 2. If residuals, rating to exclusion

BICUSPID AORTICVALVE

Definition:	Hereditary malformation of the aortic valve in heart
Medical Requirements:	APS
Probable Action:	Depending upon age, complications: rating to decline*

BLADDER, URINARY IMPAIRMENTS

Definition:	1. Calculus (See Kidney Stone) 2. Cystitis - inflammation of the urinary bladder
Medical Requirements:	APS
Probable Action:	1. Acute, no recurrence, standard 2. If residuals, exclusion to decline

BLINDNESS

Definition:	Inability to perceive visual stimuli
Medical Requirements:	APS
Probable Action:	Partial - exclusion and/or rating. Total - decline

BLOOD DISORDERS

Definition:	Abnormalities of blood components
Medical Requirements:	APS
Probable Action:	Standard to decline*

BLOOD PRESSURE (See Hypertension)

BOWEL OBSTRUCTION (See Intestinal Obstruction)

BRADYCARDIA

Definition:	Abnormally slow heart rate
Medical Requirements:	APS
Probable Action:	Usually standard unless due to heart disease

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition Probable Underwriting Action

BRAIN ATTACK (See Stroke)

BREAST TUMOR (See Cancer)

BRONCHITIS

Definition: Inflammation of the bronchial tubes
 Medical Requirements: APS if chronic and fully recovered
 Probable Action: 1. Acute - standard
 2. Otherwise, depends on severity, rating to decline*

BUILD CHART - Standard Build Table for Male/Female

Height	Weight	Height	Weight
5' 0"	180	6' 0"	246
5' 1"	185	6' 1"	252
5' 2"	189	6' 2"	258
5' 3"	194	6' 3"	265
5' 4"	199	6' 4"	273
5' 5"	205	6' 5"	281
5' 6"	210	6' 6"	290
5' 7"	216		
5' 8"	222		
5' 9"	227		
5' 10"	234		
5' 11"	239		

This is a maximum weight table for standard issue. Any weights above this table will be evaluated and rated or declined. If a rating is necessary, then the waiting period, benefit period may be adjusted and riders (RSDL, COLA, etc.) may be deleted. Also overweight in conjunction with some other ailments (diabetes, BP, etc.) may warrant a declination.

BURNS

Definition: Heat, chemical or electrical burns
 Medical Requirements: Severe, APS
 Probable Action: If severe, with residuals, exclusion to decline

BURSITIS

Definition: Inflammation of a bursa
 Medical Requirements: APS
 Probable Action: 1. If chronic, exclusion
 2. Acute - standard if resolved

Medical Condition	Probable Underwriting Action
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CANCER

Definition:	Abnormal cell growth
Medical Requirements:	APS with pathology report
Probable Action:	Depending on the type, standard to decline*

CARCINOMA-IN-SITU

Definition:	Early stage of cancer
Medical Requirements:	APS with pathology report
Probable Action:	Standard to decline*

CARPAL TUNNEL SYNDROME

Definition:	Compression of the median nerve in the carpal tunnel of the wrist
Medical Requirements:	APS
Probable Action:	Exclusion

CATARACT

Definition:	Lens opacity
Medical Requirements:	APS
Probable Action:	Exclusion

CEREBRAL PALSY

Definition:	Dysfunction of the central nervous system
Medical Requirements:	APS
Probable Action:	1. Self-supporting, standard to rating 2. Otherwise, decline

CEREBRAL VASCULAR ACCIDENT:

Embolism, Hemorrhage, Thrombosis (See Stroke)

CERVICITIS

Definition:	Inflammation of the cervix
Medical Requirements:	APS
Probable Action:	Exclusion

CHOLESYSTITIS

Definition:	Inflammation of the gallbladder
Medical Requirements:	APS
Probable Action:	Standard to exclusion

CHOLELITHIASIS

Definition:	Gallstone formation in the biliary duct
Medical Requirements:	APS
Probable Action:	Exclusion

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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CHRONIC FATIGUE SYNDROME

Definition:	Fatigue, mild cognitive dysfunction, low grade fever, Lymphadenopathy
Medical Requirements:	None
Probable Action:	Decline

CIRRHOSIS OF THE LIVER

Definition:	The destruction of the liver
Medical Requirements:	None
Probable Action:	Decline

COLITIS/CROHN'S/ILEITIS

Definition:	Inflammation of the bowel
Medical Requirements:	APS.
Probable Action:	1. Current - postpone 2. Depending on type, time since recovery, number of episodes, rating to decline*

CONGENITAL HEART DEFECT

Definition:	Structural abnormalities of the heart
Medical Requirements:	APS
Probable Action:	Depending on defect, standard to decline*

CONVULSIONS (See Seizure Disorder)

CORNEAL ULCER

Definition:	Lesion on the surface of the cornea
Medical Requirements:	APS
Probable Action:	Postpone to exclusion

CORONARY ARTERY DISEASE (See Angina Pectoris)

CORONARY BYPASS/ANGIOPLASTY/STENT

Definition:	Invasive approach to Coronary Artery Disease
Medical Requirements:	None
Probable Action:	Decline

COUNSELING (Psychotherapy)

Definition:	Mental health therapy
Medical Requirements:	APS
Probable Action:	Standard to decline*

CROHN'S DISEASE (See Colitis)

Medical Condition	Probable Underwriting Action
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CUSHING'S SYNDROME

Definition:	Excessive production of hydrocortisone - like steroids
Medical Requirements:	None
Probable Action:	Decline

CYSTIC FIBROSIS

Definition:	Dysfunction of the exocrine glands
Medical Requirements:	None
Probable Action:	Decline

CYSTIC MASTITIS

Definition:	Cysts on the mammary gland(s)
Medical Requirements:	APS with biopsy report
Probable Action:	Standard to exclusion

CYSTITIS (See Bladder)

CYSTOCELE

Definition:	Weakening of the upper vaginal wall
Medical Requirements:	APS
Probable Action:	Standard to exclusion

DEAFNESS

Definition:	Hearing loss
Medical Requirements:	APS
Probable Action:	Exclusion to decline

DERMATITIS

Definition:	Inflammation of the skin
Medical Requirements:	APS
Probable Action:	Standard to decline*

DEPRESSION (See Mental Disorders)

DIABETES

Definition:	Inadequate production and/or utilization of insulin
Medical Requirements:	APS
Probable Action:	I. Depending on age, type, medications control - rating to decline*

DISLOCATIONS

Definition:	A disturbance of the normal relation of the bone and joints
Medical Requirements:	APS
Probable Action:	Standard to exclusion

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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DIVERTICULITIS, DIVERTICULOSIS

Definition:	A pouch or sac extending out from the intestines
Medical Requirements:	APS
Probable Action:	Standard to exclusion

DRUG ABUSE

Definition:	Chemical dependence
Medical Requirements:	APS
Probable Action:	1. 0-5 years abstinence, postpone 2. Over 5 years, rating to decline*

DUODENAL ULCER

Definition:	Ulceration of the Duodenum
Medical Requirements:	APS
Probable Action:	Exclusion

DUPUYTREN'S CONTRACTURE

Definition:	Deformity and loss of function of the fingers
Medical Requirements:	APS
Probable Action:	Exclusion

EATING DISORDER (See Anorexia Nervosa)

ECZEMA

Definition:	Inflammation of the skin
Medical Requirements:	APS
Probable Action:	Exclusion to decline

EMPHYSEMA

Definition:	Chronic Obstructive Pulmonary Disease
Medical Requirements:	APS
Probable Action:	Rating to decline*

ENCEPHALITIS (See Meningitis)

ENDOCARDITIS

Definition:	Inflammation of the membrane of the heart
Medical Requirements:	APS including EKGs
Probable Action:	Rating to decline*

ENDOMETRIOSIS

Definition:	Disorder of the lining of the uterus
Medical Requirements:	APS
Probable Action:	Exclusion, may also require pregnancy exclusion

EPILEPSY (See Seizure Disorder)

Medical Condition	Probable Underwriting Action
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EPSTEIN-BARR

Definition:	A viral infection associated with chronic fatigue
Medical Requirements:	APS
Probable Action:	Standard to decline*

ESOPHAGITIS/ESOPHAGEAL STRICTURE

Definition:	Inflammation/narrowing of esophagus
Medical Requirements:	APS
Probable Action:	Exclusion to decline

FACIAL PARALYSIS (See Bell's Palsy)**FATTY LIVER**

Definition:	Excess fat in liver cells
Medical Requirements:	APS
Probable Action:	Rating to decline*

FIBROMYALGIA/FIBROMYOSITIS

Definition:	Pain in muscles, tendons, ligaments and fibrous tissue
Medical Requirements:	None
Probable Action:	Decline

FISTULA IN ANO (See Colitis)**FRACTURE**

Definition:	A broken bone
Medical Requirements:	APS
Probable Action:	Standard to decline*

GASTRIC ULCER

Definition:	Ulceration of stomach
Medical Requirements:	APS
Probable Action:	1. Postpone within 6 months of surgery 2. Fully recovered, exclude 3. Decline if recurrent hemorrhaging

GASTROENTERITIS

Definition:	Inflammation of the stomach or intestines
Medical Requirements:	APS if recent or frequent
Probable Action:	1. Single episode, standard if fully recovered 2. Recurrent episodes, see Colitis

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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GILBERT DISEASE

Definition:	Abnormally elevated bilirubin levels
Medical Requirements:	APS
Probable Action:	Usually standard

GLAUCOMA

Definition:	Elevated intraocular pressure
Medical Requirements:	APS
Probable Action:	Exclusion

GOITER

Definition:	Enlargement of the thyroid gland
Medical Requirements:	APS
Probable Action:	Exclusion to rating

GOUT

Definition:	Joint pain from excess uric acid
Medical Requirements:	APS
Probable Action:	Exclusion to decline

GRAND MAL EPILEPSY (See Seizure Disorder)**GUILLIAN-BARRE SYNDROME**

Definition:	Acute form of progressive polyneuropathy
Medical Requirements:	APS
Probable Action:	1. Present, decline 2. Fully recovered, no residuals, standard

HEARING LOSS (See Deafness)**HEART ATTACK**

Definition:	Occlusion of one or more of the coronary arteries
Medical Requirements:	None
Probable Action:	Decline

HEART MURMUR

Definition:	Abnormal blood flow across a heart valve
Medical Requirements:	APS
Probable Action:	Depending upon specifics, standard to decline*

HEART VALVE REPLACEMENT

Definition:	Replacement of faulty valve
Medical Requirements:	None
Probable Action:	Decline

Medical Condition	Probable Underwriting Action
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HEMOCHROMATOSIS

Definition:	A chronic and usually hereditary disease wherein there is excess iron deposition in bodily organs
Medical Requirements:	APS
Probable Action:	1. No organ damage, periodic phlebotomy: rating 2. Other: decline

HEMOPHILIA

Definition:	Congenital clotting disorder
Medical Requirements:	None
Probable Action:	Decline

HEMORRHOIDS

Definition:	Internal or external vein swelling or bleeding of rectum
Medical Requirements:	None
Probable Action:	Standard

HEPATITIS

Definition:	Inflammation of the liver
Medical Requirements:	APS
Probable Action:	Depending on type, treatment, standard to decline* Hepatitis C - decline Chronic Hepatitis B - decline

HERNIA

Definition:	Protrusion of an organ or tissue
Medical Requirements:	APS
Probable Action:	Standard to exclusion

HERNIATED DISC (See Spinal Disc Disease)

HERPES ZOSTER (See Zoster)

HIGH BLOOD PRESSURE (See Hypertension)

HISTOPLASMOSIS

Definition:	A fungal disease usually localized in the lung
Medical Requirements:	APS
Probable Action:	1. Localized infection, after 6 months, standard 2. Systemic, rating to decline*

HODGKIN'S DISEASE/LYMPHOMA

Definition:	Cancer of the lymph tissue
Medical Requirements:	APS
Probable Action:	1. 0-10 years, decline 2. After 10 years, rating

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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HYPERTENSION

Definition:	High blood pressure
Medical Requirements:	APS - may need exam
Probable Action:	Depending on history, treatment, current readings, standard to decline*

HYPERTHYROIDISM

Definition:	An overactive thyroid gland
Medical Requirements:	APS
Probable Action:	Exclusion postpone if poorly controlled

HYPOTHYROIDISM

Definition:	An underactive thyroid gland
Medical Requirements:	APS
Probable Action:	Exclude

HYSTERECTOMY

Definition:	Surgical removal of the uterus
Medical Requirements:	APS with pathology report
Probable Action:	Standard to exclusion

ILEITIS (See Colitis)

INFERTILITY

Definition:	Inability to conceive
Medical Requirements:	APS
Probable Action:	Exclusions

INSOMNIA

Definition:	Inability to sleep
Medical Requirements:	APS
Probable Action:	Rating to decline*

INTESTINAL ADHESIONS

Definition:	Abnormal scarring in abdomen, usually after surgery
Medical Requirements:	APS
Probable Action:	Exclusion

INTESTINAL OBSTRUCTION

Definition:	Painful blockage of bowel
Medical Requirements:	APS
Probable Action:	Exclusion - to decline, depending on cause

Medical Condition	Probable Underwriting Action
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IRITIS/IRIDOCYCLITIS

Definition:	Inflammation of the iris
Medical Requirements:	APS
Probable Action:	Exclusion to decline

IRRITABLE BOWEL SYNDROME (IBS)

Definition:	Chronic bowel disorder
Medical Requirements:	APS
Probable Action:	Exclusion to decline

JAUNDICE

Definition:	Excess bile pigment in urine, blood, and skin
Medical Requirements:	APS
Probable Action:	Rating to decline*

KERATITIS

Definition:	Corneal inflammation
Medical Requirements:	APS
Probable Action:	Exclusion to decline

KERATOCONUS

Definition:	Corneal deformity
Medical Requirements:	APS
Probable Action:	Exclusion

KIDNEY STONE

Definition:	Stones in kidney
Medical Requirements:	APS
Probable Action:	Exclusion

KYPHOSIS (See Scoliosis)

LABYRINTHITIS

Definition:	Disorder of the middle ear
Medical Requirements:	APS
Probable Action:	Standard to decline*

LASER EYE SURGERY/LASIK SURGERY

Definition:	Corrective eye surgery
Medical Requirements:	APS
Probable Action:	1. 0-1 year, exclusion 2. Over 1 year, if no residuals, standard

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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LEUKEMIA

Definition:	Malignant disorder of the blood
Medical Requirements:	None
Probable Action:	Decline

LEUKOPLAKIA, ORAL CAVITY

Definition:	White patches on cheeks, mouth or tongue
Medical Requirements:	APS
Probable Action:	Present - postpone Fully recovered - standard Associated with systemic disease, decline

LIPOMA

Definition:	A fatty benign tumor
Medical Requirements:	APS
Probable Action:	Standard to exclusion

LIVER, ABSCESS

Definition:	Localized infection in the liver
Medical Requirements:	APS
Probable Action:	Over 1 year, rating to decline*

LIVER ENLARGEMENT

Definition:	Abnormal size reflecting possible disease process
Medical Requirements:	APS
Probable Action:	Rating to decline*

LORDOSIS (See Scoliosis)**LUPUS ERYTHEMATOSUS** (Disseminated)

Definition:	Connective tissue disease
Medical Requirements:	None
Probable Action:	Decline

LUPUS ERYTHEMATOSUS (Discoid)

Definition:	Connective tissue disease
Medical Requirements:	APS
Probable Action:	Over 1 year, standard to decline,* only if systemic lupus has been ruled out

Medical Condition	Probable Underwriting Action
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LYME DISEASE

Definition:	A tick-borne illness
Medical Requirements:	APS
Probable Action:	Present, or residuals, decline Full recovery, standard

MALARIA

Definition:	A parasite in the blood
Medical Requirements:	APS
Probable Action:	Decline

MALIGNANCY (See Cancer)

MARIE-STRUMPELL DISEASE

Definition:	Arthritis of spine
Medical Requirements:	APS
Probable Action:	Rating to decline*

MASTITIS

Definition:	Inflammation of breast
Medical Requirements:	APS
Probable Action:	Standard to exclusion

MEGACOLON

Definition:	An enlarged portion of the bowel
Medical Requirements:	APS
Probable Action:	Exclusion to decline

MELANOMA

Definition:	A malignant tumor arising from pigmented cells, mainly involving the skin but also occurring in the eye and on mucous membranes
Medical Requirements:	APS with pathology report
Probable Action:	Standard to decline*

MENIERE'S DISEASE (Syndrome)

Definition:	An inner ear disease
Medical Requirements:	None
Probable Action:	Decline

MENINGITIS

Definition:	Inflammation of the spinal cord or brain
Medical Requirements:	APS
Probable Action:	Standard to decline*

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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MENTAL DISORDERS

Definition:	Anxiety, depression, nervousness, psychoneurosis or neurosis
Medical Requirements:	APS
Probable Action:	Exclusion to decline

MIGRAINE

Definition:	Recurrent headaches
Medical Requirements:	APS
Probable Action:	Exclusion

MITRAL VALVE PROLAPSE

Definition:	Abnormality of mitral valve causing cardiac click or murmur
Medical Requirements:	APS
Probable Action:	Depending on severity, symptoms, rating to decline*

MONONUCLEOSIS INFECTION

Definition:	An infectious disease characterized by fever and swelling of the lymph nodes
Medical Requirements:	APS
Probable Action:	Standard to decline*

MULTIPLE SCLEROSIS

Definition:	A chronic disease affecting nerve fibers, brain and/or spinal cord
Medical Requirements:	None
Probable Action:	Decline

MUSCULAR DYSTROPHY

Definition:	Atrophy (wasting) of the muscle
Medical Requirements:	None
Probable Action:	Decline

MYASTHENIA GRAVIS

Definition:	Progressive muscle weakness
Medical Requirements:	None
Probable Action:	Decline

MYOCARDITIS

Definition:	Inflamed heart muscle
Medical Requirements:	APS including EKGs
Probable Action:	Rating to decline*

Medical Condition	Probable Underwriting Action
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MYOCARDIAL INFARCTION (damage to heart muscle decline)	
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NARCOLEPSY	
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Definition:	Recurrent attacks of drowsiness
Medical Requirements:	APS
Probable Action:	Rating to decline*

NEOPLASM	
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Definition:	Abnormal tissue formation or tumor
Medical Requirements:	APS
Probable Action:	Benign, standard to decline* Malignant, see Cancer

NEPHRITIS	
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Definition:	Inflammation of the kidney
Medical Requirements:	APS
Probable Action:	Acute, postpone, after 1 year, standard to decline*

NEUROSIS (See Mental Disorders)	
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NEURALGIA - NEURITIS	
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Definition:	Neuralgia - sharp pain along the nerve Neuritis - inflammation of a nerve
Medical Requirements:	APS
Probable Action:	Present, decline. Full recovery, exclusion to decline

NEUROMA (See Cancer)	
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NEVUS/MOLE	
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Definition:	A congenital or acquired discoloration or growth
Medical Requirements:	APS with pathology report
Probable Action:	Exclusion to decline

NODULAR GOITER (See Goiter)	
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OCCUPATIONAL ALLERGY	
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Definition:	Hypersensitivity to a substance in the workplace
Medical Requirements:	APS
Probable Action:	Depending on severity, exclusion to decline

OPTIC ATROPHY	
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Definition:	Wasting of the optic nerve
Medical Requirements:	APS
Probable Action:	Exclusion to decline

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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OPTIC NEURITIS

Definition:	Inflammation of the optic nerve
Medical Requirements:	APS
Probable Action:	Standard to decline*

OSTEOARTHRITIS

Definition:	Degenerative joint disease
Medical Requirements:	APS
Probable Action:	Exclusion to decline

OSTEOMYELITIS

Definition:	Infection of a bone
Medical Requirements:	APS
Probable Action:	Exclusion to decline

OSTEOPOROSIS

Definition:	Loss of bone mass
Medical Requirements:	APS
Probable Action:	Rating to decline*

OTITIS MEDIA

Definition:	Infection of the middle ear
Medical Requirements:	APS
Probable Action:	Standard to exclusion

OVARIAN CYSTS

Definition:	Cysts on the ovary
Medical Requirements:	APS with pathology report if removed
Probable Action:	Standard to decline*

PACEMAKER

Definition:	Device used to regulate heart
Medical Requirements:	None
Probable Action:	Decline

PALPITATIONS

Definition:	Perceived rapid and irregular heart beat
Medical Requirements:	APS with cardiac records
Probable Action:	Standard to decline*

PANCREATITIS

Definition:	Inflammation of the pancreas
Medical Requirements:	APS
Probable Action:	Rating to decline*

Medical Condition	Probable Underwriting Action
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PARALYSIS

Definition:	Loss of motor function
Medical Requirements:	APS
Probable Action:	Exclusion to decline

PARKINSON'S DISEASE

Definition:	Chronic disorder of the central nervous system
Medical Requirements:	None
Probable Action:	Decline

PAROXYSMAL TACHYCARDIA (See Arrhythmia)**PELVIC ADHESIONS** (See Intestinal Adhesions)**PELVIC INFLAMMATORY DISEASE**

Definition:	Infection of the uterus and adnexa
Medical Requirements:	APS
Probable Action:	Exclusion

PEPTIC ULCER (See Gastric Ulcer)**PERICARDITIS**

Definition:	Inflammation of the membrane covering the heart
Medical Requirements:	APS including EKGs
Probable Action:	Rating to decline*

PERIPHERAL VASCULAR DISEASE

Definition:	Disease affecting blood supply to extremities
Medical Requirements:	None
Probable Action:	Decline

PERITONEAL ADHESIONS (See Intestinal Adhesions)**PERITONITIS**

Definition:	Inflammation of the Peritoneum
Medical Requirements:	APS
Probable Action:	Exclusion

PERNICIOUS ANEMIA

Definition:	Chronic anemia
Medical Requirements:	APS with results of blood tests
Probable Action:	Rating to decline*

PETIT MAL EPILEPSY (See Seizure Disorder)

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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PHLEBITIS (See Varicose Veins)

Definition:	Inflammation of a vein
Medical Requirements:	APS
Probable Action:	Exclusion to decline

PILONIDAL CYST

Definition:	Cyst near base of spine
Medical Requirements:	APS
Probable Action:	If fully recovered, standard

PITUITARY ADENOMA (See Cancer)

PLEURISY

Definition:	Inflammation of the pleura of the lungs
Medical Requirements:	APS
Probable Action:	If fully recovered, standard

PNEUMONIA

Definition:	Infection of the lung
Medical Requirements:	APS
Probable Action:	Single attack, no residuals, standard

PNEUMOTHORAX

Definition:	Lung collapse
Medical Requirements:	APS
Probable Action:	Depending upon cause, standard to decline*

POLIOMYELITIS

Definition:	A viral infection affecting motor nerve cells
Medical Requirements:	APS
Probable Action:	Exclusion to decline

POLYCYSTIC KIDNEYS

Definition:	Congenital condition in which normal kidney tissue is replaced by cysts
Medical Requirements:	None
Probable Action:	Decline

POLYCYTHEMIA

Definition:	An overproduction of red blood cells
Medical Requirements:	APS
Probable Action:	Rating to decline*

Medical Condition	Probable Underwriting Action
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PREGNANCY

Definition:	<ol style="list-style-type: none"> 1. Normal pregnancy, no complications or history of complications, first two trimesters. 2. Currently pregnant in third trimester 3. Not currently pregnant, history of complications or history of C section 4. Currently pregnant, any stage, with complications, history of complications, pregnancy achieved through infertility treatment, or with significant co morbid condition
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Medical Requirements:	1,3 - APS 2,4 - None
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Probable Action:	<ol style="list-style-type: none"> 1. Consider with exclusion 2. Postpone 3. Consider with exclusion(s) 4. Postpone at least until post partum check and back to work full-time, then consider with exclusion(s)
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PREMATURE BEATS (See Arrhythmia)

PROCTITIS

Definition:	Inflammation of the rectum
Medical Requirements:	APS
Probable Action:	Exclusion

PROSTATE GLAND IMPAIRMENTS

Hypertrophy

Definition:	Enlargement
Medical Requirements:	APS
Probable Action:	Exclusion

Prostatitis

Definition:	Inflammation of the prostate
Medical Requirements:	APS
Probable Action:	Standard to exclusion

PSORIASIS

Definition:	Chronic skin disease
Medical Requirements:	APS
Probable Action:	Exclusion to decline.

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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PSORIATIC ARTHRITIS (See Rheumatoid Arthritis)	
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PSYCHIATRIC IMPAIRMENTS (See Mental Disorders)	
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PSYCHOSIS (Manic Depressive, Schizophrenia, etc.)	
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Definition:	Severe mental illness
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Medical Requirements:	None
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Probable Action:	Decline
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PULMONARY EMBOLISM	
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Definition:	Blood clot in lungs
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Medical Requirements:	APS
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Probable Action:	Standard to decline*
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PURPURA (See Blood Disorder)	
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PYELONEPHRITIS	
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Definition:	Inflammation of the kidneys
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Medical Requirements:	APS
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Probable Action:	Rating to decline*
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RADICULITIS	
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Definition:	Inflammation of the root of a spinal nerve
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Medical Requirements:	APS
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Probable Action:	Exclusion
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RAYNAUD'S DISEASE/PHENOMENON	
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Definition:	Constriction of blood vessels of the hands and/or feet
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Medical Requirements:	APS
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Probable Action:	Exclusion to decline
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RECTAL ABSCESS	
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Definition:	Abscess of the anorectal area
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Medical Requirements:	APS
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Probable Action:	If corrected, standard to exclusion
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RENAL CALCULUS (See Kidney Stone)	
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RETINAL DETACHMENT	
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Definition:	Separation of retina from underlying tissue
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Medical Requirements:	APS
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Probable Action:	Exclusion
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Medical Condition	Probable Underwriting Action
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RETINITIS PIGMENTOSA

Definition:	Slow progressive bilateral blindness
Medical Requirements:	None
Probable Action:	Decline

RHEUMATIC FEVER

Definition:	An infectious disease characterized by fever and painful joints, may affect the heart
Medical Requirements:	APS
Probable Action:	Rating to decline*

RHEUMATOID ARTHRITIS

Definition:	Chronic, inflammatory joint disease
Medical Requirements:	APS
Probable Action:	Exclusion to decline

RHINITIS (See Sinusitis)**RUPTURED DISC** (See Spinal Disc Disease)**SARCOIDOSIS**

Definition:	A granulatomous disease usually affecting the lungs
Medical Requirements:	APS
Probable Action:	Rating to decline*

SCIATICA

Definition:	Pain radiating from the back into the buttocks
Medical Requirements:	APS
Probable Action:	Exclusion

SCLERODERMA

Definition:	Connective tissue disease
Medical Requirements:	None
Probable Action:	Decline

SCOLIOSIS

Definition:	Curvature of the spine
Medical Requirements:	APS
Probable Action:	Standard to decline*

SEIZURE DISORDER/EPILEPSY

Definition:	Abnormal electrical brain activity
Medical Requirements:	APS
Probable Action:	Rating to decline*

SHINGLES (See Zoster)

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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SICKLE CELL ANEMIA/TRAIT

Definition:	Hereditary disease of the blood
Medical Requirements:	APS
Probable Action:	Trait only, no symptoms, standard Others, decline

SINUSITIS

Definition:	Inflammation of the sinus
Medical Requirements:	APS
Probably Action:	Standard to exclusion

SLEEP APNEA

Definition:	Abnormal cessation of breathing during sleep
Medical Requirements:	APS
Probable Action:	Rating to decline*

SLIPPED DISC (See Spinal Disc Disease)

SPASTIC COLITIS (See Colitis)

SPERMATOCELE

Definition:	Cystic swelling in the scrotum
Medical Requirements:	APS
Probable Action:	Standard to exclusion

SPINA BIFIDA (See also Spina Bifida Occulta)

Definition:	Congenital failure of closure of the bony encasement of spinal cord
Medical Requirements:	None
Probable Action:	Decline

SPINA BIFIDA OCCULTA (See Spina Bifida)

Definition:	Congenital failure of closure of the bony encasement of the spinal cord, but to a less significant degree
Medical Requirements:	APS
Probable Action:	Exclusion

SPINAL CORD DISEASE (Myelitis)

Definition:	Inflammation of the spinal cord
Medical Requirements:	None
Probable Action:	Decline

SPINAL DISC DISEASE

Definition:	Slipped, ruptured or herniated disc
Medical Requirements:	APS
Probable Action:	Exclusion

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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SPINAL FRACTURE/DISLOCATION

Definition:	Fracture of vertebrae
Medical Requirements:	APS
Probable Action:	Exclusion to decline

SPLENECTOMY

Definition:	Surgical removal of the spleen
Medical Requirements:	APS
Probable Action:	Standard to rating*

SPONDYLOLISTHESIS

Definition:	Vertebral slipping, dislocation or subluxation
Medical Requirements:	APS
Probable Action:	Exclusion to decline

SPONDYLOSIS

Definition:	Degeneration of the vertebrae
Medical Requirements:	APS
Probable Action:	Exclusion

STRAIN OR SPRAIN OF SPINE (Not Whiplash)

Definition:	Acute Musculoskeletal injury
Medical Requirements:	APS
Probable Action:	Exclusion

STROKE

Definition:	An abnormal clot or bleeding in the brain
Medical Requirements:	None
Probable Action:	Decline, possible rated offer if distant history with no residuals

SUICIDE ATTEMPT

Definition:	Attempt to take one's own life
Medical Requirements:	None
Probable Action:	Decline

SYNCOPE

Definition:	Fainting
Medical Requirements:	APS
Probable Action:	Rating to decline*

TACHYCARDIA

Definition:	Rapid heart beat
Medical Requirements:	APS
Probable Action:	Rating to decline*

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Medical Condition	Probable Underwriting Action
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TEMPOROMANDIBULAR JOINT DISORDER (TMJ)

Definition:	Chronic disorder of jaw
Medical Requirements:	APS
Probable Action:	Exclusion

THALASSEMIA MAJOR

Definition:	Severe anemia, spleen and liver enlargement, jaundice
Medical Requirements:	None
Probable Action:	Decline

THALASSEMIA MINOR

Definition:	Less serious anemia
Medical Requirements:	APS
Probable Action:	No complications, standard to rating

THYROIDITIS

Definition:	Inflammation of the thyroid
Medical Requirements:	APS
Probable Action:	Exclusion

TINNITUS

Definition:	Ringing in the ear
Medical Requirements:	APS
Probable Action:	Exclusion to decline

TUBERCULOSIS

Definition:	A communicable, infectious disease
Medical Requirements:	APS
Probable Action:	Standard to decline*

ULCER (See Duodenal and Gastric)

ULCERATIVE COLITIS

Definition:	Inflammatory bowel disease
Medical Requirements:	APS
Probable Action:	Exclusion to decline

ULCERATIVE PROCTITIS (See Proctitis)

URETHRITIS

Definition:	Inflammation of urethra
Medical Requirements:	APS & urine specimen
Probable Action:	Standard to decline*

Medical Condition	Probable Underwriting Action
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URETHRAL STRICTURE

Definition:	Narrowing of the urethra
Medical Requirements:	APS
Probable Action:	Exclusion

UTERINE FIBROIDS

Definition:	Benign growth (tumor) of the uterus
Medical Requirements:	APS
Probable Action:	Exclusion to decline

VARICOCELE

Definition:	A dilated spermatic vein
Medical Requirements:	None
Probable Action:	Standard

VARICOSE VEINS, LOWER EXTREMITIES (See Phlebitis)

Definition:	Abnormally enlarged veins
Medical Requirements:	APS
Probable Action:	Standard to exclusion

VERTIGO

Definition:	Severe dizziness
Medical Requirements:	APS
Probable Action:	Rating to decline*

WHIPLASH

Definition:	Hyperextension of the cervical spine
Medical Requirements:	APS
Probable Action:	Exclusion to decline

ZOSTER (Herpes Zoster, Shingles)

Definition:	A painful viral skin infection
Medical Requirements:	APS
Probable Action:	Exclusion

* May include: exclusion, rating, reduced benefit period, deletion of riders.

Financial Underwriting

Financial Requirements Chart

(Not applicable for ProVider Plus Start Up Savvy Underwriting Program, New Professionals Program, Overhead Expense for newly self-employed doctors/dentists and Group Conversion Program.)

Financial Requirements Summary - Individual Disability Products (including Future Purchase/Increase Option exercises)

\$ Amounts Monthly Indemnity

\$ 2,000 → \$ 7,499	One year financial returns (See following specific financial returns required)
\$ 7,500 → \$10,000	Two years' financial returns (See following specific financial returns required)
\$10,001 ↑	Two years' financial returns (See following specific financial returns required)

For eligible Quick Issue cases, financial returns are not required; however, the financial section of the application must be fully completed. For more details about the Quick Issue Program, refer to the Program Section.

Include amounts in force with all companies when determining DI tax requirements.

Application – Personal Financial Information is required to be completed for all DI applications.

Specific Financial Returns Required

Occupation/Business Status	Documentation Required
Employee	Form 1040 or W-2 or payroll stub with year-to-date earnings
Joint Returns	Form 1040 and W-2
Sole Proprietor (or Independent Contractor)	Form 1040 with all schedules
Partnership	Form 1040 with all schedules, Form 1065 with all schedules
C Corporation	Form 1040 with all schedules and W-2. For closely held or one person C Corporation, include Form 1120.
S Corporation	Form 1040 with all schedules, W-2, Form 1120S with all schedules
Limited Liability Company (LLC or LLP)	Form 1040 with all schedules, W-2, Form 1065 with all schedules

Additional financial documentation may be required whenever financial history dictates.

We understand that Physicians and Dentists compensated as 1099 employees might not be able to provide the documentation of expenses necessary to determine their net income when exercising FIO in their first year in practice. In situations where documentation of expenses has been requested and cannot be obtained, we will use a 50% expense ratio in conjunction with the documented 1099 income in order to determine available FIO benefits based on net income. This exception applies only to Physicians and Dentists compensated by 1099 income and only in situations where they are exercising their FIO on the first policy anniversary. In all other situations, documentation of actual income and expenses must be provided in line with our underwriting guidelines.

All Home-Based Business Program applicants must show at least three years of earnings pattern documented by tax returns.* The applicant will be required to be under contract to perform in an appropriate business relationship and proof of existing contracts will be required.

*Any reference to tax returns refers to Federal returns.

Overhead Expense

(including Future Purchase/Increase Option exercises)

Type of Business	Documentation Required
Sole Proprietor (or Independent Contractor)	Schedule C only
Partnership	Form 1065
C Corporation	Form 1120
S Corporation	Form 1120S
Limited Liability Company (LLC) Limited Liability Partnership (LLP)	May file as any one of the above entities. Appropriate forms required accordingly.

Disability Buy-Out

(including Future Purchase/Increase Option exercises)

Type of Business	Documentation Required
Professional/Personal Services Business	Three years of Corporate Tax Returns are required for all amounts
Commercial Business	Two years of Corporate Tax Returns are required for all amounts

Note: Personal Financial Information section must be completed on all applications.

Financial Requirements - Business Reducing Term

Documentation Required

A copy of the obligation

Individual Products - Income

In order to issue the appropriate amount of individual disability coverage it is first necessary to determine an applicant's insurable income. In order to do this the company considers the applicant's "earned income." Earned income means the compensation received for work or personal services, after business expenses, but before any other deductions, as reported for federal income tax purposes. It does not include unearned or passive income and it is not Adjusted Gross Income for federal tax purposes.

The minimum income requirement for disability insurance is \$18,000 in annual earnings.

Unearned Income

Unearned income will reduce the issue limit only to the extent that it exceeds (a) 10% of earned income or (b) \$50,000 annually, whichever is less. Fifty percent (50%) of the monthly unearned income in excess of (a) or (b) (in this paragraph) will be deducted from the available limits. If the unearned income equals or exceeds 50% of the earned income, coverage may not be available.

Unearned income is generally money received that would continue during a disability. Examples include, but are not limited to, income from dividends, capital gains, interest (including tax-exempt interest), investments, rentals, royalties, retirement plans, alimony, or from business interests as an inactive partner.

Unearned income from pension plans will reduce the issue limit on a dollar-for-dollar basis.

If unearned income is less than 10% of earned income, do not reduce the limit. If unearned income exceeds 10% of earned income, calculate the monthly average of the amount over the 10% allowance. Reduce the issue limit by 50% of this amount.

When earned income exceeds \$500,000 and unearned income is less than \$50,000, do not reduce the limit. If unearned income exceeds \$50,000, calculate the monthly average of the amount over \$50,000. Reduce the issue limit by 50% of this amount.

Bonus Income

Bonus payments can be included in insurable income if it has been earned for at least two years showing it is a regular feature of the insured's income and indications are that it will continue. This applies where there has been no change of employment or business during that two years and the employer/business are the same.

Net Worth

Any net worth exceeding \$6 million will eliminate eligibility for "to age 67," "to age 65" coverage and the Graded Lifetime Indemnity for Total Disability rider. Coverage is generally unavailable for clients whose net worth exceeds \$10 million.

Pension and Profit Sharing Plans

Except as noted below,* pension and profit sharing contributions of small business owners may be added to earned income for purposes of determining the amount of individual disability coverage available; however, the maximum additional amount is limited to 25% of earnings, up to \$100,000.

***Exceptions:**

- Sole proprietors and partnership owners: Pension contributions may not be added to earned income, as they are included in the net reportable income figure.
- Pension contributions for stockholders/employees of C corporations (including PCs) and S corporations in excess of 25% of base earnings will be considered, providing the amount of the contribution can be verified and the contributions are not covered by a waiver of premium insurance provision.

For further information refer to the Product and Information Manual (Order #6502).

Another way to help insure certain pension contributions is to obtain a separate policy under the Retirement Protection Plus (RPP) program. Under this program certain contributions may be insured at up to 100%. Thus the total amount of coverage can be greater than when contributions are included with insurable earned income.

Note, however, that if the RPP program is used, benefits from the policy are paid into a trust and generally are not available to the insured until age 65.

For details on this program see the Underwriting Program Section.

Financial Documentation

The financial section of the disability insurance application must be fully completed, even though other substantiating financial documentation is required. We reserve the right to request additional verifying data deemed necessary.

Issue and Participation for Individual Products

Once an applicant's income is determined, the next step is to use this income to determine how much coverage they are eligible for. This can be done using the Individual Disability Illustration system current version, or can be calculated manually applying the guidelines outlined in the following pages. If earnings fall between those shown on the table, interpolate between the amounts listed.

We will consider issuing a disability policy when the applicant's total disability income coverage, both in-force and applied-for in all companies (including Berkshire Life and Guardian), does not exceed the limits given in the Issue and Participation Limit tables, subject to set maximums.

For Future Increase/Purchase Options, additional rules may apply. See Issue and Participation tables for additional details.

Issue means the maximum amount of monthly indemnity which we will consider issuing, including any disability coverage already in force with Berkshire Life and Guardian.

Participation means the maximum amount of monthly indemnity applied for and in force with all companies, including Berkshire Life and Guardian.

The maximum Issue and Participation amounts include base, and if included on the policy, Future Increase/Purchase Option, Automatic Benefit Enhancement/Increase rider and Social Insurance Substitute riders, as well as any in-force coverage.

There are special limits for applicants who qualify under one of our special programs. Please refer to the Underwriting Programs section for further information regarding:

- New Professionals Program (NPP)
- Retirement Protection Plus (RPP)
- Enhanced Quick Issue Program (EQI)
- Start Up Savvy Underwriting Program (SSU)
- Business Owner Advantage Program (BOA)
- Home Based Business Program (HBB)
- Student Loan Protection Program (SLP)
- Government Employee Program (GEP)
- Federal Employee Program (FERS)

ProVider Plus Minimum Issue Limits

- \$500* (\$200 for Future Increase/Purchase Option exercises)

The following are included in calculating minimum issue limit:

- monthly indemnity of the base policy (minimum \$200) plus
- monthly indemnity of Social Insurance Substitute rider (if applicable) (minimum \$200)

The minimum policy size can be achieved with a combination of base and Social Insurance Substitute rider. For classes 2/2M and 1/1M, SIS is required (where available) after the first \$500 of monthly indemnity issued. The next \$1,500 will be comprised of coverage issued under the SIS rider (offset by an other in-force SIS or GLTD coverage). Any additional coverage thereafter will be issued as monthly indemnity to the stated maximum.

Maximum Issue Limits

ProVider Plus

The amounts on the following pages or the amount determined by using the I & P table would be used, whichever is less.

*Amount applied for must always be a multiple of \$10. The policy fee for amounts under \$1,000 is \$75.



ProVider Plus (1400, 1500 and 1600) Issue and Participation Limit Maximums

MEDICAL OCCUPATION CLASSES 6M - 1M

Occupation Class	Issue Ages (Determined by age last birthday)	Maximum Issue Limit*	Maximum Participation with Other Company's Individual Coverage**	Maximum Participation with Group LTD
6M, 5M	18 – 55	\$16,000 [#]	\$20,000	\$25,000 ^{###}
	56 – 60	\$15,000	\$15,000	\$15,000
	61+	\$10,000	\$10,000	N/A
4M, 3M	18 – 55	\$16,000 [#]	\$20,000	\$20,000
	56 – 60	\$10,000	\$15,000	\$15,000
	61+	\$10,000	\$10,000	N/A
2M, 1M[†]	18 – 60	\$7,500	\$7,500	N/A
	61+	\$6,000	\$6,000	N/A

NON-MEDICAL OCCUPATION CLASSES 6 - 1

Occupation Class	Issue Ages (Determined by age last birthday)	Maximum Issue Limit*	Maximum Participation with Other Company's Individual Coverage**	Maximum Participation with Group LTD
6, 5	18 – 55	\$20,000 ^{####}	\$20,000	\$30,000
	CA only 18-55	\$16,000	\$20,000	\$25,000
	56 – 60	\$15,000	\$15,000	\$15,000
	61+	\$10,000	\$10,000	N/A
4	18 – 55	\$16,000	\$20,000	\$25,000
	56 – 60	\$15,000	\$15,000	\$15,000
	61+	\$10,000	\$10,000	N/A
3	18 – 60	\$10,000	\$10,000	\$15,000
	61+	\$10,000	\$10,000	N/A
2, 1[†]	18 – 60	\$7,500	\$7,500	N/A
	61+	\$6,000	\$6,000	N/A

* Product provisions and features may vary from state to state.

** Refer to Underwriting Program section for special limits through programs such as New Professionals, Business Owner Advantage, Federal Employees, Government Employees, Retirement Protection Plus, Home Based Business, Student Loan Protection, etc.

NOTE: Several factors are considered in determining the amount of disability coverage available to an applicant and considered by the Company in using the Issue and Participation tables. These factors include, but are not limited to: 1) earned income; 2) unearned income; 3) employment status (business owner or employee); 4) disability insurance in force at the time of application with Berkshire, Guardian and all other insurers; 5) disability insurance or coverage provided by the employer, 6) disability insurance benefits available to the applicant within 12 months of the policy date; and 7) the tax treatment of all in-force disability insurance. Disability coverage for which an insured is eligible to obtain, but which is not in force pursuant to Berkshire and Guardian policies containing the following riders will count as in-force coverage in determining overall participation limits: Automatic Increase Rider, Automatic Benefit Enhancement Rider, Future Increase Option Rider (FIO); and Future Purchase Option Rider (FPO). The terms “earned income” and “unearned income” for purposes of this paragraph have the same meaning as they have in the insured’s application for coverage, or in the insured’s application to exercise a Future Purchase Option or Future Increase Option, respectively. All of the above factors are also considered in the underwriting of an application to exercise an FIO and FPO, as they relate to an insured at the time the insured applies for additional coverage through an FIO or FPO. These factors may be different than at the time the insured applies for additional coverage through an FIO or FPO, in comparison with the same factors as they existed at the time the insured applied for the policy to which the FIO or FPO is attached. For FIO or FPO exercises while an insured is on claim, the amount of the insured’s Participation reflected in the Issue and Participation tables will include all disability insurance in force with all insurers (including but not limited to Berkshire or Guardian), as well as disability insurance or benefits provided by any employer, regardless of whether any claim pursuant to such insurance is payable. As per the Issue and Participation Table, the amount of coverage available to an insured through the exercise of an FIO or FPO may be reduced by virtue of the insured’s disability coverage in force with Berkshire, Guardian, any other insurer or insurers, the disability coverage provided by the insured’s employer, and the tax treatment afforded all such coverage. The amount of coverage available to an insured at the time of exercising an FIO or FPO may also be impacted by virtue of changes to the Issue and Participation Tables made after the issuance of the policy from which the option is being exercised.

- * Social Insurance Substitute rider; Future Increase Option rider amounts and the Berkshire applied-for coverage amount are included in the “Maximum Issue Limit.”
- ** Social Insurance Substitute rider; Future Increase Option rider amounts and the Berkshire applied-for coverage amount; and any in-force, non-group coverage, including Association, are included in the “Maximum Participation with Other Company’s Individual Coverage.”
- # Occupations in class 3M and 4M and MD’s, DO’s, DDS’s, DMD’s in occupation class 5M are limited to \$10,000 of lifetime benefits from all sources.
- ## Medical Occupations that were upgraded to class 5M or 6M as a result of a move-up option are limited to a maximum participation with Group LTD of \$20,000
- ### Occupations in class 5 and 6 with inforce or applied for lifetime benefits are limited to \$16,000 maximum issue limit and \$25,000 maximum participation with Group LTD.
- † For classes 2, 2M 1 and 1M, SIS is required (where available) after the first \$500 of monthly indemnity issued. The next \$1,500 will be comprised of coverage issued under the SIS rider (off-set by any in-force SIS or GLTD coverage). The minimum SIS amount is \$200; amounts thereafter will be issued as monthly indemnity to the stated maximum. Classes 2, 2M, 1 and 1M are limited to a 2 or 5 year benefit period and other than the required SIS the only other optional benefit is the Partial Disability rider (known as Residual in CA).

Overview

We will consider issuing a disability policy when the applicant's total disability income coverage, both in force, applied for, and for which the applicant is eligible to receive from all companies (including Berkshire Life and Guardian), does not exceed the limits given in the Issue and Participation Limit tables. If earnings fall between those shown on the table, interpolate between table income amounts listed.

Calculating the Issue Amount

The issue amount can be calculated using the illustration system, or it can be manually calculated by using the Issue and Participation limit tables themselves. The manual calculation involves a number of different columns based the type of in-force or applied for coverages, such as Group LTD or Individual, and if the premiums for the in-force and applied for coverages are paid for by the individual/applicant or the employer.

The "Individual Pay Issue and Participation" column should be used in the following circumstances:

- When all in-force and applied-for coverages are paid for by the individual/applicant and there is no in-force or applied-for Group LTD coverage.
- When there is no in-force or applied for Group LTD coverage and the applicant's earned income is generated from any of the following business entities:
 - Sole Proprietorship
 - Partnership
 - S-Corporation
 - Limited Liability Company*
 - Limited Liability Partnership**

* A Limited Liability Company may in rare instances file as a C-Corporation and thereby qualify to use the Employer-Paid column. In such a situation contact the underwriting department for assistance.

** A Limited Liability Partnership may in rare instances file as a C-Corporation and thereby qualify to use the Employer-Paid column. In such a situation contact the underwriting department for assistance.

Participation with Other Companies' Individual Coverage

For occupation classes 4 and 6M-3M, issue ages 18-55, Berkshire will participate with other companies' individual coverage up to \$20,000 per month.

For occupation classes 6 and 5, issue ages 18-55, Berkshire will participate with other companies' individual coverage up to \$30,000 per month (CA is limited to \$20,000).

For other occupation classes and issue ages, refer to the maximum Issue and Participation Tables on pages 4-8 and 4-9.

PayGuard and Association coverage are treated as Individual coverage for subtraction from issue and participation limits.

Employer Paid Limits

Generally, if the employer pays the entire premium for disability coverage, the benefits paid under the policy are taxable.

To help compensate for the reduction in benefits due to taxes, increased limits are available in an employer-paid program.

To use the Employer Paid limits follow these ground rules:

1. These limits are intended for all non-owner employees of any business entity, and for employee/owners of C-Corporations. Sole Proprietors, partners of partnerships, and principals of S-Corporations, Limited Liability Companies, and Limited Liability Partnerships are not eligible for employer-paid limits
2. For these limits to apply, the employer must pay the premiums for all disability income coverage (existing and applied for with all companies) in such a way that the **premiums** are not taxable to employees.
3. The additional coverage available through an employer paid plan must fall within the maximum issue and participation limits for the class being insured.
4. These limits must always be used when the business has a qualified sick pay plan and is deducting the premium, or is a plan funded in accordance with IRC – Cafeteria Plan (pre-tax).
5. The application question that asks for the portion of premium paid by the employer must be completed. The employer-pay credit will not increase the maximum issue and participation limit, benefit period, or occupation class.

“Split Dollar” or “Co-pay” arrangements between employer and employee will be reviewed by underwriting on a case-by-case basis; however, usually the amount attributable to each table is proportionate to the amount that is taxable vs. non-taxable.

Participation with Group LTD

Some companies provide group disability insurance coverage for their employees. Group long-term disability plans usually provide for integration of the benefits with disability income benefits payable to the insured from other individual income sources.

For issue ages 18-60, if the applicant has in-force or applied for group coverage, and occupation classes 6/6M thru 3/3M are illustrated, the following will outline which Issue and Participation column to use in the given situation:

1. When the applied-for individual coverage is being paid by the applicant, and the group coverage is employer paid, discount the group by 25% and subtract the discounted group amount from the “Individual Paid Participation with Group LTD” column. Use the lower of this amount, or the amount calculated without factoring in the group coverage, but based on the “Individual Paid Issue and Participation” column.
2. When both the individual and group coverage are being paid by the applicant subtract the non-discounted group amount from the “Individual Paid Participation with Group LTD” column. Use the lower of this amount, or the amount calculated without factoring in the group coverage, but based on the “Individual Paid Issue and Participation” column.
3. When the owner of an S-Corp, Partnership, Sole Proprietorship, Limited Liability Company* or Limited Liability Partnership* has Group LTD coverage always subtract the non-discounted group amount from the “Individual Paid Participation with Group LTD” column. Use the lower of this amount, or the amount calculated without factoring in the group coverage, but based on the “Individual Paid Issue and Participation” column.
4. When all in-force and applied for individual and Group LTD coverages are employer paid, and therefore fully taxable, subtract 100% of the group amount from the “Employer Paid Participation with Taxable Group LTD” column. Use the lower of this amount, or the amount calculated without factoring in the group coverage, but based on the “Employer Pay Participation” column.

*A Limited Liability Company may in rare instances file as a C-Corporation and thereby qualify to use the Employer-Paid column. In such a situation contact the underwriting department for assistance.

PayGuard Minimum Policy Size:

The minimum monthly benefit is \$500.

Maximum Issue Limits:

These amounts, or the amount determined by using the I & P table would be used, whichever is less.

Classes 6, 5, 4, 6M, 5M, 4M, 3M:	\$15,000
Class 3:	\$10,000
Class 2, 2M:	\$ 7,500

*Only available to business owners who have owned the business for at least five years and whose income is at least \$50,000.

ProVider Plus Rider Issue Limits

The following riders have issue limits that do not coincide with the base monthly indemnity:

Retirement Protection Plus Disability Benefit Rider*

Minimum: \$500

Maximums: (see table below)

Issue Age	Premium Payor	% of Contributions	Maximum Issue Limit**
18 - 49	Employee	100%	\$4,090
50 - 60	Employee	100%	\$4,550
18 - 49	Employer	133%	\$4,090
50 - 60	Employer	133%	\$4,550

* Unavailable in NJ.

** For applicants whose current in-force coverage exceeds current I & P limits, the maximum benefit is reduced by the amount of over insurance less \$500.

For determination of over insurance for RPP only, the maximum issue limit cap for some physicians and dentists in classes 6/6M, 5/5M, and 4/4M is not applicable. Higher amounts may be considered on a case-by-case basis.

Up to 15% of annual earned income (19% when employer paid) can be applied for without actual proof of retirement contributions or proof of existence of a qualified plan. Requires a “yes” response to the application question, “Do you participate in a qualified plan?”

Future Increase Option

Minimum: \$200 per month

Maximum: Total in-force coverage, plus base and Future Increase Option applied for, not to exceed the issue and participation limits for that occupation classification.

Exceptions: For fully underwritten medical and dental students, residents, and fellows, three times base (including Guardian group and taking into consideration minimum base and overall maximum issue limits).

Under the Retirement Protection Plus Program, two times the base benefit applied for where the total of base benefit and Future Increase Option rider doesn't exceed \$6,000.

Under the Retirement Protection Plus Program, in conjunction with Special Limits for New Professionals, one times the base benefit (when available).

For all others, Future Increase Option applied for cannot exceed two times base plus Berkshire/Guardian in force coverage including Guardian group (taking into consideration minimum base and overall maximum issue limits).

Automatic Benefit Enhancement Rider

Issue Limit: Only available with a policy size of \$1,000 or more. The total assumed acceptance of the first 4% option plus in force coverage (*including* in force automatic increases and *excluding* AMB and SIS) and Future Increase Option(s) cannot exceed the issue and participation limits for that occupation classification.

Social Insurance Substitute Rider

(Not available for applicants with group long term disability coverage in force.)

Required for classes 2/2M-1/1M (where available), SIS must comprise monthly benefit from \$500-\$2,000.

Issue Limit: Minimum: \$200 Maximum: \$1,500

Catastrophic Disability Benefit (CAT) Rider

Issue limits are outside of normal individual disability income issue and participation limits. Coverage may be up to, but not more than 100% replacement of income from all sources, and the catastrophic benefit cannot exceed 40% of earned income.

Minimum: \$250 per month

Maximum*: \$8,000 per month for Catastrophic Coverage from all sources.

*Home Based maximum is one times (base + SIS). CAT rider amount cannot exceed total of base & SIS in New Jersey.

Refer to the Underwriting Program section for maximums available in conjunction with our special programs.

Business Products Guidelines

Overhead Expense

Our Overhead Expense policies are *reimbursement* contracts, i.e., the amount reimbursed is equal to the actual expenses incurred but not greater than the maximum monthly Overhead Expense benefit. The maximum is selected at issue, and care should be taken to ensure that it closely relates to the covered expenses that would be incurred by the insured upon disability. Where there are multiple business owners or professionals involved, only those expenses appropriately allocated to the insured should be considered.

Overhead Expense

Minimum Policy Size

\$1000 per month (\$500 for Future Purchase Option exercises)

Maximum Issue Limit

\$50,000 per month for 12-month benefit period

\$40,000 per month for 18-month benefit period

\$30,000 per month for 24-month benefit period

Amounts over this maximum may be considered subject to underwriting discretion and obtaining reinsurance approval.

Participation With Other Coverage

We will participate with other companies to a maximum issue and participation limit of \$50,000 per month for 12-month benefit period, \$40,000 per month for 18-month benefit period and \$30,000 per month for 24-month benefit period. We will also participate to \$55,000 per month with coverage issued under the Business Reducing Term product. Amounts over this maximum may be considered subject to availability and reinsurance approval.

Owners/Employees

In circumstances where there are income-generating employees, the monthly benefit amount may be adjusted.

Maximum owners in a partnership*:

Fee For Service – 10 principals Other Businesses – 4 principals

*Partnerships with excess principals may be considered subject to underwriting approval.

Covered Overhead Expenses

The normal, necessary and customary expenses incurred and paid in the continued operation of a professional practice, or in the running of a business; in the event of a joint occupancy, this term means that part of such charges incurred for which the applicant is responsible.

These charges include:

- rent
- electricity
- telephone
- heat
- water
- laundry
- salaries of employees who are not members of the applicant's profession
- real estate taxes
- interest on debt
- depreciation *or* scheduled installment payments of principal on debt. The amount of depreciation allowed will be that used for federal income tax purposes. The amount of principal will not be more than that paid under a plan of scheduled installment payments which begin before the start of disability.
- rent or lease expense of furniture, equipment or other assets used in your professional practice.
- Additionally, the Professional Replacement Endorsement considers 50% of a replacement's salary to a monthly maximum of either \$10,000 or 1/2 of the maximum monthly overhead expense benefit, whichever is less, to be a covered overhead expense. This endorsement will be attached to many, but not all, policies.

For more information on expenses that are and are not covered refer to the Product and Information Manual (Order #6502).

Business Reducing Term (AH55-A)

Coverage is available to insure up to 100% of the monthly payments (principal and interest) of an applicant's financial obligation, when 100% of the obligation rests with a single individual. Note: For employment or performance contracts, up to 100% of the net after tax cost of the contract payments can be considered.

For variable loans, the monthly benefit is determined by dividing the total monthly payment amount over the payment period by the number of payments to obtain the insurable balance.

While balloon payments themselves cannot be covered under this policy, the remaining level payment portion of the loan can be considered.

The maximum monthly benefit we will issue is dependent upon the benefit term selected according to the following schedule:

Benefit Term (In Years)	Benefit Term (In Months)	Issue Limit
5	60	\$22,500
6	72	19,500
7	84	17,100
8	96	15,300
9	108	14,100
10	120	12,900
11	132	12,000
12	144	11,400
13	156	10,800
14	168	10,200
15	180	9,600
16	192	9,300
17	204	9,000
18	216	8,700
19	228	8,400
20	240	8,100
21	252	7,860
22	264	7,740
23	276	7,500
24	288	7,380
25	300	7,260
26	312	7,140
27	324	7,020
28	336	6,900
29	348	6,780
30	360	6,660

Disability Buy-Out (3200)

Minimum Issue Amount

\$20,000

Maximum Issue Limit

We will issue up to 100% of the applicant's share of the business or practice value as determined by our published valuation methods. The maximum buy-out amount we will issue is \$2,000,000 for all funding methods and elimination periods. All occupations, including Physicians and Dentists are similarly eligible for \$2,000,000 issue limit.

Future Increase Option Rider

Issue Limits: \$10,000 - \$150,000

Ownership Guidelines

General

All eligible owners actively working full time in the business must apply for coverage. Two of three owners will be accepted if the third owner is uninsurable.

Unavailable when there are only two partners, they are more than 15 years apart in age, and the older partner is at least 51 years old.

Business

Professional/Personal Service Organizations

Between two and ten owners are acceptable for firms that have been in business for at least one year where each applicant has an ownership interest not exceeding 90% for any one person.

Commercial Businesses

Between two and five owners are acceptable for firms that have been in business for at least three years where each applicant has an ownership interest not exceeding 90%.

Family Owned

Applicants who are related as parent and child or husband and wife and are sole owners of the business are not eligible for DBO coverage.

Multiple Business Organizations

Refer to the home office.

Individual

Professional/Personal Service Organizations

The applicant must have been in the business for at least one year. Exceptions will be made for certain professional partnerships if an existing buy-sell agreement is in place.

Commercial Businesses

The applicant must have been in the business for at least one year. No exceptions will be made.

Other Considerations

Participation With Other Companies

We will allow our DBO coverage to be layered on top of an owner's existing DBO coverage from another carrier; we will also consider coverage for new partners/shareholders where the existing owners have DBO coverage in-force with another carrier provided:

- the applicant confirms that the elimination period and funding method outlined in the buy-out agreement align with the new coverage; and
- the new coverage issued has the same elimination period, funding method and benefit period as the coverage in-force.

Actively At Work

All applicants must be actively at work on a full-time basis. All owners must apply unless uninsurable or not active in the business.

Financial Valuation Requirements

Professional/Personal Service Organizations

Three years of corporate tax returns will be required to establish the annual gross receipts of the business.

Commercial Businesses

Two years of Corporate tax returns will be required to establish both the net worth of the business and the total owner compensation.

Business Valuation

The value of a business will be determined using the following methods:

- A. Professional Corporations and Personal Service Partnerships - one times the average annual gross receipts of the business over the last three years.
- B. Commercial Businesses - 100% of net worth* plus two times total owner compensation* all based on an average of these figures over the last two years.

Each owner's share of this business value is proportional to their percentage of ownership in the business, according to the Business Valuation Endorsement attached to the insured's policy.

Solicitation

- Use the current edition of our application being careful to complete the information for Disability Buy-Out insurance.
- If the Buy-Sell Agreement is to be drafted after the date of issue, we will require proof that an agreement is in effect on the first policy anniversary or we will cancel the policy from date of issue and refund all premiums.

The Buy-Sell Agreement

- Should not be submitted for underwriting review, although in all cases we reserve the right to request one.
- Must be in existence at end of the first policy year.
- Must be in existence at time of renewal.
- Must be in existence at time of disability.
- Must be provided as part of proof of loss.

Tax Treatment of Disability Insurance Products

Individual Disability Income Insurance

Disability income insurance can be purchased personally by the insured or through an employer. As a general rule, when an individual purchases coverage for his or own benefit premiums are not deductible for federal income tax purposes. This means that benefits will be received tax free.

The situation becomes a bit more complex when coverage is purchased through an employer, depending primarily on the form of the business and ownership status of the insured. For example, if a sole proprietor purchased a policy to replace his or her own income, it wouldn't matter whether the premium was paid from the personal or the business account. The premium is nondeductible, and benefits are received tax-free (a sole proprietorship is a "pass-through" entity).

A partnership or S corporation may deduct premiums for disability income coverage paid on behalf of a partner or 2% plus shareholder/employee. This is allowed under IRS Revenue Ruling 9126, provided these payments qualify as “guaranteed payments” and consideration for services rendered. However, the partner or shareholder must include such premiums as part of their taxable income. Benefits paid under the policy are therefore received free of income tax.

In a C corporation, owners (stockholders) who work in the business are considered to be employees. Therefore, the corporation can deduct premiums paid under a Qualified Sick Pay Plan for coverage on owner-employees (see below) – but benefits are taxable.*

Qualified Sick Pay Plans

An employer can pay for disability income coverage for employees and deduct premiums as a business expense. In order to do so a formal qualified sick pay plan must be adopted by the firm and communicated to covered employees. Premiums are not regarded as taxable income to the employees; however, benefits received under the plan are taxable. In addition, these benefits are also subject to Social Security tax for the first six months after the employee stops working.

Executive Bonus Plans

Another type of employer-provided plan is the executive bonus, or “Section 162” plan (named after the IRS regulation governing such plans). This is an arrangement in which the employer gives an employee a salary bonus equal to the premium on a disability insurance policy. In practice, the employer pays the premium directly to the insurance company. The amount of the premium is treated as a “bonus” and included in the employee’s taxable income. The employer therefore can deduct the amount paid for the policy premium. Policy benefits are received tax-free, since technically the employer has purchased the policy with his or her bonus.

Cafeteria (Section 125) Plans

In these plans the employer provides funds for employees to elect and pay for coverage on a pre-tax basis. Policy benefits are taxable to the employees.

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Voluntary Plans

An employer may establish a purely voluntary plan, one in which participants are eligible to purchase disability income insurance for themselves. This is often achieved through payroll deduction. Since employees are paying for their coverage, premiums are nondeductible and benefits are received tax free.

Retirement Protection Plus Program

The rules discussed above for individual disability income insurance also apply to policies issued under the Retirement Protection Plus program.

Business Disability Products

Overhead Expense

Premiums for overhead expense policies are deductible by the business. This rule applies to unincorporated businesses and professional practices as well as corporations. Benefits received under the policy are, therefore, taxable as income to the business. However, the benefits received are used to pay business expenses, which *are* tax-deductible.

Disability Buy-Out

Premiums paid for disability buy-out policies are *never* deductible, regardless of who pays the premiums, i.e., the business itself or the owners. Benefits are paid to reimburse amounts paid by the business or other owners to purchase disabled owner's business interest, and are received tax-free. The disabled owner however, is subject to tax on any capital gain resulting from the sale of his or her ownership share.

Key Person Indemnification

If a business is designated to receive the benefits of a disability income policy insuring a "key person," the premium is not deductible. The benefits are received tax-free; this is the case for unincorporated businesses as well as corporations.

Business Reducing Term

The premiums on Business Reducing Term are not tax-deductible as a necessary business expense. Benefits are paid to a designated loss payee, so they are not taxable to the business.

Disability Insurance Tax Guide *

Personal Disability Income Insurance

Premiums Paid By	Benefits Paid to	Policy-owner	Tax Treatment	
			Premiums	Benefits
Individual (including a sole proprietor)	Individual	Individual	Nondeductible (IRC Sec. 213)	<i>Tax-Free</i> (IRC Sec. 104)
Employer (key person coverage)	Employer	Employer	Nondeductible (IRC Sec. 265 and Rev Ruling 66-262)	
Employer (under a QSPP)	Employee (including C corp. owners)	Employee	Deductible by employer (IRC Sec. 162). Employer-paid premium excluded from employee's taxable income (IRC Sec. 106)	Reported as Income (IRC Sec. 105)
Partnership, S corporation	Partner, S corp. owner	Partner, S corp. owner	Deductible by partnership or S corp. Included in partner's or S corp. owner's personal taxable income (Rev. Ruling 91-26)	<i>Tax-Free</i> (Rev. Ruling 91-26)
Employee (under an Executive Bonus Plan)	Employee	Employee	Bonus paid to cover premium by employer is deductible. Bonus is included in employee's taxable income (IRC Sec. 162)	<i>Tax-Free</i> (IRC Sec. 104)

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Overhead Expense

Premiums Paid By	Benefits Paid to	Policy-owner	Tax Treatment	
			Premiums	Benefits
Business or Owner	Business or Owner	Business or Owner	Tax Deductible (Rev. Ruling 55-264)	Reportable as Income* (Rev. Ruling 55-264)

*Although the benefits are taxable as income, the actual business expenses are deductible.

Business Reducing Term

Premiums Paid By	Benefits Paid to	Policy-owner	Tax Treatment	
			Premiums	Benefits
Business or Owner	Loss Payee	Business or Owner	Nondeductible (IRC Sec. 265)	Tax-Free (IRC Sec. 104)

Disability Buy-Out

Premiums Paid By	Benefits Paid to	Policy-owner	Tax Treatment	
			Premiums	Benefits
Partnership or Corporation (under Entity Purchase Agreement)	Partnership or Corporation	Partnership or Corporation	Nondeductible (IRC Sec. 265 and Rev. Ruling 66-262)	Tax-Free (IRC Sec. 104)
Partnership or Corporation (under a Cross Purchase Agreement)	Insured's Partner or Fellow Shareholder	Insured's Partner or Fellow Shareholder		

5 Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
18,000	1,100	1,100	1,150	1,150
19,000	1,150	1,150	1,200	1,200
20,000	1,200	1,200	1,250	1,250
21,000	1,250	1,250	1,350	1,350
22,000	1,300	1,300	1,450	1,450
23,000	1,350	1,350	1,500	1,500
24,000	1,400	1,400	1,600	1,600
25,000	1,450	1,450	1,650	1,650
26,000	1,550	1,550	1,750	1,750
27,000	1,600	1,600	1,850	1,850
28,000	1,700	1,700	1,900	1,900
29,000	1,750	1,750	2,000	2,000
30,000	1,800	1,800	2,050	2,050
31,000	1,850	1,850	2,150	2,150
32,000	1,900	1,900	2,200	2,200
33,000	1,950	1,950	2,300	2,300
34,000	2,000	2,000	2,350	2,350
35,000	2,050	2,050	2,400	2,400
36,000	2,100	2,100	2,500	2,500
37,000	2,150	2,150	2,550	2,550
38,000	2,200	2,200	2,650	2,650
39,000	2,250	2,250	2,700	2,700
40,000	2,300	2,300	2,750	2,750
41,000	2,400	2,400	2,850	2,850
42,000	2,450	2,450	2,900	2,900
43,000	2,500	2,500	3,000	3,000
44,000	2,550	2,550	3,050	3,050
45,000	2,600	2,600	3,100	3,100
46,000	2,650	2,650	3,200	3,200
47,000	2,700	2,700	3,250	3,250
48,000	2,750	2,750	3,300	3,300
49,000	2,800	2,800	3,350	3,350
50,000	2,850	2,850	3,400	3,400
51,000	2,900	2,950	3,500	3,500
52,000	2,960	3,010	3,550	3,550
53,000	3,010	3,060	3,600	3,600
54,000	3,070	3,120	3,650	3,650
55,000	3,120	3,170	3,700	3,700
56,000	3,180	3,280	3,800	3,800
57,000	3,230	3,330	3,850	3,850
58,000	3,280	3,380	3,900	3,900

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
59,000	3,340	3,440	3,950	3,950
60,000	3,390	3,490	4,000	4,000
61,000	3,450	3,550	4,050	4,100
62,000	3,500	3,600	4,100	4,150
63,000	3,550	3,650	4,150	4,200
64,000	3,610	3,660	4,200	4,300
65,000	3,610	3,710	4,250	4,350
66,000	3,670	3,770	4,300	4,400
67,000	3,720	3,770	4,350	4,500
68,000	3,780	3,830	4,400	4,550
69,000	3,830	3,880	4,450	4,600
70,000	3,830	3,880	4,500	4,650
71,000	3,890	3,940	4,550	4,700
72,000	3,890	3,940	4,600	4,750
73,000	3,950	4,000	4,650	4,800
74,000	3,950	4,000	4,700	4,800
75,000	4,000	4,000	4,750	4,850
76,000	4,040	4,040	4,810	4,900
77,000	4,080	4,080	4,870	4,950
78,000	4,120	4,120	4,930	5,010
79,000	4,160	4,160	4,990	5,070
80,000	4,200	4,200	5,050	5,130
81,000	4,240	4,240	5,110	5,190
82,000	4,280	4,290	5,170	5,250
83,000	4,320	4,340	5,230	5,310
84,000	4,360	4,390	5,290	5,370
85,000	4,400	4,440	5,350	5,430
86,000	4,440	4,490	5,410	5,490
87,000	4,480	4,540	5,470	5,550
88,000	4,520	4,590	5,530	5,610
89,000	4,560	4,640	5,590	5,670
90,000	4,600	4,690	5,650	5,730
91,000	4,640	4,740	5,710	5,790
92,000	4,680	4,790	5,770	5,850
93,000	4,720	4,840	5,830	5,910
94,000	4,760	4,890	5,890	5,970
95,000	4,800	4,940	5,950	6,030
96,000	4,840	4,990	6,010	6,090
97,000	4,880	5,040	6,070	6,150
98,000	4,920	5,090	6,130	6,210
99,000	4,960	5,090	6,150	6,270

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
100,000	5,000	5,090	6,150	6,320
101,000	5,040	5,130	6,220	6,390
102,000	5,080	5,180	6,290	6,460
103,000	5,120	5,230	6,360	6,530
104,000	5,160	5,280	6,430	6,600
105,000	5,200	5,330	6,500	6,670
106,000	5,240	5,380	6,570	6,740
107,000	5,280	5,430	6,640	6,810
108,000	5,320	5,480	6,710	6,880
109,000	5,360	5,530	6,780	6,950
110,000	5,400	5,580	6,850	7,020
111,000	5,440	5,630	6,920	7,090
112,000	5,480	5,680	6,990	7,160
113,000	5,520	5,730	7,060	7,230
114,000	5,560	5,780	7,130	7,300
115,000	5,600	5,830	7,200	7,370
116,000	5,640	5,880	7,270	7,440
117,000	5,680	5,930	7,340	7,510
118,000	5,720	5,980	7,410	7,580
119,000	5,760	6,030	7,480	7,650
120,000	5,800	6,080	7,550	7,720
121,000	5,840	6,130	7,620	7,790
122,000	5,880	6,180	7,690	7,860
123,000	5,920	6,230	7,760	7,930
124,000	5,960	6,280	7,780	8,000
125,000	6,050	6,360	7,800	8,000
126,000	6,090	6,410	7,860	8,060
127,000	6,130	6,460	7,920	8,120
128,000	6,170	6,510	7,980	8,180
129,000	6,210	6,560	8,040	8,240
130,000	6,250	6,610	8,100	8,300
131,000	6,290	6,660	8,160	8,360
132,000	6,330	6,710	8,220	8,420
133,000	6,370	6,760	8,280	8,480
134,000	6,410	6,810	8,340	8,540
135,000	6,450	6,860	8,400	8,600
136,000	6,490	6,910	8,460	8,660
137,000	6,530	6,960	8,520	8,720
138,000	6,570	7,010	8,580	8,780
139,000	6,610	7,060	8,640	8,840
140,000	6,650	7,110	8,700	8,900

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
141,000	6,690	7,160	8,760	8,960
142,000	6,730	7,210	8,820	9,020
143,000	6,770	7,260	8,880	9,080
144,000	6,810	7,310	8,940	9,140
145,000	6,850	7,360	9,000	9,200
146,000	6,890	7,410	9,060	9,260
147,000	6,930	7,460	9,120	9,320
148,000	6,970	7,510	9,180	9,380
149,000	7,010	7,560	9,240	9,440
150,000	7,150	7,630	9,400	9,520
151,000	7,190	7,680	9,460	9,580
152,000	7,230	7,730	9,520	9,640
153,000	7,270	7,780	9,580	9,700
154,000	7,310	7,830	9,640	9,760
155,000	7,350	7,880	9,700	9,820
156,000	7,390	7,930	9,760	9,880
157,000	7,430	7,980	9,820	9,940
158,000	7,470	8,030	9,880	10,000
159,000	7,510	8,080	9,940	10,060
160,000	7,550	8,130	10,000	10,120
161,000	7,590	8,180	10,060	10,180
162,000	7,630	8,230	10,120	10,240
163,000	7,670	8,280	10,180	10,300
164,000	7,710	8,330	10,240	10,360
165,000	7,750	8,380	10,300	10,420
166,000	7,790	8,430	10,360	10,480
167,000	7,830	8,480	10,420	10,540
168,000	7,870	8,530	10,480	10,600
169,000	7,910	8,580	10,540	10,660
170,000	7,950	8,630	10,600	10,720
171,000	7,990	8,680	10,660	10,780
172,000	8,030	8,730	10,720	10,840
173,000	8,070	8,780	10,780	10,900
174,000	8,110	8,830	10,840	10,950
175,000	8,150	8,900	10,850	10,950
176,000	8,190	8,950	10,910	11,020
177,000	8,230	9,000	10,970	11,100
178,000	8,270	9,050	11,030	11,160
179,000	8,310	9,100	11,090	11,230
180,000	8,350	9,150	11,150	11,300
181,000	8,390	9,200	11,210	11,370

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
182,000	8,430	9,250	11,270	11,440
183,000	8,470	9,300	11,330	11,510
184,000	8,510	9,350	11,390	11,580
185,000	8,550	9,400	11,450	11,650
186,000	8,590	9,450	11,510	11,720
187,000	8,630	9,500	11,570	11,790
188,000	8,670	9,550	11,630	11,860
189,000	8,710	9,600	11,690	11,930
190,000	8,750	9,650	11,750	12,000
191,000	8,790	9,700	11,810	12,070
192,000	8,830	9,750	11,870	12,140
193,000	8,870	9,800	11,930	12,210
194,000	8,910	9,850	11,990	12,280
195,000	8,950	9,900	12,050	12,350
196,000	8,990	9,950	12,110	12,420
197,000	9,030	10,000	12,170	12,490
198,000	9,070	10,050	12,230	12,560
199,000	9,110	10,100	12,290	12,580
200,000	9,200	10,170	12,400	12,590
201,000	9,240	10,220	12,460	12,660
202,000	9,280	10,270	12,520	12,730
203,000	9,320	10,320	12,580	12,800
204,000	9,360	10,370	12,640	12,870
205,000	9,400	10,420	12,700	12,940
206,000	9,440	10,470	12,760	13,010
207,000	9,480	10,520	12,820	13,080
208,000	9,520	10,570	12,880	13,150
209,000	9,560	10,620	12,940	13,220
210,000	9,600	10,670	13,000	13,290
211,000	9,640	10,720	13,060	13,360
212,000	9,680	10,770	13,120	13,430
213,000	9,720	10,820	13,180	13,500
214,000	9,760	10,870	13,240	13,570
215,000	9,800	10,920	13,300	13,640
216,000	9,840	10,970	13,360	13,710
217,000	9,880	11,020	13,420	13,780
218,000	9,920	11,070	13,480	13,850
219,000	9,960	11,120	13,540	13,920
220,000	10,000	11,170	13,600	13,990
221,000	10,040	11,220	13,660	14,060
222,000	10,080	11,270	13,720	14,130

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
223,000	10,120	11,320	13,780	14,200
224,000	10,160	11,370	13,840	14,230
225,000	10,250	11,440	14,000	14,250
226,000	10,290	11,490	14,040	14,320
227,000	10,330	11,540	14,080	14,390
228,000	10,370	11,590	14,120	14,460
229,000	10,410	11,640	14,160	14,530
230,000	10,450	11,690	14,200	14,600
231,000	10,490	11,740	14,240	14,670
232,000	10,530	11,790	14,280	14,740
233,000	10,570	11,840	14,320	14,810
234,000	10,610	11,890	14,360	14,880
235,000	10,650	11,940	14,400	14,950
236,000	10,690	11,990	14,440	15,020
237,000	10,730	12,040	14,480	15,090
238,000	10,770	12,090	14,520	15,160
239,000	10,810	12,140	14,560	15,230
240,000	10,850	12,190	14,600	15,300
241,000	10,890	12,240	14,640	15,370
242,000	10,930	12,290	14,680	15,440
243,000	10,970	12,340	14,720	15,510
244,000	11,010	12,390	14,760	15,580
245,000	11,050	12,440	14,800	15,650
246,000	11,090	12,490	14,840	15,720
247,000	11,130	12,540	14,880	15,790
248,000	11,170	12,590	14,920	15,860
249,000	11,210	12,640	14,960	15,890
250,000	11,350	12,710	15,000	15,920
251,000	11,390	12,760	15,020	15,990
252,000	11,430	12,810	15,040	16,060
253,000	11,470	12,860	15,070	16,130
254,000	11,510	12,910	15,090	16,200
255,000	11,550	12,960	15,110	16,270
256,000	11,590	13,010	15,130	16,340
257,000	11,630	13,060	15,160	16,410
258,000	11,670	13,110	15,180	16,480
259,000	11,710	13,160	15,200	16,550
260,000	11,750	13,210	15,220	16,620
261,000	11,790	13,260	15,240	16,690
262,000	11,830	13,310	15,270	16,760
263,000	11,870	13,360	15,290	16,830

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
264,000	11,910	13,410	15,310	16,900
265,000	11,950	13,460	15,330	16,970
266,000	11,990	13,510	15,360	17,040
267,000	12,030	13,560	15,380	17,110
268,000	12,070	13,610	15,400	17,180
269,000	12,110	13,660	15,420	17,250
270,000	12,150	13,710	15,440	17,320
271,000	12,190	13,760	15,470	17,390
272,000	12,230	13,810	15,490	17,460
273,000	12,270	13,860	15,510	17,530
274,000	12,310	13,910	15,530	17,600
275,000	12,400	13,980	15,560	17,650
276,000	12,440	14,030	15,580	17,720
277,000	12,480	14,080	15,600	17,790
278,000	12,520	14,130	15,620	17,860
279,000	12,560	14,180	15,640	17,930
280,000	12,600	14,230	15,670	18,000
281,000	12,640	14,280	15,690	18,070
282,000	12,680	14,330	15,710	18,140
283,000	12,720	14,380	15,730	18,210
284,000	12,760	14,430	15,760	18,280
285,000	12,800	14,480	15,780	18,350
286,000	12,840	14,530	15,800	18,420
287,000	12,880	14,580	15,820	18,490
288,000	12,920	14,630	15,840	18,560
289,000	12,960	14,680	15,870	18,630
290,000	13,000	14,730	15,890	18,700
291,000	13,040	14,780	15,910	18,770
292,000	13,080	14,830	15,930	18,840
293,000	13,120	14,880	15,960	18,910
294,000	13,160	14,930	15,980	18,980
295,000	13,200	14,980	16,000	19,050
296,000	13,240	15,030	16,020	19,120
297,000	13,280	15,080	16,040	19,190
298,000	13,320	15,130	16,070	19,260
299,000	13,360	15,180	16,090	19,330
300,000	13,500	15,250	16,110	19,430
301,000	13,540	15,300	16,130	19,500
302,000	13,580	15,350	16,160	19,570
303,000	13,620	15,400	16,180	19,640
304,000	13,660	15,450	16,200	19,710

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
305,000	13,700	15,500	16,220	19,780
306,000	13,740	15,550	16,240	19,850
307,000	13,780	15,600	16,270	19,920
308,000	13,820	15,650	16,290	19,990
309,000	13,860	15,700	16,310	20,060
310,000	13,900	15,750	16,330	20,130
311,000	13,940	15,800	16,360	20,200
312,000	13,980	15,850	16,380	20,270
313,000	14,020	15,900	16,400	20,340
314,000	14,060	15,950	16,420	20,410
315,000	14,100	16,000	16,440	20,480
316,000	14,140	16,050	16,470	20,550
317,000	14,180	16,100	16,490	20,620
318,000	14,220	16,150	16,510	20,690
319,000	14,260	16,200	16,530	20,760
320,000	14,300	16,250	16,560	20,830
321,000	14,340	16,300	16,580	20,900
322,000	14,380	16,350	16,600	20,970
323,000	14,420	16,400	16,620	21,040
324,000	14,460	16,450	16,640	21,070
325,000	14,550	16,520	16,670	21,100
326,000	14,570	16,570	16,690	21,170
327,000	14,590	16,620	16,710	21,240
328,000	14,610	16,670	16,730	21,310
329,000	14,630	16,720	16,760	21,380
330,000	14,650	16,770	16,780	21,450
331,000	14,670	16,820	16,800	21,520
332,000	14,690	16,870	16,820	21,590
333,000	14,710	16,920	16,840	21,660
334,000	14,730	16,970	16,870	21,730
335,000	14,750	17,020	16,890	21,800
336,000	14,770	17,070	16,910	21,870
337,000	14,790	17,120	16,930	21,940
338,000	14,810	17,170	16,960	22,010
339,000	14,830	17,220	16,980	22,080
340,000	14,850	17,270	17,000	22,150
341,000	14,870	17,320	17,020	22,220
342,000	14,890	17,370	17,040	22,290
343,000	14,910	17,420	17,070	22,360
344,000	14,930	17,470	17,090	22,430
345,000	14,950	17,520	17,110	22,500

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
346,000	14,970	17,570	17,130	22,570
347,000	14,990	17,620	17,160	22,640
348,000	15,000	17,670	17,180	22,710
349,000	15,000	17,720	17,200	22,720
350,000	15,000	17,790	17,220	22,730
351,000	15,020	17,840	17,240	22,800
352,000	15,040	17,890	17,270	22,870
353,000	15,050	17,940	17,290	22,940
354,000	15,070	17,990	17,310	23,010
355,000	15,090	18,040	17,330	23,080
356,000	15,110	18,090	17,360	23,150
357,000	15,130	18,140	17,380	23,220
358,000	15,140	18,190	17,400	23,290
359,000	15,160	18,240	17,420	23,360
360,000	15,180	18,290	17,440	23,430
361,000	15,200	18,340	17,470	23,500
362,000	15,220	18,390	17,490	23,570
363,000	15,230	18,440	17,510	23,640
364,000	15,250	18,490	17,530	23,710
365,000	15,270	18,540	17,560	23,780
366,000	15,290	18,590	17,580	23,850
367,000	15,310	18,640	17,600	23,920
368,000	15,320	18,690	17,620	23,990
369,000	15,340	18,740	17,640	24,060
370,000	15,360	18,790	17,670	24,130
371,000	15,380	18,840	17,690	24,200
372,000	15,400	18,890	17,710	24,270
373,000	15,410	18,940	17,730	24,340
374,000	15,430	18,990	17,760	24,360
375,000	15,450	19,070	17,780	24,370
376,000	15,470	19,120	17,800	24,400
377,000	15,490	19,170	17,820	24,430
378,000	15,500	19,220	17,840	24,460
379,000	15,520	19,270	17,870	24,490
380,000	15,540	19,320	17,890	24,520
381,000	15,560	19,370	17,910	24,550
382,000	15,580	19,420	17,930	24,580
383,000	15,590	19,470	17,960	24,610
384,000	15,610	19,520	17,980	24,640
385,000	15,630	19,570	18,000	24,670
386,000	15,650	19,620	18,020	24,700

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
387,000	15,670	19,670	18,040	24,730
388,000	15,680	19,720	18,070	24,760
389,000	15,700	19,770	18,090	24,790
390,000	15,720	19,820	18,110	24,820
391,000	15,740	19,870	18,130	24,850
392,000	15,760	19,920	18,160	24,880
393,000	15,770	19,970	18,180	24,910
394,000	15,790	20,020	18,200	24,940
395,000	15,810	20,070	18,220	24,970
396,000	15,830	20,120	18,240	25,020
397,000	15,850	20,170	18,270	25,060
398,000	15,860	20,220	18,290	25,110
399,000	15,880	20,270	18,310	25,160
400,000	15,900	20,330	18,330	25,200
401,000	15,910	20,380	18,360	25,250
402,000	15,920	20,430	18,380	25,300
403,000	15,940	20,480	18,400	25,340
404,000	15,950	20,530	18,420	25,390
405,000	15,960	20,580	18,440	25,430
406,000	15,970	20,630	18,470	25,480
407,000	15,990	20,680	18,490	25,530
408,000	16,000	20,730	18,510	25,570
409,000	16,010	20,780	18,530	25,620
410,000	16,020	20,830	18,560	25,660
411,000	16,040	20,880	18,580	25,710
412,000	16,050	20,930	18,600	25,750
413,000	16,060	20,980	18,620	25,810
414,000	16,070	21,030	18,640	25,880
415,000	16,090	21,080	18,670	25,940
416,000	16,100	21,130	18,690	26,000
417,000	16,110	21,180	18,710	26,060
418,000	16,120	21,230	18,730	26,130
419,000	16,140	21,280	18,760	26,190
420,000	16,150	21,330	18,780	26,250
421,000	16,160	21,380	18,800	26,310
422,000	16,170	21,430	18,820	26,380
423,000	16,190	21,480	18,840	26,440
424,000	16,200	21,530	18,870	26,500
425,000	16,210	21,610	18,890	26,560
426,000	16,220	21,660	18,910	26,630
427,000	16,230	21,710	18,930	26,690

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
428,000	16,250	21,760	18,960	26,750
429,000	16,260	21,810	18,980	26,810
430,000	16,270	21,860	19,000	26,880
431,000	16,280	21,910	19,020	26,940
432,000	16,300	21,960	19,040	27,000
433,000	16,310	22,010	19,070	27,060
434,000	16,320	22,060	19,090	27,130
435,000	16,330	22,110	19,110	27,190
436,000	16,350	22,160	19,130	27,250
437,000	16,360	22,210	19,160	27,310
438,000	16,370	22,260	19,180	27,380
439,000	16,380	22,310	19,200	27,440
440,000	16,400	22,360	19,220	27,500
441,000	16,410	22,410	19,240	27,560
442,000	16,420	22,460	19,270	27,630
443,000	16,430	22,510	19,290	27,690
444,000	16,450	22,560	19,310	27,750
445,000	16,460	22,610	19,330	27,810
446,000	16,470	22,660	19,360	27,880
447,000	16,480	22,710	19,380	27,940
448,000	16,500	22,760	19,400	28,000
449,000	16,510	22,810	19,420	28,060
450,000	16,520	22,880	19,440	28,130
451,000	16,540	22,930	19,470	28,190
452,000	16,560	22,980	19,490	28,250
453,000	16,580	23,030	19,510	28,310
454,000	16,600	23,080	19,530	28,380
455,000	16,620	23,130	19,560	28,440
456,000	16,640	23,180	19,580	28,500
457,000	16,650	23,230	19,600	28,560
458,000	16,670	23,280	19,620	28,630
459,000	16,690	23,330	19,640	28,690
460,000	16,710	23,380	19,670	28,750
461,000	16,730	23,430	19,690	28,810
462,000	16,750	23,480	19,710	28,880
463,000	16,770	23,530	19,730	28,940
464,000	16,790	23,580	19,760	29,000
465,000	16,810	23,630	19,780	29,600
466,000	16,830	23,680	19,800	29,130
467,000	16,850	23,730	19,820	29,190
468,000	16,870	23,780	19,840	29,250

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
469,000	16,880	23,830	19,870	29,310
470,000	16,900	23,880	19,890	29,380
471,000	16,920	23,930	19,910	29,440
472,000	16,940	23,980	19,930	29,500
473,000	16,960	24,030	19,960	29,560
474,000	16,980	24,080	19,980	29,630
475,000	17,000	24,150	20,000	29,690
476,000	17,020	24,180	20,000	29,750
477,000	17,040	24,210	20,000	29,810
478,000	17,060	24,240	20,000	29,880
479,000	17,080	24,270	20,000	29,940
480,000	17,100	24,300	20,000	30,000
481,000	17,120	24,330	20,000	30,000
482,000	17,130	24,360	20,000	30,000
483,000	17,150	24,390	20,000	30,000
484,000	17,170	24,420	20,000	30,000
485,000	17,190	24,450	20,000	30,000
486,000	17,210	24,480	20,000	30,000
487,000	17,230	24,510	20,000	30,000
488,000	17,250	24,540	20,000	30,000
489,000	17,270	24,570	20,000	30,000
490,000	17,290	24,600	20,000	30,000
491,000	17,310	24,630	20,000	30,000
492,000	17,330	24,660	20,000	30,000
493,000	17,350	24,690	20,000	30,000
494,000	17,360	24,720	20,000	30,000
495,000	17,380	24,750	20,000	30,000
496,000	17,400	24,780	20,000	30,000
497,000	17,420	24,820	20,000	30,000
498,000	17,440	24,880	20,000	30,000
499,000	17,460	24,940	20,000	30,000
500,000	17,480	25,000	20,000	30,000
501,000	17,500	25,050	20,000	30,000
502,000	17,510	25,100	20,000	30,000
503,000	17,530	25,150	20,000	30,000
504,000	17,540	25,200	20,000	30,000
505,000	17,560	25,250	20,000	30,000
506,000	17,570	25,300	20,000	30,000
507,000	17,590	25,350	20,000	30,000
508,000	17,610	25,400	20,000	30,000
509,000	17,620	25,450	20,000	30,000

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
510,000	17,640	25,500	20,000	30,000
511,000	17,650	25,550	20,000	30,000
512,000	17,670	25,600	20,000	30,000
513,000	17,690	25,650	20,000	30,000
514,000	17,700	25,700	20,000	30,000
515,000	17,720	25,750	20,000	30,000
516,000	17,730	25,800	20,000	30,000
517,000	17,750	25,850	20,000	30,000
518,000	17,760	25,900	20,000	30,000
519,000	17,780	25,950	20,000	30,000
520,000	17,800	26,000	20,000	30,000
521,000	17,810	26,050	20,000	30,000
522,000	17,830	26,100	20,000	30,000
523,000	17,840	26,150	20,000	30,000
524,000	17,860	26,200	20,000	30,000
525,000	17,880	26,250	20,000	30,000
526,000	17,890	26,300	20,000	30,000
527,000	17,910	26,350	20,000	30,000
528,000	17,920	26,400	20,000	30,000
529,000	17,940	26,450	20,000	30,000
530,000	17,950	26,500	20,000	30,000
531,000	17,970	26,550	20,000	30,000
532,000	17,990	26,600	20,000	30,000
533,000	18,000	26,650	20,000	30,000
534,000	18,020	26,700	20,000	30,000
535,000	18,030	26,750	20,000	30,000
536,000	18,050	26,800	20,000	30,000
537,000	18,060	26,850	20,000	30,000
538,000	18,080	26,900	20,000	30,000
539,000	18,100	26,950	20,000	30,000
540,000	18,110	27,000	20,000	30,000
541,000	18,130	27,050	20,000	30,000
542,000	18,140	27,100	20,000	30,000
543,000	18,160	27,150	20,000	30,000
544,000	18,180	27,200	20,000	30,000
545,000	18,190	27,250	20,000	30,000
546,000	18,210	27,300	20,000	30,000
547,000	18,220	27,350	20,000	30,000
548,000	18,240	27,400	20,000	30,000
549,000	18,250	27,450	20,000	30,000
550,000	18,270	27,500	20,000	30,000

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
551,000	18,290	27,550	20,000	30,000
552,000	18,300	27,600	20,000	30,000
553,000	18,320	27,650	20,000	30,000
554,000	18,330	27,700	20,000	30,000
555,000	18,350	27,750	20,000	30,000
556,000	18,360	27,800	20,000	30,000
557,000	18,380	27,850	20,000	30,000
558,000	18,400	27,900	20,000	30,000
559,000	18,410	27,950	20,000	30,000
560,000	18,430	28,000	20,000	30,000
561,000	18,440	28,050	20,000	30,000
562,000	18,460	28,100	20,000	30,000
563,000	18,480	28,150	20,000	30,000
564,000	18,490	28,200	20,000	30,000
565,000	18,510	28,250	20,000	30,000
566,000	18,520	28,300	20,000	30,000
567,000	18,540	28,350	20,000	30,000
568,000	18,550	28,400	20,000	30,000
569,000	18,570	28,450	20,000	30,000
570,000	18,590	28,500	20,000	30,000
571,000	18,600	28,550	20,000	30,000
572,000	18,620	28,600	20,000	30,000
573,000	18,630	28,650	20,000	30,000
574,000	18,650	28,700	20,000	30,000
575,000	18,670	28,750	20,000	30,000
576,000	18,680	28,800	20,000	30,000
577,000	18,700	28,850	20,000	30,000
578,000	18,710	28,900	20,000	30,000
579,000	18,730	28,950	20,000	30,000
580,000	18,740	29,000	20,000	30,000
581,000	18,760	29,050	20,000	30,000
582,000	18,780	29,100	20,000	30,000
583,000	18,790	29,150	20,000	30,000
584,000	18,810	29,200	20,000	30,000
585,000	18,820	29,250	20,000	30,000
586,000	18,840	29,300	20,000	30,000
587,000	18,850	29,350	20,000	30,000
588,000	18,870	29,400	20,000	30,000
589,000	18,890	29,450	20,000	30,000
590,000	18,900	29,500	20,000	30,000
591,000	18,920	29,550	20,000	30,000

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
592,000	18,930	29,600	20,000	30,000
593,000	18,950	29,650	20,000	30,000
594,000	18,970	29,700	20,000	30,000
595,000	18,980	29,750	20,000	30,000
596,000	19,000	29,800	20,000	30,000
597,000	19,010	29,850	20,000	30,000
598,000	19,030	29,900	20,000	30,000
599,000	19,040	29,950	20,000	30,000
600,000	19,060	30,000	20,000	30,000
601,000	19,070	30,000	20,000	30,000
602,000	19,080	30,000	20,000	30,000
603,000	19,080	30,000	20,000	30,000
604,000	19,090	30,000	20,000	30,000
605,000	19,100	30,000	20,000	30,000
606,000	19,110	30,000	20,000	30,000
607,000	19,110	30,000	20,000	30,000
608,000	19,120	30,000	20,000	30,000
609,000	19,130	30,000	20,000	30,000
610,000	19,140	30,000	20,000	30,000
611,000	19,140	30,000	20,000	30,000
612,000	19,150	30,000	20,000	30,000
613,000	19,160	30,000	20,000	30,000
614,000	19,170	30,000	20,000	30,000
615,000	19,170	30,000	20,000	30,000
616,000	19,180	30,000	20,000	30,000
617,000	19,190	30,000	20,000	30,000
618,000	19,200	30,000	20,000	30,000
619,000	19,200	30,000	20,000	30,000
620,000	19,210	30,000	20,000	30,000
621,000	19,220	30,000	20,000	30,000
622,000	19,230	30,000	20,000	30,000
623,000	19,230	30,000	20,000	30,000
624,000	19,240	30,000	20,000	30,000
625,000	19,250	30,000	20,000	30,000
626,000	19,260	30,000	20,000	30,000
627,000	19,270	30,000	20,000	30,000
628,000	19,270	30,000	20,000	30,000
629,000	19,280	30,000	20,000	30,000
630,000	19,290	30,000	20,000	30,000
631,000	19,300	30,000	20,000	30,000
632,000	19,300	30,000	20,000	30,000

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
633,000	19,310	30,000	20,000	30,000
634,000	19,320	30,000	20,000	30,000
635,000	19,330	30,000	20,000	30,000
636,000	19,330	30,000	20,000	30,000
637,000	19,340	30,000	20,000	30,000
638,000	19,350	30,000	20,000	30,000
639,000	19,360	30,000	20,000	30,000
640,000	19,360	30,000	20,000	30,000
641,000	19,370	30,000	20,000	30,000
642,000	19,380	30,000	20,000	30,000
643,000	19,390	30,000	20,000	30,000
644,000	19,390	30,000	20,000	30,000
645,000	19,400	30,000	20,000	30,000
646,000	19,410	30,000	20,000	30,000
647,000	19,420	30,000	20,000	30,000
648,000	19,420	30,000	20,000	30,000
649,000	19,430	30,000	20,000	30,000
650,000	19,440	30,000	20,000	30,000
651,000	19,450	30,000	20,000	30,000
652,000	19,460	30,000	20,000	30,000
653,000	19,460	30,000	20,000	30,000
654,000	19,470	30,000	20,000	30,000
655,000	19,480	30,000	20,000	30,000
656,000	19,490	30,000	20,000	30,000
657,000	19,490	30,000	20,000	30,000
658,000	19,500	30,000	20,000	30,000
659,000	19,510	30,000	20,000	30,000
660,000	19,520	30,000	20,000	30,000
661,000	19,520	30,000	20,000	30,000
662,000	19,530	30,000	20,000	30,000
663,000	19,540	30,000	20,000	30,000
664,000	19,550	30,000	20,000	30,000
665,000	19,550	30,000	20,000	30,000
666,000	19,560	30,000	20,000	30,000
667,000	19,570	30,000	20,000	30,000
668,000	19,580	30,000	20,000	30,000
669,000	19,580	30,000	20,000	30,000
670,000	19,590	30,000	20,000	30,000
671,000	19,600	30,000	20,000	30,000
672,000	19,610	30,000	20,000	30,000
673,000	19,610	30,000	20,000	30,000

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
674,000	19,620	30,000	20,000	30,000
675,000	19,630	30,000	20,000	30,000
676,000	19,640	30,000	20,000	30,000
677,000	19,650	30,000	20,000	30,000
678,000	19,650	30,000	20,000	30,000
679,000	19,660	30,000	20,000	30,000
680,000	19,670	30,000	20,000	30,000
681,000	19,680	30,000	20,000	30,000
682,000	19,680	30,000	20,000	30,000
683,000	19,690	30,000	20,000	30,000
684,000	19,700	30,000	20,000	30,000
685,000	19,710	30,000	20,000	30,000
686,000	19,710	30,000	20,000	30,000
687,000	19,720	30,000	20,000	30,000
688,000	19,730	30,000	20,000	30,000
689,000	19,740	30,000	20,000	30,000
690,000	19,740	30,000	20,000	30,000
691,000	19,750	30,000	20,000	30,000
692,000	19,760	30,000	20,000	30,000
693,000	19,770	30,000	20,000	30,000
694,000	19,770	30,000	20,000	30,000
695,000	19,780	30,000	20,000	30,000
696,000	19,790	30,000	20,000	30,000
697,000	19,800	30,000	20,000	30,000
698,000	19,800	30,000	20,000	30,000
699,000	19,810	30,000	20,000	30,000
700,000	19,820	30,000	20,000	30,000
701,000	19,820	30,000	20,000	30,000
702,000	19,830	30,000	20,000	30,000
703,000	19,830	30,000	20,000	30,000
704,000	19,830	30,000	20,000	30,000
705,000	19,840	30,000	20,000	30,000
706,000	19,840	30,000	20,000	30,000
707,000	19,850	30,000	20,000	30,000
708,000	19,850	30,000	20,000	30,000
709,000	19,850	30,000	20,000	30,000
710,000	19,860	30,000	20,000	30,000
711,000	19,860	30,000	20,000	30,000
712,000	19,860	30,000	20,000	30,000
713,000	19,870	30,000	20,000	30,000
714,000	19,870	30,000	20,000	30,000

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
715,000	19,870	30,000	20,000	30,000
716,000	19,880	30,000	20,000	30,000
717,000	19,880	30,000	20,000	30,000
718,000	19,880	30,000	20,000	30,000
719,000	19,890	30,000	20,000	30,000
720,000	19,890	30,000	20,000	30,000
721,000	19,900	30,000	20,000	30,000
722,000	19,900	30,000	20,000	30,000
723,000	19,900	30,000	20,000	30,000
724,000	19,910	30,000	20,000	30,000
725,000	19,910	30,000	20,000	30,000
726,000	19,910	30,000	20,000	30,000
727,000	19,920	30,000	20,000	30,000
728,000	19,920	30,000	20,000	30,000
729,000	19,920	30,000	20,000	30,000
730,000	19,930	30,000	20,000	30,000
731,000	19,930	30,000	20,000	30,000
732,000	19,940	30,000	20,000	30,000
733,000	19,940	30,000	20,000	30,000
734,000	19,940	30,000	20,000	30,000
735,000	19,950	30,000	20,000	30,000
736,000	19,950	30,000	20,000	30,000
737,000	19,950	30,000	20,000	30,000
738,000	19,960	30,000	20,000	30,000
739,000	19,960	30,000	20,000	30,000
740,000	19,960	30,000	20,000	30,000
741,000	19,970	30,000	20,000	30,000
742,000	19,970	30,000	20,000	30,000
743,000	19,970	30,000	20,000	30,000
744,000	19,980	30,000	20,000	30,000
745,000	19,980	30,000	20,000	30,000
746,000	19,990	30,000	20,000	30,000
747,000	19,990	30,000	20,000	30,000
748,000	19,990	30,000	20,000	30,000
749,000	20,000	30,000	20,000	30,000
750,000	20,000	30,000	20,000	30,000
751,000	20,000	30,000	20,000	30,000
752,000	20,000	30,000	20,000	30,000
753,000	20,000	30,000	20,000	30,000
754,000	20,000	30,000	20,000	30,000
755,000	20,000	30,000	20,000	30,000

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
756,000	20,000	30,000	20,000	30,000
757,000	20,000	30,000	20,000	30,000
758,000	20,000	30,000	20,000	30,000
759,000	20,000	30,000	20,000	30,000
760,000	20,000	30,000	20,000	30,000
761,000	20,000	30,000	20,000	30,000
762,000	20,000	30,000	20,000	30,000
763,000	20,000	30,000	20,000	30,000
764,000	20,000	30,000	20,000	30,000
765,000	20,000	30,000	20,000	30,000
766,000	20,000	30,000	20,000	30,000
767,000	20,000	30,000	20,000	30,000
768,000	20,000	30,000	20,000	30,000
769,000	20,000	30,000	20,000	30,000
770,000	20,000	30,000	20,000	30,000
771,000	20,000	30,000	20,000	30,000
772,000	20,000	30,000	20,000	30,000
773,000	20,000	30,000	20,000	30,000
774,000	20,000	30,000	20,000	30,000
775,000	20,000	30,000	20,000	30,000
776,000	20,000	30,000	20,000	30,000
777,000	20,000	30,000	20,000	30,000
778,000	20,000	30,000	20,000	30,000
779,000	20,000	30,000	20,000	30,000
780,000	20,000	30,000	20,000	30,000
781,000	20,000	30,000	20,000	30,000
782,000	20,000	30,000	20,000	30,000
783,000	20,000	30,000	20,000	30,000
784,000	20,000	30,000	20,000	30,000
785,000	20,000	30,000	20,000	30,000
786,000	20,000	30,000	20,000	30,000
787,000	20,000	30,000	20,000	30,000
788,000	20,000	30,000	20,000	30,000
789,000	20,000	30,000	20,000	30,000
790,000	20,000	30,000	20,000	30,000
791,000	20,000	30,000	20,000	30,000
792,000	20,000	30,000	20,000	30,000
793,000	20,000	30,000	20,000	30,000
794,000	20,000	30,000	20,000	30,000
795,000	20,000	30,000	20,000	30,000
796,000	20,000	30,000	20,000	30,000

Issue and Participation Limit Tables*

Annual Earned Income	Individual Paid Issue and Participation	Individual Paid Participation with Group LTD	Employer Paid I&P Taxable Monthly Indemnity	Employer Paid Participation w/Taxable Group LTD Monthly Indemnity*
797,000	20,000	30,000	20,000	30,000
798,000	20,000	30,000	20,000	30,000
799,000	20,000	30,000	20,000	30,000
800,000	20,000	30,000	20,000	30,000
and up				

- **Always observe maximum issue and participation limits for the appropriate occupation class.**
- Refer to the Program Section for New Professionals, Business Owner Advantage Program, Government Employees (federal state, municipal, county and town), Retirement Protection Plus, Home Based and PayGuard for special issue limits.
- Social Insurance Substitute Rider; Future Increase Option Rider amounts; and the Berkshire applied for coverage amount are included in the maximum issue limit.

* Several factors are considered in determining the amount of disability coverage available to an applicant and considered by the Company in using the Issue and Participation tables. These factors include, but are not limited to: 1) earned income; 2) unearned income; 3) employment status (business owner or employee); 4) disability insurance in force at the time of application with Berkshire, Guardian and all other insurers; 5) disability insurance or coverage provided by the employer, 6) disability insurance benefits available to the applicant within 12 months of the policy date; and 7) the tax treatment of all in force disability insurance. Disability coverage for which an insured is eligible to obtain, but which is not in force pursuant to Berkshire and Guardian policies containing the following riders will count as in force coverage in determining overall participation limits: Automatic Increase Rider, Automatic Benefit Enhancement Rider, Future Increase Option Rider (FIO); and Future Purchase Option Rider (FPO). The terms “earned income” and “unearned income” for purposes of this paragraph have the same meaning as they have in the insured’s application for coverage, or in the insured’s application to exercise a Future Purchase Option or Future Increase Option, respectively.

All of the above factors are also considered in the underwriting of an application to exercise an FIO and FPO, as they relate to an insured at the time the insured applies for additional coverage through an FIO or FPO. These factors may be different than at the time the insured applies for additional coverage through an FIO or FPO, in comparison with the same factors as they existed at the time the insured applied for the policy to which the FIO or FPO is attached.

For FIO or FPO exercises while an insured is on claim, the amount of the insured’s Participation reflected in the Issue and Participation tables will include all disability insurance in force with all insurers (including but not limited to Berkshire or Guardian), as well as disability insurance or benefits provided by any employer, regardless of whether any claim pursuant to such insurance is payable. As per the Issue and Participation Table, the amount of coverage available to an insured through the exercise of an FIO or FPO may be reduced by virtue of the insured’s disability coverage in force with Berkshire, Guardian, any other insurer or insurers, the disability coverage provided by the insured’s employer, and the tax treatment afforded all such coverage. The amount of coverage available to an insured at the time of exercising an FIO or FPO may also be impacted by virtue of changes to the Issue and Participation Tables made after the issuance of the policy from which the option is being exercised.

6 Supplementary Information

Appointment and Licensing Requirements

Approved state appointments are required prior to the solicitation of an application in the following states: Florida, Indiana, Pennsylvania and Utah. This means that Berkshire will not be able to process applications solicited in these states by a producer not yet appointed with Berkshire.

For all other states, the producer may submit the application and Berkshire will begin processing it if a copy of the producer's license is received with the new application.

Berkshire is unable to accept or process any applications solicited by producers not licensed in the state the solicitation occurred. For example, if the solicitation occurred in Pennsylvania, then the producer must be licensed and appointed in Pennsylvania prior to submitting the application to Berkshire for processing. These appointment and solicitation procedures apply to all disability products, including exercises of Future Purchase Options, Future Increase Options or Group Disability Replacement Options.

Please note the agent must be licensed in the state where the application is solicited and signed.

For details of agent licensing requirements for applications, please refer to 'Applications Solicited via the internet, mail or phone' later in this section.

Determining Contract State and Required Forms

The residence of the applicant generally determines the contract state unless the applicant has a connection with another state. That connection could be a workplace or a secondary residence (generally defined as the state where the applicant resides for at least four months a year). The application and other new business forms should be the state forms as determined by the contracting state.

For Future Increase Option/Future Purchase Option/Group Disability Replacement rider exercises, follow the same rules. However, if the policyowner has moved since the original policy was issued, the applicant can request that the contract state be either the original contract state or the new state of residence.

Age Calculation

The method used to calculate the age of the applicant is defined below:

- Age last birthday – Current age as of last birthday

Example: Applicant's Date of Birth is 11/01/1970

Today's date is 05/10/2009

Applicant's age (actual) is 38

Saving Age

- To save age for an age last birthday product, the contract should be dated one day prior to the applicant's birthday.

Conditional Receipt

If the first premium is paid with the application, a Conditional Receipt must be completed and signed by the applicant. This receipt is subject to certain conditions and is, therefore, a Conditional Receipt. Those conditions should be covered in detail with the applicant. In no event should this ever be referred to as a 'binder' or 'binding receipt.'

No receipt other than the regular conditional prepayment receipt should be given for any amount collected.

Refer to the DI Product and Information Manual (order #6502) for details.

Applications Solicited via Internet, Mail or Phone

Producers may solicit applications via internet, mail or phone, subject to the following conditions:

- The producer must be licensed (and appointed if required) in both the producer's resident state and the state in which the application is signed.
- The contract state will be the state in which the applicant lives or works – the application and all relevant forms must reflect the contract state.
- An individual present at the time the application is completed must witness all forms. (The agent *cannot* witness the application.)

- The Agent Statement must be completed and signed by the agent.
- The agent may not accept money and may not issue a conditional receipt.
- Cases will be underwritten following all normal guidelines. In addition, all cases will require an Inspection, Part 2 Medical and Declaration of Insurability.

For further details contact your agency's Disability Income Specialist.

Policy Dating

Non-Conditionally receipted policies will automatically be post-dated 15 days from the date the policy is issued unless:

- If a request is made on Part 1 ("Remarks and Special Requests" section) of the application to backdate to save the age of the applicant the back dating may be no more than 30 days prior to date the application is signed; or
- the age of the applicant can be saved by dating between the date of the Part I application and the date of issue. (The policy may be dated back no more than 30 days prior to the date the application is signed.); or
- there is a request on the application to date the policy ahead to a specific date not over 60 days from the date of the application. (The policy will be issued no more than 10 days prior to the date requested and a Declaration of Insurability will be required upon delivery of the policy.)

Policies with a pre-payment and a valid Conditional Receipt will be dated according to the terms of the Conditional Receipt.

Except as provided in the Conditional Receipt, coverage does not take effect unless and until the policy is delivered and the first premium is paid, absent any change in the applicant's insurability (health, income level, status of employment and/or occupation as stated in the application).

Refund of Initial Premiums

Incomplete Policies

Policy is not issued due to incomplete underwriting information. Any initial premium is refunded to the agency for delivery to the client.

Not Taken Policies

- Policy is issued as applied for but delivery not met: the initial premium is kept unless the policy owner requests the refund in writing.
- Policy was issued with amendments and delivery not met: any initial premium is refunded to the agency.

Declined Policies

The underwriter contacts the agency at the time of the decline. Any initial premium is refunded to the applicant after waiting five days to give the agent time to contact the applicant.

Issued Policy Goes In Force with an Overpayment

If the policy is on the Guard-O-Matic (GOM) or Automatic Payment Plan (APP) or is billed annually, all refunds are mailed to the policy owner. If the policy is on quarterly or semi-annual billing mode and the amount of the overpayment is under \$25, the refund is used as a credit on the next billing notice. If the amount of the overpayment is over \$25, the refund is mailed to the policy owner.

Alternate and Additional Policies

An alternate policy may be requested when there is some doubt as to which of two policy plans or amounts will be acceptable to the applicant. An *additional* policy may be requested when there is a possibility both policies might be placed.

It is important that a definite distinction be made when applying for either alternate or additional policies. Requests for alternate policies are underwritten with the possibility that the policy with the larger initial risk will be placed, whereas requests for additional policies are underwritten with the possibility that the *total* amount will be placed.

When requesting either an alternate or additional, be sure to describe fully the details of the alternate or additional policy requested (plan, amount, additional benefits or lack of same, and method of premium payment). If a feature of the basic policy is not available on the alternate or additional, be sure to specify the exception.

If the owner is to be different for the two policies (for example, Disability Buy-Out or Overhead Expense contracts), then separate applications must be completed.

If an alternate or additional is requested, prepayment applies only to the basic policy and not to the alternate or additional policy.

Replacements

When Berkshire issues a contract with the understanding that the existing DI coverage with another company will be terminated, the new contract will be issued with a health replacement exclusion requiring the policyowner's signature. The exclusion language specifies that the amount of insurance issued will be limited by the amount of in force monthly indemnity that the Berkshire coverage is replacing. It further specifies that it is understood that the in force coverage will be terminated as a result of the issuance of the Berkshire contract.

Berkshire is required by law to notify the other insurer in Utah and Florida. However, in these and all other states, it is the applicant's responsibility to terminate the existing coverage. Some states also require additional replacement forms. Refer to Berkshire Life Tools for a current and complete listing of forms by state.

Please remember: it may not be in the best interests of the policyholder to replace existing disability insurance coverage.

Policy Delivery

Part I of the application provides "Any policy or policies issued shall not be effective unless and until the full first premium has been paid and the policy or policies have been delivered to the owner while the health and other conditions affecting the applicant remain as described in this application."

It is exceedingly important that this provision be strictly adhered to when delivering a policy which is not prepaid, even when the policy may have been applied for and delivered to an owner other than the applicant. If there has been any change in the health or status of the applicant between the date of application and the date of policy delivery, the company should be notified immediately and no policy should be delivered.

Delivery Requirements

A delivery requirement is any requirement that is communicated at issue and must be received by New Business Services to place the policy in force and pay commissions. Such requirements may be an amendment(s), exclusion(s) or a Declaration of Insurability. These requirements must be signed and dated and *should never be altered*.

If an applicant responds positively to any question(s) that are part of the Declaration of Insurability, no policy should be delivered and the company should be notified immediately.

Reissues

Reissue requests can be submitted up to six months after the policy is issued. Thereafter, an in force policy change request must be submitted.

DI@WORK™ Worksite Disability Income Program

DI@WORK is an innovative supplemental disability income protection program that combines industry-leading policy features with expert support, a focus on education, and state-of-the-art enrollment — a turnkey approach that is distinctively different in the marketplace.

The cornerstone of the DI@WORK program is Income ProVider, an individual disability income policy designed exclusively for use with employer-sponsored Guaranteed Standard Issue (GSI) cases. GSI offers are available for employer-paid groups of 5+ lives; and voluntary, employee-paid groups of 75+ lives.

Product Overview

Income ProVider disability income insurance Policy Form 1200 is issued by Berkshire Life Insurance Company of America. The Income ProVider product design gives us the flexibility to help customize benefit design for specific employer requirements. Benefits are offered for particular programs at the discretion of the underwriter.

3 Plan Options

Three plan options are available with Voluntary Enrollments (Good, Better and Best). Single plan options or even High/Low plan options can limit employee choices. Our 3-tiered approach provides a wider variety of distinctive plan designs and optional riders to meet different income protection needs. With each plan, employees can obtain flexible, fixed-rate coverage that is available without medical underwriting, and with premium discounts.

New Built-in Portability Feature

Our new built-in portability feature enables employees to increase coverage after leaving their employer. This unique-to-the-industry feature is designed to help employees protect their income when changing employers — a time when employees often see an increase in compensation. For up to 90 days after leaving their employer, insureds have a one-time opportunity to increase their coverage up to the unused GSI amount with no medical underwriting.

Target Markets

- Business Services
- Law Firms
- Accounting Firms
- Engineers/Architects
- “Creative” Firms (Advertising Agencies/Graphic Design)
- Scientific, and Technical Firms
- Corporate Executives, Middle Management, Technical Employees
- High Tech Companies
- Software Development, Computer/Data Processing
- Occupation classes 4, 5 and 6
- Incomes of \$75,000 or more

Income ProVider Base Policy Specifications

Policy Form	Form 1200 (I/I1)
Non-cancellable & Guaranteed Renewable to age 65/67	Yes
Conditionally Renewable after 65/67	For life
Rates	Unisex, based on age last birthday
Issue Ages*	18 – 70 , based on age last birthday
Occupation Classes	6, 5, 4, 3, 2**1** (non-medical markets) 6M, 5M, 4M, 3M (medical market) Occupation class 4P will be available for AMB exercises only. Not available to new issues.
Waiting Periods	90, 180, 360 and 720*** days
Maximum Benefit Periods	2 years, 5 years, To Age 65, To Age 67
Premium	Multi-Life Level Premium Unisex Rates, Age last birthday
Tobacco Use	15% Surcharge For nicotine use, a factor of 1.15 is applied. The nicotine surcharge will be included for cigarettes, cigars, pipe smokers, chewing tobacco, nicotine patches and nicotine gum.
Minimum Annual Insurable Income	\$70,000
Minimum Policy Size	\$500/mo base

* To age 75 by exception.

** Class 1 and Class 2 participation cannot exceed 20% of all eligible employees.

*** 720 Elimination period not available with 2 and 5 year benefit periods. 720 day elimination period unavailable in some states regardless of benefit period.

Riders Available *(Issue ages 18-64 unless otherwise noted)*

Additional Monthly Benefit	Available to add additional indemnity to an in force policy only. Issue ages 18-70
Basic Residual Disability Benefit <i>("Residual" replaced by "Partial" in CA)</i>	Classes: 6-3, 6M-3M
Catastrophic Disability Benefit****	Classes: 6-3, 6M-3M
Cost of Living Adjustment <i>(3% Compound, 6% Maximum)</i>	Classes: 6-3, 6M-3M Issue ages 18-60
Enhanced Residual Disability Benefit <i>("Residual" replaced by "Partial" in CA)</i>	Classes 6-3, 6M-3M
Extended Own Occupation	Classes 6-3, 6M-3M Issue ages 18 – 63 for To Age 65 and 5 year benefit periods; 18 – 65 for To Age 67 benefit period; Not Available with 2 year BP
Retirement Protection Plus*****	Elimination Periods: 180 or 360 days Benefit Period: To age 65 Base Policy Elimination Periods: All available Base Policy Benefit Period: To age 65, Classes: 6-3, 6M-3M
True Own Occupation	Classes 6-3, 6M-3M Issue ages 18 – 63 for To Age 65 and 5 year benefit periods, 18 – 65 for To Age 67 benefit period; Available with 2 year BP

**** Unavailable in CA, CT and TX; maximum rider benefit may not exceed base benefit in NJ.

***** Not available in NJ.

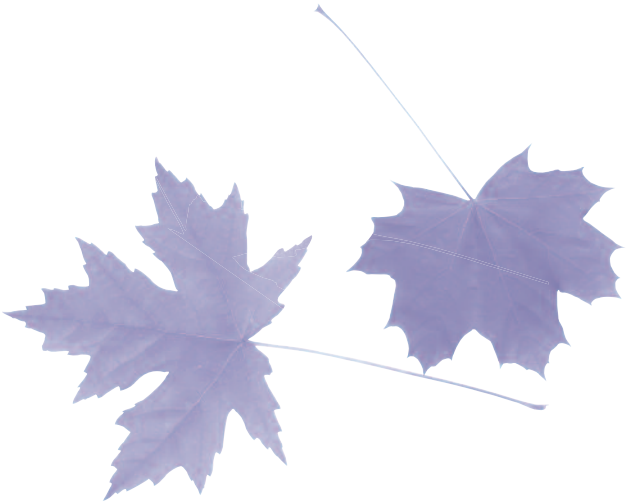
For more information on the availability of combinations of product features, refer to the Product and Information Manual (6502).

Multi-Life Discounts

The Income ProVider product is eligible for the following discounts:

- a) Non-Tobacco User Discount – Permanent 15% discount to the standard premium on a coverage level basis. This discount is available with GSI policies subject to an answer of “No” to the Tobacco Use question in the Individual Disability Income Insurance Enrollment Application.
- b) Employer-Sponsored Plan Discount – Permanent discount applied on the cumulative premium for the policy prior to any policy fee.

For Buy-Up policies, the discount applied will be the same as offered on the GSI companion policy.



Multi-Life Discounts

# of Eligible Lives	Employer Paid	Employee Paid	Medical Groups	How discount will be applied
5-9	15%	N/A	N/A	Each Employee must be a class 5 or 6 Each Employee must earn at least \$150,000/year if the benefit will be non-taxable to the insured Each Employee must earn at least \$100,000/year if the benefit will be taxable to the insured Must be corporate executives and/or in Accounting, Architectural, Computer or IT, Engineering, Legal, Advertising or other pre-approved industries Underwriter approval necessary if no group LTD in force
10-19	15%	N/A	15%	
20-99	25%	15%-20% or 25% with Select Occupation discount	15%	The Select Occupation discount may be utilized with Underwriting approval. One discount (25%) will be shown
100+ lives	35%	25%-30% or 35% with Select Occupation discount	15%	The Select Occupation discount may be utilized with Underwriting approval. One discount (35%) will be shown
5 or 10% Select occupation discount (additive)				Available with underwriting approval
5 or 10% Gender distribution adjustment				Required at underwriting discretion

Only one case-level discount can be issued per policy. However, a Select Occupation discount or rate reduction based on gender can be applied in addition to the Employer-Sponsored discount.

Policy Description

Please refer to the Annotated Policy or Income ProVider Product Manual for the complete set of Definitions and Contract Provisions.

Programs

Retirement Protection Plus Program

The Retirement Protection Plus (RPP) program provides disability insurance protection for qualified retirement plan contributions. The Income ProVider policy can be issued on a Guarantee Standard Issue (GSI) basis with an Extended Own Occupation Total Disability definition under the program to help protect employee and employer contributions. Individual participant's contributions as well as employer's match are required on the census for the RPP program. At the time of total disability, benefits are paid into an irrevocable trust. The trustee invests the funds at the direction of the insured and distributes them to the insured at age 65. Coverage is available as a rider on an Income ProVider policy or as a stand alone policy.

Policy Form	Income ProVider 1200 (01/11)
Issue Ages	18 – 60 (age last birthday)
Occupation Classes	6, 5, 4, 3, (non-medical markets) 6M, 5M, 4M, 3M (medical market)
Elimination Periods	180 days, 360 days
Benefit Periods	To age 65
Eligible Retirement Plans	401(k), 457, 403(b), Profit Sharing Plans, Simplified Employee Pensions (SEPS), IRAs and Roth IRAs, Keogh Plans and other Defined Contribution plans
Riders Available	Extended Own Occupation Rider, COLA 3%
Discounts	See Multi Life Discount table

Occupation class 4P will be available for AMB exercises only. Not available to new issues

Note:

- The RPP program is not a pension or retirement plan or a substitute for such a plan.
- The retirement plan must have been in effect and funded for at least one year. Non-Qualified Deferred Compensation Agreements may be considered on a case by case basis. A copy of such agreement is required for consideration.

Discounts

All current discounts allowable for the appropriate Income ProVider base policy form apply to policies issued through the RPP program.

Retirement Protection Plus Program Issue Limits

Maximum issue limits under the Retirement Protection Plus program may change from year to year as the federal annual defined benefit contribution limits are adjusted. Listed below are the limits for 2011.

Minimum Policy Size: \$500

2011 Issue Limits

Issue Age	Premium Payor	% of Contributions	Maximum Issue Limit*
18 - 49	Employee	100%	\$4,090
50 - 60	Employee	100%	\$4,550
18 - 49	Employer	133%	\$4,090
50 - 60	Employer	133%	\$4,550

Up to 15% of annual earned income (19% when employer paid) can be applied for without actual proof of retirement contributions. Written documentation from the employer with details of the retirement plan design (i.e., 410(k), 403(b), etc. and current company match formula is needed to complete applications. Requires a response of 15% or 19% to the application question, 3b “Qualified retirement plan annual contribution (including employer contributions)”.

Student Loan Protection Program

The Student Loan Protection program covers up to 100% of the monthly payment on student loan debt in the event of total disability up to a maximum of \$2,000 per month. GSI coverage is available on a case by case basis and is only available to eligible occupations that purchase, or already own, Berkshire or Guardian individual disability insurance with a minimum monthly benefit of \$1,500 for attorneys.

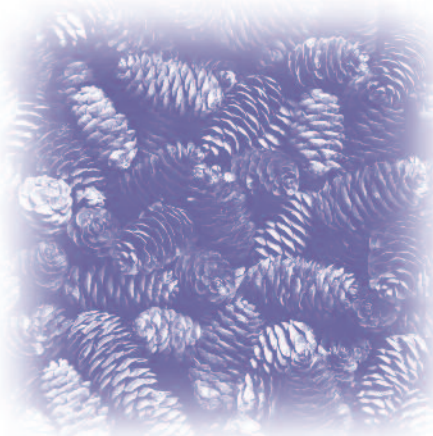
Eligible Occupations

- Attorneys

Student Loan Protection is available on Guardian Reducing Term Policy form AH55-A*. Program benefits are above regular issue and participation limits for individual disability insurance.

- Each loan obligation must be covered with a separate Reducing Term policy.
- Each policy covering a student loan must have a minimum benefit of \$500.
- Application instructions will be discussed as part of routine pre-enrollment discussions.

* Available in all states except Florida, Montana, North Carolina, South Carolina, Virginia



Policy Form	AH55-A*
Issue Ages	18 - 55
Occupation Classes	6
Elimination Periods	1, 2, 3, 6 or 12 months
Benefit Options	Terms from 5 to 30 years, not to exceed age 60
Renewability	Conditionally Renewable
Definition of Total Disability	Extended Own Occupation**
Minimum Policy Size	\$500 per month
Maximum Issue Limit	\$2,000 per month
Maximum GSI Limit	\$1,000 per month
Class of Risk	Standard
Premiums	Gender Distinct Level Rates
Premium Terms	Annual, Semi-annual, Quarterly, Monthly and Guard-o-matic automatic payment
Discounts	None available
Optional Riders	None available

* Available in all states except Florida, Montana, North Carolina, South Carolina, Virginia.

** Total disability means that, because of sickness or injury, the insured is unable to perform all the material and substantial duties of his or her occupation or profession; and is not actually at work in any occupation or profession.

General Multi-Life Information

When complete information about the employer and employees is received in the Multi-Life Case Unit, underwriters review the request and determine if an underwriting offer is available.

GSI offers are available for two groups:

Employer Pay

- There is a direct employer/employee relationship
- Employer pays 100% of the premium for all participants or
- Employer pays 50% or more of the premium for all participants
- 5 or more lives

Voluntary

- There is a direct employer/employee relationship
- Employer endorses the program offered by Berkshire
- Employee pays 100% of the premium or
- Employee pays 51% or more of the premium
- 75 or more eligible lives

Determining a Company's Multi-Life Business Profile

The following information is required by the Multi-Life Underwriter for offer consideration. Complete the Request for Proposal (using form #AA1226, available on BerkshireLifeTools.com) and include:

- The nature of the business
- The type of company (i.e. LLC, LLP, C Corporation, S Corporation)
- The nature of the eligible group (i.e. Executives, Partners, Lawyers)
- Information regarding existing coverage information (i.e. Group LTD)
- Information regarding competition for this sale

The following additional information is helpful to the underwriter and may be provided via email:

- The length of time the business has been in existence
- The financial stability of the business
- Mergers and Acquisitions
- Are voluntary benefits offered, and if so, what is the participation
- The enrollment timing — first enrollment best if off cycle from other benefits
- The producers' level of Multi-Life experience
- The producers' relationship with the company and experience rolling out other products with the company

Submit a copy of the booklet for any in force Group LTD with the Request for Proposal (RFP). This is required to assist in the risk analysis and assessment process to determine plan design. The DI Multi-Life Underwriter will require Group LTD experience for cases with 1,000 or more eligible lives and reserves the right to request the experience for smaller cases. The information must contain both Incidence and Duration reports.

Multi-Life Eligibility Factors

All applicants must be employed on a full-time basis year round. Employees are eligible for coverage if they are working continuously full time (minimum of thirty hours per week) for 90 days prior to the application date and employed by the same company on the date of policy delivery. Employees must be citizens of the United States or Canada or hold a permanent U.S. resident visa, and must work and reside in the United States.

Employees ineligible for coverage include those who

- are currently disabled or on claim
- have been disabled by what the Multi-Life underwriter determines to be a significant impairment within 90 days prior to the application date
- have been declined for disability coverage by Berkshire Life Insurance Company of America or The Guardian Life Insurance Company of America

Look for:

- Professional white collar service industries. (Construction, manufacturing and other blue/gray collar employees are ineligible.)
- Businesses that are at least two years old within a profitable and stable industry
- A proposed group where a significant portion of the incomes are high relative to the group LTD cap
- Incomes in excess of \$75,000 are most desirable
- Average age of the proposed group in the low to mid 40's, including a significant portion of highest income earners in this age range. (Groups with a significant portion of employees age 55 and over are not viewed as favorably.)
- Populations with 60% or more males

Employer Support

Premium sharing and payroll deduction demonstrate a level of commitment to the program by the employer. The employer's support is a key driver of successful enrollments.

Foreign Travel/Residence

Benefits will be limited to a total of twelve months while the insured resides outside the United States or Canada.

Occupational Underwriting

Proper classification of occupations is of primary importance in the disability income risk selection process. It is the basis for establishing the premium to be charged for the standard risk. Generally, a particular job is classified according to the occupational hazard presented by the actual duties performed. In addition to duties, several other factors influence the ultimate classification. Among these are: educational background, experience, working condition and environment, moral hazard, stability, size of organization, income level, time spent traveling, etc. In addition, consideration is given to company-wide and industry-wide claims experience. Determination of all classifications is the final decision of the Multi-Life Underwriter.

Job Title vs. Duties

In some instances; job title alone is not sufficient to determine proper classification, and it is necessary to require additional job description details. Census data should provide clarity of duties/responsibilities for occupations such as Director, Manager, and other generalized titles, e.g. Director of Finance or Office Manager.

Part Time Occupations

All applicants must be employed on a full time basis year round. Thirty hours per week is the accepted minimum standard for full time employment.

Business and Residence Address the Same (Home Based)

Insureds who use their home as their primary business location, leave the home on a regular basis to conduct business or have clients come to the home on a regular basis, are eligible for disability insurance under our usual underwriting guidelines.

General Occupation Class Descriptions

The occupations listed in this chart fall into 12 classes. Below is a general description of each class, with an alphabetical listing of the most often encountered occupations and their class.

If someone from an undefined occupation applies for coverage, the underwriter will utilize the class definitions and the merits of the case to determine the appropriate occupation class.

“M” classes are for individuals that are in the health care industry. These professions include, but are not limited to, physicians, dentists, pharmacists, optometrists, etc.

We will continue to monitor the performance of the portfolio. Any future occupation changes will be made in accordance with good risk management.

Class 6 & 6M

Includes the following occupations with the most favorable experience: actuaries, architects, attorneys, CPAs, engineers (degreed – office and administrative duties only), and corporate executives who meet the following requirements:

- employed full time in a business that is financially sound, has been in existence for five years, and has prospects for a stable future;
- works at a business location other than his or her private residence;
- the business has 10+ full time employees other than the owner, with at least five employees qualifying for occupation Class 5 or Class 4;
- daily duties are: office, managerial, administrative, or technical; little or no sales or travel, no physical or manual duties; and
- \$150,000 salary and bonus for the past two years.

Class 5 & 5M

Class 5 includes those professional and executive occupations that qualify for preferential classification and underwriting limits because of stability of employment and income; the demand for their service, educational, training and experience qualifications whose duties are primarily office-only, who would not be totally disabled if unable to travel, and meet the following requirements:

- employed full time in a business which is financially sound, has been in existence for five years, and has prospects for a stable future;
- the business has 5+ full time employees and cannot be supervising anyone with manual duties;
- \$100,000 salary and bonus for the past two years.

Class 4 & 4M

Those who do not qualify for Class 5 but are engaged in office, clerical, executive, professional or semi-professional occupations requiring a high degree of stability and responsibility. Duties generally limited to office, sales and travel with no manual duties involved.

- \$75,000 salary and bonus for the past two years.

Class 3 & 3M

Includes occupations that require more physical activity than Class 4, plus certain occupations which may not be hazardous but where the claim experience has not been the same as Class 4.

Class 2 & 2M

Includes occupations where light manual duties or skilled work are involved, including small businesses where the proprietor has specialized skills. These are uninsurable except in employer-sponsored situations with a mix of other occupation classes (at least 80% of participants must be classes 6/6M – 3/3M).

Class 1 & 1M

Includes occupations requiring heavy manual duties or where there are real accident or environmental hazards. These are uninsurable except in employer-sponsored situations with a mix of other occupation classes (at least 80% of participants must be classes 6/6M – 3/3M).

Mental and/or Substance Related Disorders Limitation

A 24-month mental and/or substance related disorders limitation is included on all policies issued in the states of California and Florida, as well as to applicants in all other states (except VT) in the following occupations: anesthesiologists/anesthetists (MD or DO), certified registered nurse anesthetists (CRNAs), emergency room physicians, pain management physicians, as well as medical residents declaring any of these specialties.

Move-Up Options

The Move-Up Option is used to recognize certain occupations that, through ownership, income level, stability, experience and business environment can be considered one classification higher. The occupations eligible to move up one class are indicated in the alphabetical occupation class listing, and the criteria necessary are indicated by letters of the alphabet under the column titled, "Move-Up Option."

Move-Up Option Criteria

- A. Employed full time in a business that is financially sound, has been in existence for five years, and has prospects for a stable future.
- B. Works at a business location other than his or her private residence;
- C. The business has 10+ full time employees other than the owner, with at least 5 employees qualifying for occupation Class 5 or Class 4.
- D. Daily duties are: office, managerial, administrative, or technical; little or no sales or travel, no physical or manual duties.
- E. Salary and bonus of \$150,000 for the past two years.
- F. Salary and bonus of \$100,000 for the past two years.
- G. Salary and bonus of \$75,000 for the past two years.
- H. Travel required less than 25% of time.
- I. Few or no selling duties involved.
- J. Supervisor of Class 4 risks only.
- K. Organization of at least five full-time employees and is not supervising anyone with manual duties.

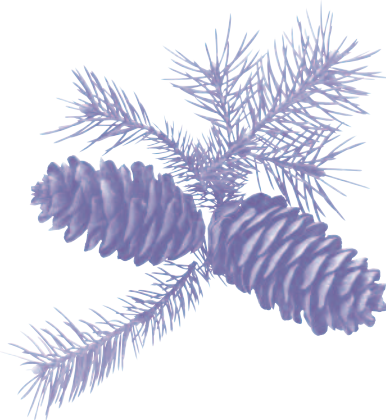
- L. Income in excess of \$100,000, at least five years in the insurance business, and has at least one of the following designations:
- CFP • CLTC • CPCU • RHU
 - ChFC • CLU • MDRT
- M. Has at least three years' experience in occupation.
- N. Owner of business for at least 5 years.
- O. 90% or more of duties are in office setting.
- P. Has at least five years' experience in occupation.*

* For medical specialties, experience does not include medical training in a residency program or fellowship.

All of the criteria indicated for a particular occupation must be met in order to qualify to move up. The Multi-Life Underwriting department reserves the right to require documentation of each criterion when deemed necessary.

Occupation Class Listing

Refer to pages 2-7 — 2-22.



Financial Underwriting

Income means the compensation that the insured receives for work or personal services, after business expenses, but before any other deductions. Income includes salaries, wages, fees, commissions, bonuses, pension and profit sharing contributions, other payments for personal services, and other compensation or income earned by the insured (or attributable to him or her) by a business in which he or she has an ownership interest.

Accurate salary and bonus information is critical to the success of a case from making the offer to a smooth enrollment. The employer census with salary and two years of bonus history, if applicable, should be submitted in excel format along with the Request for Proposal (RFP).

When insuring bonus or other earned variable income, we calculate insurable income based on the following:

- Two years of bonus income submitted – consider average of the two figures
- One year bonus income submitted – consider 75% of that figure to account for bonus fluctuation

Issue and Participation for Multi-Life

Once income is determined, the next step is to determine the amount of coverage participants are eligible for. For Multi-Life, this is done by applying the appropriate replacement ratio as shown in examples outlined in the following pages.

We will consider issuing a disability policy when the participant's total disability income coverage, both in force and applied-for in all companies (including Berkshire Life and Guardian), does not exceed the limits given in the Issue and Participation tables, subject to set maximums.

Issue means the maximum amount of monthly indemnity which we will consider issuing, including any disability already in force with Berkshire Life and Guardian.

Participation means the maximum amount of monthly indemnity applied for and in force with all companies, including Berkshire Life and Guardian.

The maximum Issue and Participation amounts include base, and if included on the policy, any issued Automatic Benefit Increase benefits, as well as any in force coverage.

Income ProVider Minimum Issue Limits

\$500

Income ProVider Maximum Issue Limits

Non Medical – Classes 6 - 1

Occupation Classification	Issue Ages (Determined by age last birthday)	Maximum Issue Limit	Maximum Participation with Group LTD and other carriers
6, 5	18-55	\$20,000*	\$30,000
6M, 5M, 4, 4M	18-64	\$16,000	\$25,000
	65+	\$10,000	\$15,000
3, 3M	18-64	\$16,000	\$25,000
	65+	\$7,500	\$10,000
2, 1	18-60	\$5,000	\$10,000
	61+	\$2,500	\$5,000

*Not available in California.

Calculating the Multi-Life Issue Amount

The Issue Limit is usually calculated in the Home Office via the Case Management System (CMS); however, it can be calculated manually. For Multi-Life, all benefit amounts are calculated using standard replacement ratios, 60% or 75% of gross monthly eligible income. First one must determine the taxation of any Group Long Term Disability (GLTD) benefit and the Multi-Life monthly benefit being calculated. If either of these benefits will be received on a taxable basis, 75% of monthly income is the appropriate replacement ratio. If there is no GLTD benefit or the GLTD benefit AND the Multi-Life benefit will be received on a non-taxable basis, the maximum replacement ratio is 60% of monthly income.

Example:

Dan has a salary of \$250,000. He works for a company that provides Group Long Term Disability insurance on a non-contributory basis. The plan provides a monthly benefit of 60% to a maximum of \$5,000. They have agreed to sponsor a voluntary Supplemental DI program with Berkshire. To determine the monthly supplemental disability income benefit that Dan can purchase, first calculate his GLTD benefit:

$(\$250,000/12) \times 60\% = \$12,500/\text{month}$, but Dan will receive \$5,000 of GLTD since that is the maximum of his plan. Since his GLTD benefit would be taxable on receipt, his maximum replacement ratio for Berkshire supplemental DI coverage is 75%. His maximum monthly total income replacement is \$15,625 or $(\$250,000/12) \times 75\%$. This is also the maximum limit that Berkshire will participate to, including all in force coverage. We must subtract his GLTD benefit from this maximum Participation Limit ($\$15,625 - \$5,000$). The result is Dan's maximum Issue Limit with Berkshire, \$10,625.

We can further calculate that Dan will qualify for the maximum Berkshire GSI offer of up to \$5,000/month. In addition, he is eligible to purchase an additional \$5,625/month of Berkshire Income ProVider DI coverage with full evidence of insurability. All of Dan's Berkshire Supplemental DI will be received on a non-taxable basis should he become disabled.

Income ProVider Rider Issue Limits

Catastrophic Disability Benefit (CAT) Rider

- Issue limits are outside of normal individual disability income issue and participation limits. Coverage may be up to, but not more than 100% of income from all sources, and the CAT rider can not exceed 40% of earned income.
- Minimum: \$300
- Maximum: \$8,000 per month of Catastrophic Coverage from all sources.

Retirement Protection Plus Rider Limits

Retirement Protection Plus Disability Benefit Rider*

Minimum: \$500

Maximums: (see table below)

Issue Age	Premium Payor	% of Contributions	Maximum Issue Limit
18 - 49	Employee	100%	\$4,090
50 - 60	Employee	100%	\$4,550
18 - 49	Employer	133%	\$4,090
50 - 60	Employer	133%	\$4,550

* Unavailable in NJ and NY.

For determination of over insurance for RPP only, the maximum issue limit cap for some physicians and dentists in classes 6/6M, 5/5M, and 4/4M is not applicable. Higher amounts may be considered on a case-by-case basis.

Up to 15% of annual earned income (19% when employer paid) can be applied for without actual proof of retirement contributions. Written documentation from the employer with details of the retirement plan design (401(k), 403(b), etc.) and current company match formula is needed to complete applications. Requires a “yes” response to the application question, “Do you participate in a qualified plan?”

Tax Treatment of Multi-Life Disability Income Policies

Disability income coverage purchased through the workplace can be more complicated than the individual sale because taxation is dependent on the form of business and ownership status of the proposed insured. For example, a W2 employee on a census has coverage offered on a voluntary basis. Since he/she will pay the premiums with after tax dollars, the benefits will be received tax free.

A partnership or S corporation may deduct the premiums for disability insurance paid on behalf of a partner or shareholder/employee with ownership interest of 2% or more. The partner or shareholder must include such premiums as part of their taxable income. Benefits paid under the policy will be received free of income tax.

In a C corporation, owners (stockholders) who work in the business are considered to be employees. Therefore, the corporation can deduct premiums paid under a Qualified Sick Pay Plan for coverage on the owner-employees – but the benefits will be taxable.

Disability Insurance Tax Guide *

Personal Disability Income Insurance

Premiums Paid By	Benefits Paid to	Policy-owner	Tax Treatment	
			Premiums	Benefits
Employee	Employee	Employee	Nondeductible (IRC Sec. 213)	<i>Tax-Free</i> (IRC Sec. 104)
Employer	Employee (including C corp. owners)	Employee	Deductible by employer (IRC Sec. 162) Employer-paid premium excluded from employee's taxable income (IRC Sec. 106)	<i>Taxable</i> Reported as Income (IRC Sec. 105)
Partnership, S Corporation	Partner, S Corp owner	Partner, S Corp owner	Deductible by Partnership or S Corp. Included in Partner's or S Corp owner's personal taxable income (Rev. Ruling 91-26)	<i>Tax-Free</i> (Rev Ruling 91-26)
Employee (under an Executive Bonus Plan)	Employee	Employee	Bonus paid to cover premium by employer is deductible. Bonus is included in employee's taxable income (IRC Sec. 162)	<i>Tax-Free</i> (IRC Sec. 104)

* This publication is offered for the purposes of education and information only and should not be considered tax or legal advice. Clients should consult their legal or tax advisor for information on their specific situation.

Offer Renewals

All GSI offers will be reviewed on an annual basis that is aligned with the enrollment period. Case performance is shared with the producer and employer. Most offers may be continued with validation of current request for proposal information. In some cases, a current census including all eligible employees, including those who accepted or declined the prior offer as well as newly eligible employees may be required. The Multi-Life Case Unit will contact the Sales Representative to begin the process prior to the selected enrollment dates agreed upon at the completion of the last enrollment.

Implementation/Enrollment

We offer industry leading implementation and enrollment capabilities. We focus on consumer education and enrollment support providing customized enrollment strategies and timelines for each case based on the plan design, number of eligible lives, employee type, and needs of the customer. Our two main methods of enrollment are via paper proposals and applications, and via secure online enrollment.

Paper enrollments are usually done for employer-paid cases or for smaller voluntary cases where producers will be meeting individually with eligible employees. Online enrollments are usually done for voluntary cases with more than 75 lives.

All Cases

In order to confirm an enrollment start date, the Multi-Life Case Unit Team requires a complete final census in the established template from the employer in addition to the signed offer letter.

Corporate Situs

Corporate Situs is the term used to indicate that the contract state for all employees is the state where the business maintains its headquarters. The same contract state leads to consistency in policy language and provisions for employers with employees located in multiple states as these can vary by state. The Corporate Situs state dictates the application and policy forms that clients will receive. Our cases are considered under the Corporate Situs guidelines.

For all Multi-Life business, producers must be licensed and appointed by Guardian in the state where the solicitation occurs, as determined by the state where the application is signed.

Licensing

The producer must be licensed in every state in which an application may be signed prior to the application being solicited and signed. This is necessary for both corporate situs and state specific cases. The Multi-Life Case Consultant will work directly with the producer to verify all licensing requirements have been met and to resolve any outstanding issues.

There are some situations where a producer will decide not to get licensed in a state where a participant is located. This normally occurs when there are only a few participants in a state. In this situation the Case Consultant will find a producer/wholesaler with a license in the necessary state and that producer/wholesaler will be listed as the selling agent for those participants. If the agent on the case later decides to get licensed in a state, the participant can be switched to the correct agent, but no past commissions will be paid. The agent will be paid commissions from his license date forward.

Contact agent licensing and commissions at Contracting and Licensing/TheGuardian.

Group Office Representatives

Because you must be affiliated with an Agency to sell individual Multi-Life DI product, Group Office representatives must be appointed to Agency 98. Your Multi-Life Implementation Team will work directly with you to complete any necessary paperwork.

Supplementary Information

Age Calculation

The method used to calculate the age of the applicant is:

- Age last birthday – Current age as of last birthday

Example: Applicant's Date of Birth is 11/1/1970

Today's date is 10/15/2010

Applicant's age (actual) is 39

Applications Solicited via Internet, Mail or Phone

Producers may solicit applications via internet, mail or phone, subject to the following conditions:

- The producer must be licensed (and appointed if required) in both the producer's resident state and the state in which the application is solicited and signed.
- The contract state will be the Corporate Situs state (explained previously) or state in which the applicant works – the application and all relevant forms must reflect this contract state.
- The Agent Statement must be completed and signed by the agent.
- The agent may not accept money and may not issue a conditional receipt.

For further details contact the Multi-Life Case Unit.

Policy Dating

- Multi-Life policies must be issued with a common date for all participants in the enrollment.
- Multi-Life policies are billed one month in advance.

Refund of Initial Premiums

Not Taken Policies

- Policy is issued but delivery does not occur: the initial premium is refunded to the premium payer.
- Policy was issued with amendments and delivery does not occur: the initial premium is refunded.
- Declined policy: the producer is contacted at the time of the declination to allow time for the applicant to be contacted. Any initial premium is refunded.

Replacements

When Berkshire issues a policy with the understanding that the existing coverage with another company will be terminated, the new contract will be issued with a health replacement exclusion requiring the policy owner's signature. The exclusion language specifies that the amount of insurance issued will be limited by the amount of in force indemnity that the Berkshire coverage is replacing. It further specifies that it is understood that the in force coverage will be terminated as a result of the issuance of the Berkshire contract.

It is the applicant's responsibility to terminate the existing coverage. Some states require additional replacement forms. Refer to BerkshireLifeTools.com for a current and complete list of forms by state.

Please remember: it may not be in the best interest of the policyholder to replace existing disability insurance coverage.

Temporary Coverage

Berkshire provides conditional temporary coverage up to the GSI amount beginning at 12:01 A. M. the day after the application date. Temporary coverage will end 60 calendar days after the Issue Date of the policy, should no premiums be received by then, or the date the policy premiums are received, whichever occurs earlier. If a policy is not issued, temporary coverage does not apply and was never in force.

Delivery Requirements

A delivery requirement is any requirement that is communicated at issue and must be received by the Multi-Life Case Unit to place the policy in force and pay commissions. Such requirements are amendments.

Reissues

Reissue requests can be submitted up to six months after the policy is issued. Thereafter, an in force policy change request must be submitted.

Disability income products underwritten and issued by Berkshire Life Insurance Company of America, Pittsfield, MA, a wholly owned stock subsidiary of The Guardian Life Insurance Company of America (Guardian), New York, NY, or provided by Guardian. Products not available in all states. Product provisions and features may vary from state to state.

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