

Any of your clients need disability insurance? Our annual directory is a good place to start the search

Individual Disability Insurance

BY LIANA CAMPOREALE

	Noncancelable?/	Policy DEFINITIONS										
Company ratings	Guar. renewable to 65?/ Renewable after age 65?	Total disability	Residual disability benefit	Presumptive disability benefit	Own occupation	Sickness	Injury	Waiver of premium	Exclusions/ limitations			
Assurity I	ife Ins. Co. •	Lincoln, Nebrasl	ka • 800-869-039	90 • www.assurity	.com • Persona	l Disability	Income Prote	ection (contin	ues on next page)			
A.M. Best: A- Fitch: NR Moody's: NR S&P: NR Weiss: B-	No/Yes/Yes	First 24 months after elimination period, the insured is unable to per- form duties of their own occupation; after 24 months, any occupation reasonably suited by education, training, and experience	Available by rider only; provides benefit equal to the percentage of lost income; minimum loss is 24% of prior earnings	Total benefits paid for the entire benefit period even if insured is able to return to work; benefits paid for loss of sight, speech, hear- ing, loss and severance o both hands, both feet, or one hand and one foot	Available by rider only; extends 24 months of own oc- cupation portion of definition of disabili- ty to 5 years	Illness, disease, or condition that originates after issue date	Accidental bodi- ly injury that happens while policy is in force	Policy provision, no additional premium; premiums waived after 90 days of total disability or elimina- tion period if longer	Exclusions: war and act of war; intentional self inflicted; attempting or committing a felony; ille- gal occupation,; normal pregnancy; Limitations: foreign travel, mental/ nervous drug and alco- hol; pre-existing condi- tions			
Berkshire	Life Ins. Co.	of America • Pitt	tsfield, Massachu	setts • 866-590-88	345 • www.the	berkshire.com	n • ProVider	Plus (contin	nues on next page)			
A.M. Best: A+ Fitch: NR Moody's: NR S&P: NR Weiss: NR	Yes/Yes/Yes	Top four classes: own occupation for entire benefit period; other classes: own occupa- tion for five years in same claim; after- wards unable to per- form in own occupation and not working in any occupation	Payable if sickness or injury incurs at least 20% income loss; 75% loss equals 100%; in first six months, min- first six months, min- mum 50% benefit; payable until revenue loss is less than 20% or residual benefit less than \$500 per month	Total disability presumed even if at work for total and complete loss of sight, hearing, speech, use of two limbs in their entirety; elimination peri- od waived; payable for entire benefit period	Regular occupa- tion(s) in which insured is engaged at time of disability; if insured's occupa- tion is limited to a single certified medical or dental speciality, that spe- ciality will be deemed his or her occupation	Sickness or dis- ease that is diagnosed and treated while policy is in force	Accidental bodi- ly injury that occurs while policy is in force	Premiums waived during disability after three months (or elimination period if shorter); those paid during elimination period will be refund- ed; also waived for three months after recovery; if disabled on policy anniver- sary, we will annual- ize waived premiums	Incarceration; loss of professional license; normal pregnancy cov- ered after 90 days or e l i m i n a t i o n period if later; 12- month limit on benefits if residing outside U.S. or Canada			
Illinois M	utual Life Ins	surance Co. • Peo	ria, Illinois • 800	-437-7355 • 800-	437-7355 • wu	vw.illinoismu	tual.com • (GR21 (contin	ues on next page)			
A.M. Best: A- Fitch: NR Moody's: NR S&P: Api Weiss: B	No/Yes/No	Own occupation inabili- ty to perform all sub- stantial and material duties of regular occu- pation for first five years or two years (depending on class); thereafter, any occupa- tion that might reason- ably be expected given education, training, and prior earnings	Inability to perform one or more of substantial and material duties of occupation or unable to do said duties for as long as required and loss of 20% or more of prior monthly income	Total and irrevocable loss of sight, hearing, or speech, use of both hands, both feet, or use of one hand and one foot; waiting period is waived	Occupation in which you are engaged at time of disability	Illness, disease, or physical condi- tion that mani- fests itself while policy is in force	Accidental bodily injury that is sus- tained while poli- cy is in force	After 90 days of con- tinuous disability, premiums will be waived during total disability and all pre- miums paid during first 90 days of dis- ability will be re- funded	normal pregnancy or			
Massachu	setts Mutual	Life Insurance Co	 Springfield, N 	Aassachusetts • 80	0-234-2865 •	www.massmi	utual.com •	Radius (cont	inues on next age)			
A.M. Best: A++ Fitch: AAA Moody's: Aa1 S&P: AAA Weiss: NR	Yes/Yes/No	Total disability when insured cannot perform main duties of his/her occupation, is not work- ing in any other occupa- tion, and is under a doctor's care	Partially disabled, is back to work in own occupation or another occupation, under a doctor's care and suffers at least a 20% loss of pre-disability income; includes recovery benefit	Considered to have pre- sumptive total disability even if working if following conditions begin while policy is in force: com- plete loss of speech, hear- ing in both ears, sight in both eyes, and loss of both hands, both feet, or one hand and one foot	See definition of total disability	Physical or men- tal illness that makes itself known while poli- cy is in force; includes trans- plant surgery that occurs after six months from pol- icy effective date and complica- tions of pregnan- cy or childbirth	ly injury that occurs while policy is in force	After 90 days of total and/or partial dis- ability, premiums waived for remainder of disability, premi- ums paid during that 90-day period will be refunded	War, declared or unde- clared; normal pregnan- cy or childbirth			

POLICY FEATURES AND BENEFITS		— MAX. MONTHLY BENEFITS AVAILABLE —			PREMIUMS			Unisex	COMMISSIONS	
ase olicy	Riders available	Age (male)	Non-medical underwriting	Medical underwriting	Available benefit periods	Age (male)	Annual premium ¹	onisex or sex- distinctive rates	Year	%
	sonal Disability Income Prote	<u> </u>	underwirtung	underwinding	penous	(male)	prennum	Tates	leal	/0
ehabilitation benefit	·Cost-of-living benefit	25	\$2,500	\$7,000	1 year,	25	\$1,065.00	Sex-distinct	1	50%
Regular occupation Survivor benefits	Future increase option Daily hospital confinement Premium refund benefit Residual partial disability benefit Social Security offset rider Catastrophic disability rider Non-can rider Home modification (no charge)	35 45 55	\$2,000 \$1,500 \$1,000	\$7,000 \$7,000 \$7,000	2 years, 5 years, to age 65	35 45 55	\$1,391.00 \$2,074.00 \$2,950.00		2-10 11+	10% 0%
Berkshire Life Ins. Co. of A	America • ProVider Plus									
Rehabilitation benefit	Cost-of-living benefit	25	\$3,000	\$15,000	2 years,	25	\$1,584.00	Sex-distinct;	1	50%-60%
apital sum benefit Vaiver of elimination period	Full recovery benefit Future increase option Indexing of prior earnings Residual partial disability Social Security offset rider Automatic increase rider Group disability insurance replacement Unemployment premium waiver option	35 45 55	\$3,000 \$2,500 \$1,500	\$15,000 \$15,000 \$15,000	5 years, to age 65, lifetime	35 45 55	\$2,124.00 \$3,298.00 \$4,457.00	Unisex for employees sponsored plans	2-10 11*	5%-17% 2%-14.5
llinois Mutual Life Insurar										
Partial benefits for self-employed Drgan transplant donor Rehabilitation benefit Regular occupation Artital disability benefit Survivor benefits Von-integrated base benefits 3% discount (5 or more lives) 3% discount for approved associations wailable for home-based occupations	Cost-of-living benefit Future increase option Premium refund benefit Residual partial disability benefit Social security offset rider First year monthly benefit Retroactive injury benefit Activities of daily living	25 35 45 55	\$2,500 \$2,500 \$1,500 \$1,000	\$8,000 \$8,000 \$8,000 \$8,000	6 months, 1 year, 2 years, 5 years, 10 years, to age 65	25 35 45 55	\$1,352.40 \$1,856.40 \$2,797.20 \$4,015.20	Sex-distinct	1 2-5 6-10 11+	50% 10% 7% 5%
Massachusetts Mutual Life										
Innuity/retirement option ndexing of prior earnings Rehabilitation benefit Recurring disability	Cost-of-living benefit Full recovery benefit Future increase option Residual partial disability benefit Social Security offset Short-term benefit Group supplement Partial disability Automatic benefit increase Managerial duties endorsement HIV	25 35 45 55	\$0 \$0 \$0 \$0	\$15,000 \$15,000 \$15,000 \$15,000	2 years, 5 years, 10 years, to age 65, age 67	25 35 45 55	\$1,280.60 \$1,724.40 \$2,789.80 \$4,322.10	Sex-distinct	1 2-7 8-10 11+	50% 10% 5% 2%

	Noncancelable?/			~~~	- POLICY DEFINITIONS				
company atings	Guar. renewable to 65?/ Renewable after age 65?	Total disability	Residual disability benefit	Presumptive disability benefit	Own occupation	Sickness	Injury	Waiver of premium	Exclusions/ limitations
Mutual of	Omaha • On	naha, Nebraska •	402-342-7600 • u	ww.mutualofomak	va.com • Disabi	lity Income P	rotection D7	7/CD77 (conti	nues on next pa
LM. Best: A Titch: NR Moodys: Aa3 &P: AA- Veiss: NR	No/No/Yes	During first 24 months fol- lowing elimination period, unable to perform materi- al and substantial duties of own occupation and receive medical treat- ment; after first 24 months, unable to per- form material and sub- stantial duties of any occupation for which you are reasonably suited be- cause of education, train- ing or experience and receive medical treatment	Proportional disability during first 24 months following elimination period due to sickness or injury unable to perform material and substantial duties of own occupation or are not able to per- form such duties for as much time as it would normally take; loss of monthy income at least 25% but not more than 75% of prior monthy income; you receive mental treatment	Presumed to be totally dis- abled if prior to age 75 or retirement, sickness or injury results in entire, irrecoverable and uncor- rectable loss of speech, hearing in both ears, sight in both eyes or the use of both hands, both feet or one hand and one foot. Benefits begin on earlier of the date of loss or day fol- lowing elimination period; total disability benefits will be paid to age 65 or for 12 months, which-ever is longer	See definition of total disability	An illness, disease or physical condi- tion which causes loss beginning while the policy is in force and is not excluded from coverage	Bodily harm which is direct result of an acci- dent or trauma that occurs while the policy is in force and is not related to sick- ness or any other cause	If sickness or injury results in a period of more than 90 con- tinuous days of total disability, will refund any premiums which became due and were paid during the 90-day period, and waive the payment of each premium which thereafter becomes due as long as total disabil- ity continues	Mental or nervous d orders are limited to lifetime maximum of months or length benefit period shown policy schedule, white ever is lesser
Ohio Nati	onal Financia	l Services • Cincin	nati, Ohio • 513-	794-6100 • www.o	ohionational.com	n • Renaissan	ice Non-Can	cellable (contin	nues on next pa
A.M. Best: A+ Fitch: AA- Moody's: A1 S&P: AA Neiss: B	Yes/Yes/No	Unable to perform sub- stantial and material duties of regular occupa- tion and not gainfully employed; payable for 2 years; rider extends ben- efit for length of benefit period	By rider: Loss of time or duties during waiting period; loss of income only after waiting period	Loss of use of 2 limbs, sight, speech, or hearing; waiting period waived; payable even if insured is working	Occupation (or occu- pations if more than one) the in-sured is regularly en-gaged in at the time of dis- ability	Sickness diag- nosed or treated while the policy is in force	Accidental injury sustained while policy is in force	Premiums waived after total and/or residual disability has continued 90 days, or waiting peri- od if shorter; premi- ums paid during waiting period are refunded	No income paid if disati ty due to war, or act of w or for commission of crime; or for incarcerati income limited to cumu tive total of 24 months disability is due to men disorder or substan abuse
an-Amer	ican Life Insu	rance Co. • New	Orleans, Louisiana	• 877-939-4500	• www.panamer	ricanlife.com	• Income Pro	otector (conti	nues on next pa
A.M. Best: A1 Fitch: NR Moody's: A3 S&P: Aa Neiss: C+	Yes/Yes	Not able to work in regu- lar occupation first 5 years then not working at any job for pay under care of physician	Loss of income at least 20% due to disability	Loss of use of both hands, both feet, one hand and one foot, loss of vision, hearing or speech	Occupation in which working at time dis- ability begins	Disease or illness that first mani- fests while policy is in force	Accidental bodily injury that oc- curs while policy is in force	After 90 days of total disability from same or related causes while policy is in force; waive premi- ums and refund pre- miums paid during 90 days	Attempted suicide intentionally self-infli ed injuries; injury or si ness incurred in co mission of a felony; a or accidents of war; a injury or sickness tt first manifests itself d ing services with arm forces
The Princ	ipal Life Insu	rance Co. • Des M	loines, Iowa • 800)-654-4278 • wwu	principal.com	• Disability S	olutions-700	Series (contin	nues on next pa
A.M. Best: A+ Fitch: AA Moody's: Aa3 S&P: AA Weiss: NR	Yes/Yes/No	During "your occupation period", insured is not working and unable to perform substantial and material duties of own occupation; after "your occupation period", insured is unable to work in any occupation reasonably suited to insured by education, training, and experience	Available through three optional riders; insured is not totally disabled and solely due to injury or sickness, unable to perform some, but not all substantial and material duties of own occupation, or ability to to work in any occupa- tion is restricted and has a loss of earnings equal to or greater than 20%	Any injury or sickness resulting in total loss of use for any and every purpose or activity with- out any possibility of recovery of: power of speech, hearing in both ears, sight in both eyes, or use of both hands, both feet, or one hand and one foot	Profession(s) or occupation(s), not a specific job(s) or a job with a certain employer, that in- sured was actively working in at start of disability	Sickness or dis- ease that mani- fests itself while policy is in force	Accidental bodi- ly injury that occurs while policy is in force	If insured becomes disabled for lesser of 90 days or the elimi- nation period, prems. paid for coverage after date disability began are refunded, and payment of prems. that come due during disability are waived	Intentional self-inflict injury, attempt to co mit a criminal ar involvement in ille activity, suspension surrender of professi al/occupational licer or certification, act military service durin, military action
UnumPro	vident Corp.*	• Chattanooga, 7	Tennessee • 800-77	76-8543 • www.un	umprovident.co	om • The Inco	ome Series	(conti	nues on next pa
Provident Life	Yes/Yes/Yes nderwritten by and Accident, , where it is nd Casualty	Due to injury or sickness, unable to perform mate- rial and substantial duties of insured's occu- pation and not engaged in any other occupation; must be receiving physi- cian's care; Your occupa- tional period available up to full benefit period	Unable to perform one or more of material and substantial duties of your occupation, un-able to perform them for as long as normally re- quired to perform them; must be receiving physi- cian's care; after elimina- tion period, must also incur a loss of earnings of at least 20% while en- gaged in this occupation or any occupation	Presumptive disability benefits are available under optional Cat- astrophic Disability Benefit Rider	performed in nation- al economy, rather	Sickness or dis- ease that first manifests itself after effective date and while policy is in force; includes disability from surgery per- formed to im- prove appearance or prevent disfig- urement or to transplant parts of the body to	Accidental bodi- ly injury that occurs after effective date and while policy is in force	After 90 days of dis- ability resulting from injuries or sickness not excluded from coverage, will refund any premiums for your policy that were due and paid while dis- abled; waived pay- ment of premiums that thereafter be- come due for as long as disability contin- ues, but beyond maxi-	War; act of war; s pension, revocation surrender of professi al license; normal pr nancy or childbirth c ered after 90 days disability; commissi or attempt to commi crime or engage in illegal occupatio intentionally self-infli ed injuries

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POLICY FEATURES AND BENEFITS		— MAX. MONTHLY BENEFITS AVAILABLE — -			PREMIUMS				COMMISSIONS	
Base policy	Riders available	Age (male)	Non-medical underwriting	Medical underwriting	Available benefit periods	Age (male)	Annual premium ¹	Unisex or sex- distinctive rates	Year	%
Mutual of Omaha • Disab	ility Income Protection D77	/CD77								
Organ transplant donor Indexing of prior earnings Rehabilitation benefit Residual partial disability benefit Short-term benefits Survivor benefits Specific injury benefits Presumptive total disability benefits Recurrent loss Waiver of premium	Cost-of-living benefit Future increase option Indexing of prior earnings Premium refund benefit Residual partial disability Social Security first year coverage Social Security offset rider Association marketing rider (15% premium discount) 60-month own occupation rider	25 35 45 55	NA NA NA NA	\$15,000 \$15,000 \$15,000 \$15,000	6 months, 1 year, 2 years, 5 years, 10 years, to age 65	25 35 45 55	\$1,323.06 \$1,708.71 \$2,510.58 To age 65-benefit period not available	Sex-distinct	1 2-10 11+	50% 10% 5%
Ohio National Life Insurat	nce Co. • <i>Renaissance Non-</i>	Cancella	ble							
Organ transplant donor Rehabilitation benefit Regular occupation Cosmetic surgery 365-day recurrent disability Stop and go waiting period	Cost of living benefit Full recovery benefit Partial benefits for self-employed Future increase option Daily hospital confinement Indexing of prior earnings Premium refund benefit Regular occupation Residual partial disability benefit Social Security offset rider Vaiver of waiting period while hospital confined Yearly renewable term	25 35 45 55	\$3,000 \$3,000 \$2,000 \$500	\$12,000 \$12,000 \$12,000 \$10,000 max. for physicians and dentists; and for in CA and FL	•	25 35 45 55	\$1,245.60 \$1,720.90 \$2,993.50 \$4,385.80 Regular occupation and residual include	Sex-distinct	1 2-10 11+	50% 10% 5% (service fee)
Pan-American Life Insuran	ce Co. • Income Protector									
Full recovery benefit Organ transplant donor Indexing of prior earnings Rehabilitation benefit Regular occupation Cosmetic surgery Survivor benefits	Cost-of-living benefit Future increase option Daily hospital confinement Hospital benefits Premium refund benefit Residual partial disability benefit Social Security first year coverage	25 35 45 55	\$3,000 \$3,000 \$2,000 \$1,000	\$15,000 \$15,000 \$15,000 \$15,000	1 year, 2 years, 5 years, to age 65	25 35 45 55	\$1,196.40 \$1,839.00 \$3,022.00 \$4,187.00	Sex-distinct	1 2-10 11+	60% 15% 10%
The Principal Life Insurance	ce Co. • Disability Solutions	-700 Ser	ies							
Organ transplant donor Rehabilitation benefit Short-term benefits Survivor benefits Recurring disability benefit Capital sum benefit Interrupted elimination period	Cost-of-living benefit -full recovery benefit -Partial benefits for self-employed -Future increase options -Indexing of prior earnings -Regular occupation -Residual partial disability benefit -Social Security offset rider -Benefit update -Extended total disability benefit	25 35 45 55	NA NA NA NA	\$15,000 \$15,000 \$15,000 \$15,000	2 years, 5 years, to age 65	25 35 45 55	\$1,397.20 \$1,883.00 \$3,165.40 \$5,306.00	Sex-distinct	1 2-5 6-10 11+	45-50% 10-15% 5-7% 3%
UnumProvident Corp.• Th	e Income Series									
Full recovery benefit Organ transplant donor Future increase options Indexing of prior earnings Rehabilitation benefit Regular occupation Converts to nursing facility at age 65 Residual partial disability benefit Cosmetic surgery Social Security offset rider Short-term benefits	Cost-of-living benefit Future increase options	25 35 45 55	\$15,000 \$15,000 \$15,000 \$15,000	\$25,000 \$25,000 \$25,000 \$25,000	2 years, 3 years, 5 years, to age 65, to age 67	25 35 45 55	\$1,427.93 \$2,059.62 \$3,352.49 \$5.003.25	Both	1 2-5 6-10 11+	50%-70% 5%-17.59 2.5%-12. 2%-5%