

# Provider Choice Competitive Highlights

Provider Choice product offerings utilize one core base policy with optional provisions and riders to help provide the coverage that will best meet the needs of your client.

The following are competitive highlights of Provider Choice Premier package when competing with American Medical Association Group. For additional information, optional product selections, and more competitive advantages, see the detailed descriptions on the following pages.

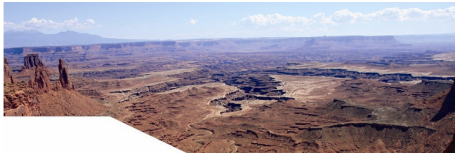
Competitive Highlights of Provider Choice Premier Package vs. American Medical Association Group		
Provisions	Provider Choice - Premier Package (Form 1800)	American Medical Association Group Plan (United States Life)
<b>Definition of Total Disability</b>  (See full detailed comparison for alternative options)	True Own Occupation for the full benefit period – available to all occupation classes <ul style="list-style-type: none"> <li>Specialty Occupation – (available to Dentists and those not eligible for Enhanced Medical Specialty)</li> </ul> Enhanced Medical Specialty True Own Occupation - (available to all medical occupations without the Graded Lifetime Benefit For Total Disability Rider)	True Own Occupation is not available
<b>Enhanced Partial Disability Benefit</b>  (See full detailed comparison for alternative options)	15% loss of income. For the first 12 months of partial disability, the benefit will equal the lost income dollar for dollar up to the monthly benefit amount, or 50% of the monthly benefit, whichever is greater.	20% loss of income due to the disability. Total disability benefit must have been paid to qualify for residual.
<b>Recovery</b>	<b>Enhanced Partial Recovery Provision</b> – a period of recovery with a 15% loss of prior income which is solely due to sickness or injury that caused the disability is treated the same as partial disability and may complete the elimination period.	Not available
<b>Waiver of Premium</b>	Waives premiums for six months after disability ends.	Waiver ends when benefits end.
<b>Waiver of Elimination Period</b>	Waives elimination period for a covered disability within five years of a prior disability that lasted at least six months and a benefit was paid, and you remain continuously disabled for at least 30 days.	Not available
<b>Presumptive Disability Benefit</b>	Loss need not be irrecoverable for presumptive benefits and elimination period is waived	Total and irrecoverable loss.
<b>Hospice Care Benefit</b>	Waives the elimination period if under a physician-ordered plan of care for hospice services.	Not available

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# Provider Choice Detailed Feature Comparisons

Provision		Provider Choice Form 1800	American Medical Association Group Plan (United States Life)
Non-cancellable & Guaranteed Renewable to 65/67	✓	To Age 65 or Age 67	No – rates may be adjusted for the entire group depending on the plan experience.
Conditionally Renewable after 65/67	✓	For life	Yes, as long as you are a physician under the age of 75 (not retired), pay premiums when due, and the group policy remains in force.
Benefit Periods	✓	To age 70, to age 67, to age 65, 10 years, 5 years, 2 years	To age 65
Elimination Periods		30, 60, 90, 180, 360, or 720 days	60, 90, 180 or 365 days
Modified Own Occupation Definition of Total Disability		<p><b>Two Year Modified, then any occupation thereafter</b></p> <p>Until we have paid benefits for two years in the same claim, solely due to injury or sickness you are not able to perform the material and substantial duties of your occupation and you are not gainfully employed. Thereafter, solely due to injury or sickness you are not able to perform the material and substantial duties of any occupation for which you are or become reasonably suited by your education, training or experience.</p>	<p>If you are unable to perform the duties of your own medical specialty, benefits can be payable for up to age 65. Upon returning to work in any occupation residual benefits are payable.</p>

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Provision	Provider Choice Form 1800	American Medical Association Group Plan (United States Life)
<p><b>True Own Occupation Definitions of Total Disability</b> ✓</p>	<p><b>True Own Occupation</b> (Full Benefit Period) Total disability or totally disabled means solely due to injury or sickness you are not able to perform the material and substantial duties of your occupation, even if you are gainfully employed in another occupation.</p> <p><b>Specialty Occupation</b> (Available to all Dentists and medical occupations not eligible for Enhanced Medical Specialty language)</p> <ul style="list-style-type: none"> <li>If you have limited your occupation to the performance of the material and substantial duties of a single medical specialty or to a single dental specialty, we will deem that specialty to be your occupation.</li> </ul> <p><b>Enhanced Medical Specialty True Own Occupation</b> (Available to medical occupation classes, without the Graded Lifetime Benefit Rider) We will consider you totally disabled, even if you are gainfully employed in your practice or any other occupation, if:</p> <ul style="list-style-type: none"> <li>you are a medical doctor or doctor of osteopathy and more than 50% of your income is earned from hands-on patient care, and you are unable to provide hands-on patient care due to disability; or</li> <li>you are a medical doctor or doctor of osteopathy and more than 50% of your income is earned from performing surgical procedures, and you are unable to perform surgical procedures due to disability.</li> </ul> <p><b>Two Year True Own Occupation, Modified thereafter</b> (Available to all occupation classes) Until we have paid benefits for two years in the same claim, solely due to injury or sickness you are not able to perform the material and substantial duties of your occupation, even if gainfully employed in another occupation. Thereafter you are not able to perform the material and substantial duties of your occupation and you are not gainfully employed.</p>	<p>Not available</p>

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<b>Waiver of Premium</b>	<p>✓</p> <p>Premiums are waived during periods of disability after the elimination period is met. Premiums paid that are for the period of disability are refunded. Premiums are waived for six months after disability ends.</p>	<p>Once claim payments begin, any premium becoming due will be waived; no further premiums will be due while you remain disabled.</p>
<b>Recurrent Disability Benefit</b>	<p>After a period of compensable disability ends, a subsequent disability will be considered a continuation of the previous disability if it arises from the same cause or causes and you have returned to gainful employment full time for less than 12 months (6 months in VT and VA) following the previous disability. No new elimination period will be required.</p>	<p>Successive periods of disability occurring after the elimination period, which are due to the same or related causes and are not separated by return to performance of your occupation for 12 months or more during which no benefits are payable shall be considered as a continuation of previous period of disability for purposes of the group policy.</p>
<b>Waiver of Elimination Period</b>	<p>✓</p> <p>Elimination period will be waived if disabled within five years after the end of the previous disability which lasted more than six months for which benefits were paid (regardless of cause), and you remain continuously disabled for at least 30 days.</p> <p>Elimination period is waived also for presumptive or recurrent disability, or if receiving hospice care.</p>	<p>For presumptive and recurrent disabilities only</p>
<b>Presumptive Disability Benefit</b>	<p>✓</p> <p>Need not be irrecoverable. Elimination period will be waived.</p>	<p>Total and irrecoverable loss. Elimination period will be waived.</p>
<b>Enhanced Portability Option (GSI Only)</b>	<p>✓</p> <p>Within 90 days of leaving your employer, you have a one-time option to increase coverage up to the maximum GSI offer without evidence of medical insurability. Financial eligibility is required.</p>	<p>Not available</p>

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<b>Hospice Care Benefit</b>	✓ We will waive the elimination period and benefits will begin to accrue from the date a plan of care is initiated by a physician for hospice services through a member of the National Hospice and Palliative Care Organization.	Not available
<b>Enhanced Partial Disability Benefit</b>	✓ Gainfully employed and not totally disabled, but solely due to an injury or sickness, income loss is at least 15% of prior income. During the first 12 months of a partial disability we will pay the Enhanced Initial Monthly Benefit which is equal to your loss of income, less any other individual disability benefits received or eligible to receive on policies in force on or before the effective date of the rider, or 50% of the monthly benefit, whichever is greater, not to exceed the policy's monthly benefit. 75% or more loss = 100%.  Pre-disability indexing is tied to CPI-U, no cap.  <b>Recovery</b> – we will consider you partially disabled, even if you are no longer disabled, so long as you have a 15% loss of income and the loss is solely due to the injury or sickness that caused your partial disability.	Not Available. See Basic Partial Disability Benefit

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Provision	Provider Choice Form 1800	American Medical Association Group Plan (United States Life)
<b>Basic Partial Disability Benefit</b> ✓	<p>You are gainfully employed and are not totally disabled, but solely due to injury or sickness you have a loss of income of at least 20% of prior income; and either you are unable to perform one or more of the material and substantial duties of your occupation; or you are not able to perform them for the length of time they normally require. During the first six months of partial disability, we will pay 50% of the monthly benefit or the actual percentage of lost income, whichever is greater. 75% or more loss = 100%.</p> <p>Predisability indexing is tied to CPI-U, no cap.</p> <p><b>Recovery</b> – we will pay you a lump sum recovery benefit equal to two times the monthly benefit immediately following a period of partial disability, if your disability ends within 12 months after satisfying the elimination period, and you are gainfully employed full time immediately after your partial disability ends.</p>	<p>This plan allows you to make a gradual transition back to full-time employment following a covered total disability. You can receive a residual benefit if you return to work on a part time basis in your own specialty or any other specialty or occupation if your monthly income is reduced by at least 20% and you first receive benefits for total disability. During the first six months of residual disability the benefit will be a proportionate benefit or 50% of the monthly benefit for total disability, whichever is greater.</p> <p>Insured must first receive benefits for total disabled in order to qualify for a residual benefit.</p> <p><b>Recovery</b> - None</p>
<b>Short Term Residual Disability Benefit</b> ✓	<p>You are gainfully employed and you are not totally disabled, but solely due to injury or sickness, you are unable to perform one or more of the material and substantial duties of your occupation; or are unable to perform them for more than one-half of the time normally required. We will pay 50% of the monthly benefit for six months in the same claim.</p> <p>You must remain totally disabled for the duration of the elimination period to qualify for residual disability benefit.</p>	<p>Not available</p>
<b>Automatic Benefit Enhancement</b> ✓	<p>Automatic 4% compounded increases. Renewable every 6 years if you are not disabled. Refusal of two consecutive increases forfeits any future increases and the rider terminates.</p>	<p>Not available</p>

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<b>Future Increase Option</b>	<p>✓</p> <p>Financial eligibility required; annual options to age 55 and special option date if group LTD coverage terminates or for a company declared date.</p> <p>Maximum of two times the base benefit plus in-force coverage with Berkshire and Guardian; three times the base benefit for medical/dental residents and first year physicians and dentists applying under the Special Limits for New Professionals Program.</p> <p>An option may be exercised when you are disabled but benefits under the option will only become payable for a new and separate disability.</p> <p>Before age 45, can exercise up to the full amount remaining; from age 45 to age 55 up to 1/3 of the original amount or, if less than \$1,000 remains or loss of group LTD, the full amount can be exercised.</p>	<p>Available at application if insured is under age 40, at no extra cost. May be exercised once during the first 3 years of coverage or up to 40<sup>th</sup> birthday, whichever comes first.</p>
<b>Benefit Purchase Option</b>	<p>✓</p> <p>The insured must purchase at least 75% of eligible benefits at the time of policy issue for this no cost rider to be added to the policy.</p> <p>Options to purchase additional coverage are available every 3 years up to age 55 with evidence of financial eligibility. Maximum on each option date is determined by then current I&amp;P limits. A Special Benefit Purchase option is available if group LTD coverage is discontinued, or insured is no longer eligible to participate in employer's group LTD, or insured has at least a 50% increase in income.</p> <p>Benefit Purchase Options are not available while disabled.</p>	<p>Not available</p>

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<b>Enhanced Catastrophic Disability</b>	<p>✓</p> <p>Due to injury or sickness you are:</p> <ul style="list-style-type: none"> <li>unable to perform two or more of the activities of daily living without human standby assistance; or</li> <li>severe loss in cognitive capacity; or</li> <li>irrecoverably (presumptive) disabled.</li> </ul> <p>At the end of each 12 months of catastrophic disability the benefit will be adjusted by a fixed 3% compounded adjustment factor up to two times the original benefit. Not available in California, Connecticut or Texas.</p>	<p>Should you lose the ability to perform two or more activities of daily living – bathing, dressing, toileting, transferring and/or eating – you can receive this monthly benefit in addition to your base monthly disability benefit.</p>
<b>Basic Catastrophic Disability</b>	<p>✓</p> <p>Due to injury or sickness you are:</p> <ul style="list-style-type: none"> <li>severe loss in cognitive capacity; or</li> <li>irrecoverably (presumptively) disabled.</li> </ul>	<p>Not available</p>
<b>Cost of Living Adjustment Benefit</b>	<p>✓</p> <p>Three optional riders:</p> <ul style="list-style-type: none"> <li>Guaranteed 3% compounded; or</li> <li>Compounded, CPI tied, 6% maximum with a 3% minimum; or</li> <li>4-Year Delayed, guaranteed 3% compounded</li> </ul> <p>No cap; once disability benefits end, increases of \$300 or more will be added to the policy's monthly benefit without additional premium.</p>	<p>Not available</p>
<b>Lump Sum Disability Benefit</b>	<p>✓</p> <p>A lump sum disability benefit equal to 35% of all contributing payments (cumulative benefits paid for all periods of total and/or partial disability) up to age 60 will be payable at age 60. The rider must be in force and the sum of the contributing payments must be equal to or greater than the qualifying amount shown on the schedule page (12 times the monthly indemnity issued).</p>	<p>Not available</p>

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<b>Student Loan Protection</b>	✓ Provides a reimbursement of student loan payments while the insured is totally disabled. Coverage is available for a period of ten or fifteen years from the policy date. When a qualifying total disability occurs, benefits are only payable for the remaining portion of the ten or fifteen year term that has not elapsed.	Loan Payment Benefit – if totally and permanently disabled prior to age 45, a loan payment benefit will be paid to the financial lending institution for loans incurred for medical school education up to a maximum of \$200,000.
<b>Retirement Protection Disability Benefit</b>	✓ Available as a stand-alone policy or as a rider on a policy. It provides a benefit when you are totally disabled and not gainfully employed. The benefit is paid to a trust and the trust assets become available to the insured at policy expiry.	Not available
<b>Serious Illness Supplemental Benefit</b>	✓ If you are totally disabled due to Cancer, Stroke or Heart Attack an additional benefit, equal to 50% of the monthly benefit, will be payable for a maximum of 12 months during the life of the policy.	Not available
<b>Occupational Rehabilitation, Modification and Access Benefits</b>	✓ The expense may be paid for an agreed upon plan for occupational rehabilitation or modification and access to help insured return to gainful employment in their occupation.	Rehabilitation benefit only.

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<p><b>Mental and/or Substance-Related Disorders Benefit Limitation</b></p>	<ul style="list-style-type: none"> <li>• Full benefit period; or</li> <li>• A 24-month maximum benefit for the life of the policy.</li> </ul> <p>The 24-month maximum benefit for mental and/or substance-related disorders will be applied to all contracts issued:</p> <ul style="list-style-type: none"> <li>– to Anesthesiologists, Anesthetists (MD, DO &amp; CRNA), Emergency Room Physicians, Pain Management Physicians (N/A in Vermont);</li> <li>– in CA;</li> <li>– on a guaranteed standard issue basis as a result of a Group conversion (N/A in Vermont); or</li> </ul> <ul style="list-style-type: none"> <li>• A six-month maximum benefit for the life of the policy.</li> </ul>	<p>All states: 24 months maximum benefit for mental/nervous/substance abuse.</p>
<p><b>Exclusions and Limitations</b></p>	<p>For:</p> <ul style="list-style-type: none"> <li>• Military training, military action, military conflict, or war, whether declared or undeclared, while serving in the military or contracted services;</li> <li>• Any period of time in which insured is incarcerated;</li> <li>• Commission of, or attempt to commit, a criminal offense as defined under local, state, or federal law;</li> <li>• Engagement in an illegal occupation, or professional misconduct;</li> <li>• Suspension, revocation or surrender of professional or occupational license or certification;</li> <li>• Intentionally self-inflicted injury;</li> <li>• During the first three months of disability or the elimination period, if longer, from normal pregnancy or childbirth;</li> <li>• Loss excluded by name or specific description.</li> </ul>	<p>For:</p> <ul style="list-style-type: none"> <li>• periods of incarceration;</li> <li>• suspension, revocation or surrender of professional license;</li> <li>• self-inflicted injury, or attempted suicide;</li> <li>• war or act of war;</li> <li>• use of any narcotic drug or other controlled substance not prescribed by a licensed physician, and used for a bonafide medical condition.</li> </ul>

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<b>Outside the US or Canada Limitation</b>	Benefits for disability will be limited to 12 months during your lifetime unless you are living full time in the US or Canada for at least six consecutive months in each calendar year.	Unknown
<b>Pre-Existing Condition Limitation</b>	We will not cover loss that begins in first two years after the effective date from a pre-existing condition.  A 3-month, 6-month, 12-month or no Pre-Existing Condition Limitation Endorsement may be applied to policies issued as part of a Guaranteed Standard Issue offer.	Unknown
<b>Additional Benefits/Riders Available</b>	Social Insurance Substitute Rider Suspension During Unemployment Suspension for Active Military Service Supplemental Benefit Term Rider Unemployment Waiver of Premium Rider	Conversion Option

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Hours: 8:00 a.m. – 6:00 p.m. ET  
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By e-mail: [product\\_support@berkshirelife.com](mailto:product_support@berkshirelife.com)

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