



Disability Income ChoiceSM

Portfolio



AGENT & UNDERWRITING GUIDE

DI Choice
DI Choice at Work

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Contact Information

Application Submission

Records/Mailing Processing Center
9330 State Hwy. 133
Blair, NE 68008-6179
Fax: 402-997-1804

Policy Delivery Requirements
Fax: 402-997-1905

Pending Application Requirements
Fax: 402-997-1805

Mutual of Omaha Licensing

Phone: 800-867-6873
Hours: 8 a.m. to 4:30 p.m. Central time Monday – Friday
Fax: 402-997-1830
Email: contractsandappointments@mutualofomaha.com

Sales Support

Phone: 877-617-5589 or 800-693-6083
Hours: 7:30 a.m. to 4:30 p.m. Central time Monday – Friday
Email: sales.support@mutualofomaha.com

- Appointments
- Contracting & Licensing
- Proposals
- Sales/Product Support

DI Service Office Claims

Phone: 800-268-6443
Hours: 7 a.m. to 5 p.m. Central time Monday – Friday

Multi-Life Underwriting Coordinator

Phone: 877-778-0838
Fax: 402-997-1893
Hours: 8 a.m. to 4:30 p.m. Central time Monday – Friday
Email: multilife@mutualofomaha.com

- Case Quoting
- Group Approval
- Multi-Life Inquiries

Product Guidelines

Accident Only Disability

Benefit Period (Months)	Elimination Period (Days)	Issue Ages	Occupational Classes
3, 6, 12, 24	0, 7, 14, 30, 60, 90	18-61	6A, 5A, 4A, 3A, 2A, 1A, S

Premium Structure

- Individual – unisex
- DI Choice at Work – unisex

Premium Savings

If your client is a member of a qualifying association or is self-employed, they may qualify for a premium savings.

Renewability

This product guarantees the right to continue the coverage until age 67. During that time, we cannot cancel the policy as long as the required premiums are paid when due.

Maximum Benefit Amounts

The maximum monthly benefit amount available is \$5,000.

Total Disability Income Benefit

If an injury prevents your client from performing the material and substantial duties of their regular occupation, and they aren't gainfully employed in another occupation, we will pay a monthly benefit once the elimination period has been met.

Partial Disability Benefit

If an injury prevents your client from performing the material and substantial duties of their regular occupation for more than 50 percent of the time usually spent in the daily performance of such duties, we will pay 50 percent of the total disability monthly benefit. These benefits commence after the elimination period has been satisfied and are payable for up to six months.

Survivor Benefit

If your client dies while they are disabled, we will pay their beneficiaries a lump sum amount equal to three times the total disability monthly benefit payable at the time of their death.

Recurrent Disability

If a related disability occurs within six months of returning to full-time employment, we will consider it a recurrent disability. A new elimination period will not need to be satisfied and the same benefit period will continue.

Presumptive Total Disability

We will presume your client to be totally and permanently disabled if an injury results in their complete and irrecoverable loss of hearing, speech, sight or use of both hands, both feet or one hand and one foot. We will pay your client total disability benefits for the full length of the benefit period even if they return to work in another occupation. We also will waive the elimination period.

Waiver of Premium

We will waive premium for the coverage and all optional riders after your client is disabled for 90 days. We also will refund any premiums paid during this 90-day period.

Workers' Compensation

If your client is disabled by an injury or illness that is covered by state or federal workers' compensation, employer's liability or occupational disease law, we will pay 50 percent of the benefit for which your client is eligible.

OPTIONAL RIDERS (Available only at issue)

Accident Hospital Confinement Indemnity Benefits Rider

This optional rider pays a daily room benefit of \$125, \$250, \$350, or \$500 (x2 ICU) for each day of hospital confinement due to an accident. Benefits are payable for a maximum of 45 days for any period of confinement.

- Underwriting of the rider will be subject to the Underwriting Rules for the Policy Form, Health Manual and Occupational Guide
- Issue ages 18-61
- Only one Accident Hospital Confinement Indemnity Benefits rider may be attached to a given policy
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 67
 - The date the policy terminates
- Neither the Association Group premium savings nor the Self-Employed premium savings applies to this rider

Accident Medical Expense Benefits Rider

This optional rider reimburses your client for \$1,000, \$2,000, \$3,000 and \$5,000 in medical-related expenses incurred per accident. Only services and supplies received within 26 weeks from the date of the Injury are covered, excluding dental care or treatment.

- Total benefits payable for any one Injury are limited to the Maximum Benefit
- Total lifetime benefits payable under this rider are limited to ten times the Maximum Benefit
- The rider terminates on whichever of the following occurs first:
 - The date the policy terminates
 - The date total lifetime benefits paid under this rider equal ten times the Maximum Benefit
 - The date your client reaches age 67

*Features and riders may not be available with all policies or approved in all states.

Short-Term Disability

Benefit Period (Months)	Elimination Period (Days)	Issue Ages	Occupational Classes
3, 6, 12, 24	0/7, 7, 0/14, 14, 30, 60, 90	18-61 Individual 18-70 DI Choice at Work	6A, 5A, 4A, 3A, 2A, 1A, S

Premium Structure

- Individual – sex distinct
- DI Choice at Work – unisex

Premium Savings

If your client is a member of a qualifying association, or self-employed, they may qualify for a premium savings.

Renewability

This product guarantees the right to continue coverage until age 67. During that time, we cannot cancel the policy as long as the required premiums are paid when due. After age 67, coverage may continue to age 75 if working full time and the necessary premiums are paid when due.

- For DI Choice at Work coverage, after age 67, coverage may be continued for life if working full time and the necessary premiums are paid when due

Maximum Monthly Benefit Amounts

The maximum monthly benefit amount available is \$5,000.

Total Disability Benefits

If your client is unable to perform the material and substantial duties of their regular occupation due to injury or illness and is not gainfully employed in another occupation, we will pay a monthly benefit once the elimination period has been met.

Partial Disability Benefit

If your client is able to perform the material and substantial duties of their regular occupation due to injury or illness for no more than 50 percent of the time usually spent in the daily performance of such duties, we will pay 50 percent of the total disability monthly benefit. These benefits commence after the elimination period has been satisfied and are payable for up to six months.

Survivor Benefit

If your client dies while they are disabled, we will pay their beneficiaries a lump sum amount equal to three times the total disability monthly benefit payable at the time of their death.

Terminal Illness Benefit

Your client has the option to accelerate up to 12 months of disability benefits if diagnosed with a terminal illness.

Recurrent Disability

If a related disability occurs within six months of returning to full-time employment, we will consider it a recurrent disability. A new elimination period will not need to be satisfied and the same benefit period will continue.

Presumptive Total Disability

We will presume your client to be totally and permanently disabled if sickness or injury results in their complete and irrecoverable loss of hearing, speech, sight, or use of both hands, both feet or one hand and one foot. We will pay total disability benefits for the full length of the benefit period even if they return to work in another occupation. We also will waive the elimination period.

Waiver of Premium

We will waive premium for the coverage and all optional riders after your client is disabled for 90 days. We also will refund any premiums paid during this 90-day period.

Transplant Donor Benefits

We will pay benefits on the same basis as any other sickness if your client becomes disabled as the result of a transplant of part of their body to the body of another person.

Rehabilitation Benefit

If your client is disabled and receiving disability benefits, they may be eligible to receive vocational rehabilitation services at our expense.

Workers' Compensation

If your client is disabled by an injury or illness that is covered by state or federal workers' compensation, employer's liability or occupational disease law, we will pay 50 percent of the short-term disability benefit for which your client is eligible.

OPTIONAL RIDERS (Available only at issue)

Hospital Confinement Indemnity Benefits Rider

This optional rider pays a daily room benefit of \$125, \$250, \$350, or \$500 (x2 ICU) for each day of hospital confinement due to an accident or sickness, subject to a one-day elimination period. Benefits are payable for a maximum of 45 days for any period of confinement.

- Underwriting of the rider will be subject to the Underwriting Rules for the Policy Form, Health Manual and Occupational Guide
- Issue ages 18-61
- Only one Hospital Confinement Indemnity Benefits rider may be attached to a given policy
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 67
 - The date the policy terminates
- Neither the Association Group premium savings nor the Self-Employed premium savings applies to this rider

Accident Medical Expense Benefits Rider

This optional rider reimburses your client for \$1,000, \$2,000, \$3,000 and \$5,000 in medical-related expenses incurred per accident. Only services and supplies received within 26 weeks from the date of the Injury are covered, excluding dental care or treatment.

- Reimbursable amounts must be in excess of the Deductible Amount
- Total benefits payable for any one Injury are limited to the Maximum Benefit
- Total lifetime benefits payable under this rider are limited to ten times the Maximum Benefit
- The rider terminates on whichever of the following occurs first:
 - The date the policy terminates
 - The date total lifetime benefits paid under this rider equal ten times the Maximum Benefit
 - The date your client reaches age 67

Critical Illness Benefits Rider

This optional rider pays a lump-sum benefit of \$5,000, \$10,000, \$15,000 or \$25,000 upon diagnosis of certain specified diseases.

- Underwriting of the rider will be subject to the Underwriting Rules for the Policy Form, Health Manual and Occupational Guide
- Adverse family history may affect rider availability
- Issue ages 18-61
- Only one Critical Illness Benefits rider may be attached to a given policy

- The rider will terminate on the earliest of the following:
 - When the Critical Illness Benefit is paid;
 - The date the policy terminates;
 - The renewal date following Age 67; or
 - The date we receive a written request to cancel this rider (in which case, the grace period will not apply).
- Neither the Association Group premium savings nor the Self-Employed premium savings applies to this rider

Critical Illness Insured Conditions

- Alzheimer's Disease
- Blindness
- Deafness
- Heart Attack (Myocardial Infarction)
- Life-Threatening Cancer (when first symptoms appear and first Diagnosis occurs more than 30 days after the Rider Date or rider reinstatement date)
- Major Organ Transplant
- Paralysis
- Renal Failure or
- Stroke

Return of Premium Rider

This optional rider provides for the return of a specified percentage of premiums paid (80 percent or 50 percent) less any claims paid at the end of each term period (usually 10 years). Premium and claims for the Critical Illness Benefits rider, Hospital Confinement Indemnity Benefits rider, and Accident Hospital Confinement Indemnity Benefits rider are excluded from the return of premium calculation.

- The underwriting for this rider is the same as the policy to which it is attached
- Issue ages 18-57
- Elimination Periods of 30, 60 and 90 days only
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 67
 - The date the policy terminates
- The Association Group premium savings and Self-Employed premium savings apply to this rider
 - Not available with the DI Choice at Work products

*Features and riders may not be available with all policies or approved in all states.

Long-Term Disability

Benefit Period (Years)	Elimination Period (Days)	Issue Ages	Occupational Classes
2	60, 90, 180, 365	18-61 Individual 18-70 DI Choice at Work	6A, 5A, 4A, 3A, 2A, 1A
5	60, 90, 180, 365	18-61	6A, 5A, 4A, 3A, 2A, 1A
10	60, 90, 180, 365	18-56	6A, 5A, 4A, 3A, 2A
To Age 67	60, 90, 180, 365	18-61	6A, 5A, 4A, 3A

Premium Structure

- Individual – sex distinct
- DI Choice at Work – unisex

Note: Annual Policy Fee \$50

Premium Savings

If your client is a member of a qualifying association, or self-employed, they may qualify for a premium savings.

- Not available with the DI Choice at Work products

Renewability

This product is guaranteed renewable until age 67. During that time, the policy cannot be cancelled as long as required premiums are paid when due. After Age 67 coverage may be continued to age 75 if working full time and the necessary premiums are paid when due.

- For DI Choice at Work coverage, after age 67, coverage may be continued for life if working full time and the necessary premiums are paid when due

Maximum Monthly Benefit Amounts

The maximum monthly base benefit amount available is \$10,000, or \$12,300 if the Social Insurance Supplement Benefits Rider is added. This amount may vary according to income and occupation.

Total Disability Benefits

If an injury or illness prevents your client from performing the material and substantial duties of their regular occupation, and they are not gainfully employed in another occupation, we will pay a monthly benefit once the elimination period has been met. After the first 24 months following the elimination period, if the maximum benefit period has not been met, we will continue to pay a monthly benefit as long as they are unable to perform the material and substantial duties of any occupation for which they are reasonably suited because of education, training or experience.

Proportionate Disability Benefit

If an injury or illness prevents your client from performing one or more of the material and substantial duties of their regular occupation, or is unable to perform such duties for as much time as it would normally take to do them, and the loss of monthly income is at least 20 percent, we will pay a percentage of the total disability monthly benefit that is proportionate to their loss of income once the elimination period has been met. These benefits are payable for up to 24 months.

Survivor Benefit

If your client dies while disabled, we will pay their beneficiaries a lump sum amount equal to three times the total disability monthly benefit payable at the time of their death.

Terminal Illness Benefit

Your client has the option to accelerate up to 12 months of disability benefits if diagnosed with a terminal illness.

Recurrent Disability

If a related disability occurs within six months of a return to full-time employment, we will consider it a recurrent disability. A new elimination period won't need to be satisfied and the same benefit period will continue.

Presumptive Total Disability

We will presume your client to be totally and permanently disabled if sickness or injury results in their complete and irrecoverable loss of hearing, speech, sight, or use of both hands, both feet or one hand and one foot. We will pay total disability benefits for the full length of the benefit period even if they return to work in another occupation. We also will waive the elimination period.

Waiver of Premium

We will waive premium for the coverage and all optional riders after your client is disabled for 90 days. We also will refund any premiums paid during this 90-day period.

Transplant Donor Benefits

We will pay your client benefits on the same basis as any other sickness if your client becomes disabled as the result of a transplant of part of their body to the body of another person.

Rehabilitation Benefit

If your client is disabled and receiving disability benefits, they may be eligible to receive vocational rehabilitation services at our expense.

OPTIONAL RIDERS (Available only at issue)

Hospital Confinement Indemnity Benefits Rider

This optional rider pays a daily room benefit of \$125, \$250, \$350, or \$500 (x2 ICU) for each day of hospital confinement due to an accident or sickness, subject to a one-day elimination period. Benefits are payable for a maximum of 45 days for any period of confinement.

- Underwriting of the rider will be subject to the Underwriting Rules for the Policy Form, Health Manual and Occupational Guide
- Issue ages 18-61
- Only one Hospital Confinement Indemnity Benefits rider may be attached to a given policy
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 67
 - The date the policy terminates
- Neither the Association Group premium savings nor the Self-Employed premium savings applies

Accident Medical Expense Benefits Rider

This optional rider reimburses your client for \$1,000, \$2,000, \$3,000 and \$5,000 in medical-related expenses incurred per accident. Only services and supplies received within 26 weeks from the date of the Injury are covered, excluding dental care or treatment.

- Reimbursable amounts must be in excess of the Deductible Amount
- Total benefits payable for any one Injury are limited to the Maximum Benefit
- Total lifetime benefits payable under this rider are limited to ten times the Maximum Benefit
- The rider terminates on whichever of the following occurs first:
 - The date the policy terminates
 - The date total lifetime benefits paid under this rider equal ten times the Maximum Benefit
 - The date your client reaches age 67

Critical Illness Benefits Rider

This optional rider pays a lump-sum benefit of \$5,000, \$10,000, \$15,000 or \$25,000 upon diagnosis of certain specified diseases.

- Underwriting of the rider will be subject to the Underwriting Rules for the Policy Form, Health Manual and Occupational Guide
- Adverse family history may affect rider availability
- Issue ages 18-61

- Only one Critical Illness Benefits rider may be attached to a given policy
- The rider will terminate on the earliest of the following:
 - When the Critical Illness Benefit is paid;
 - The date the policy terminates;
 - The renewal date following Age 67; or
 - The date we receive a written request to cancel this rider (in which case, the grace period will not apply).
- Neither the Association Group Discount nor the Self-Employed Discount applies to this rider

Critical Illness Insured Conditions

- Alzheimer’s Disease
- Blindness
- Deafness
- Heart Attack (Myocardial Infarction)
- Life-Threatening Cancer (when first symptoms appear and first Diagnosis occurs more than 30 days after the Rider Date or rider reinstatement date)
- Major Organ Transplant
- Paralysis
- Renal Failure or
- Stroke

Return of Premium Rider

This optional rider provides for the return of a specified percentage of premiums paid (80 percent or 50 percent) less any benefits paid at the end of each term period (usually 10 years). Premium and claims for the Critical Illness Benefits rider, Hospital Confinement Indemnity Benefits rider, and Accident Hospital Confinement Indemnity Benefits rider are excluded from the return of premium calculation.

- The underwriting for this rider is the same as the policy to which it is attached
- Issue ages 18-57
- Elimination Periods of 60, 90, 180 and 365 days only
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 67
 - The date the policy terminates
- The Association Group premium savings and Self-Employed premium savings apply to this rider
- Not available with DI Choice at Work products

Social Insurance Supplement Rider

This optional rider offers disability income insurance at more affordable premiums than base coverage since disability benefits payable under this rider are offset dollar-for-dollar by other forms of social insurance.

- Underwriting rules for the rider will be subject to the underwriting rules for the Policy Form, Health Section, Occupational Section and Income Qualification Table
- The same Benefit Period/Elimination Period options and Issue Age/Occupational restrictions that apply to the base coverage also apply to the Social Insurance Supplement rider
- The Elimination Period and the Benefit Period must be the same for the base plan and the SIS rider
- Only one Social Insurance Supplement rider may be attached to a given policy
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 67
 - The date the policy terminates
- The Association Group premium savings and Self-Employed premium savings apply to this rider

Note: New York and New Jersey SIS Riders: SIS (Social Insurance Substitute) Benefits riders provide total or proportionate disability coverage in addition to the base policy’s benefits. However, these riders’ benefits will no longer be paid should Social Insurance benefits pay for the loss being claimed.

Extended Own Occupation Disability Definition Amendment Rider

This optional rider extends the own occupation definition of disability applicable to the base and SIS rider past two years, to the duration of the Benefit Period.

- The underwriting for this rider is the same as the policy to which it is attached
- Issue ages 18-61

- Benefit Periods 5-Year, 10-Year, and To Age 67
- Occupational Classes 6A, 5A, 4A, 3A and 2A
- Only one Extended Own Occupation Disability Definition Amendment rider may be attached to a given policy
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 67
 - The date the policy terminates
- The Association Group premium savings and Self-Employed premium savings apply to this rider

Future Insurability Option Rider (FIO)

This optional rider allows the policyholder to increase their base monthly benefit, at the policy's annual renewal date, subject only to proof of financial insurability. The maximum increase amount is up to two times the base benefit, but the total base plus FIO monthly benefit may never exceed the maximum base monthly benefit for the policyholder's occupational class. The maximum allowable increase on any given notice date is 25 percent of the total disability monthly benefit (base only) at policy issue.

- The underwriting for this rider is the same as the policy to which it is attached
- Issue ages 18-51
- Benefit Periods 2, 5, and 10-Year and To Age 67
- Occupational Classes 6A, 5A, 4A, 3A, and 2A (government employees are not eligible)
- Health Risk Classes Standard, Standard with Exclusion, "L" or "7" and "M" or "8" (see Medical Underwriting Guidelines, Section 6)
- Only one Future Insurability Option rider may be attached to a given policy
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 57
 - The date benefits have been increased to the maximum allowable
 - The date the policy terminates
- The Association Group premium savings and Self-Employed premium savings apply to this rider

Extended Proportionate Disability Benefits Rider

This optional rider extends the maximum duration Proportionate Disability benefits can be received past 24 months, to the duration of the Benefit Period.

- The underwriting for this rider is the same as the policy to which it is attached
- Issue ages 18-61
- Benefit Periods 5-Year, 10-Year, and To Age 67
- Only one Extended Proportionate Disability Benefits rider may be attached to a given policy
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 67
 - The date the policy terminates
- The Association Group premium savings and Self-Employed premium savings apply to this rider.

Cost-of-Living Adjustment Rider

This optional rider increases the disability benefits payable under the base policy and SIS rider by the lesser of:

- The CPI-U (Consumer Price Index – All Urban Consumers)
 - 5.0 percent compounded annually
- The underwriting for this rider is the same as the policy to which it is attached
- Issue ages 18-61
- Benefit Periods 2, 5, and 10-Year and To Age 67
- Only one Cost-of-Living Adjustment rider may be attached to a given policy
- The rider terminates on whichever of the following occurs first:
 - The first renewal date following age 67
 - The date the policy terminates
- The Association Group premium savings and Self-Employed premium savings apply to this rider

*Features and riders may not be available with all policies or approved in all states.

Business Overhead Expense

Benefit Period (Months)	Elimination Period (Days)	Issue Ages	Occupational Classes
12, 18	30, 60, 90, 180 and 365	20-59	6A, 5A, 4A, 3A, 2A, 1A

Premium Structure

- Individual – sex distinct

Renewability

This product guarantees the right to continue the coverage until your client retires, sells their business or otherwise discontinues their business or profession until age 65. During that time, we cannot cancel the policy as long as the required premiums are paid when due.

Total Loss of Time Benefit

If your client is completely unable to engage in their occupation and is not gainfully employed in another occupation, we will pay benefits for operating expenses incurred during this total loss of time.

Recurrent Total Loss of Time Benefit

If further loss of time results from injury or sickness for which benefits have already been paid, the maximum operating expense benefit and deductible period will be restored after return to full-time work for a period of six consecutive months.

Waiver of Premium

Premiums will be waived for the coverage after total loss of time benefits have been paid continuously for 90 days.

Monthly Benefit Limits

- Minimum: \$500
- Maximum:

Occupation Class 6A, 5A, 4A	\$15,000
Occupation Class 3A	\$12,000
Occupation Class 2A	\$ 6,000
Occupation Class 1A	\$ 5,000
- The Maximum monthly benefit may not exceed the average monthly operating expenses for the 12-month period proceeding the date of the application

Underwriting Programs

Program Overview

Mutual of Omaha Disability Income Choice portfolio provides products that fit producers that sell in the individual market or the employer sponsored market. Below is a brief overview of the various products and programs to use as a quick reference to select the best program to meet your client’s needs.

Disability Income Choice Program Options		Who Pays the Premium	Minimum Group Size and Participation	Eligibility		Underwriting	Discounts and Maximum Benefits	
							Maximum Benefit	Discount
Individual (sex-distinct)		Individual	N/A	30 hours plus per week Ages 18-61	3 months of service	Full Underwriting	Based on Product and Income Guidelines AODI/ STD \$5,000 LTD \$12,300 BOE \$15,000	Association Group – 15% Self-Employed – 15%
DI Choice at Work (unisex)	Fully Underwritten	Employee Paid (voluntary participation)	3 or more	Ages 18-70 (18-61 for AODI)	6 months of service			1 GSI question + 6 knock out questions
	Express Standard Issue		Greater of 5 lives or 10% participation			1 underwriting question	Up to \$8,000	15% – 25%
	Guaranteed Standard Issue	Employer Paid (mandatory participation)	Minimum of 10 lives or 30% participation		Minimum of 10 lives and 100% participation			

DI Choice – Individual

Features four customizable disability products. All are offered with various premium allowance and program features that will meet the needs of any of your individual clients.

Eligibility

- Working at least 30 hours per week in Occupation Classes 6A, 5A, 4A, 3A, 2A, or 1A (Class S, for Accident Only Disability and Short-Term Disability products only)
- Age 18-61
- Annual income of at least \$15,000
- Maximum Benefit
 - Accident Only Disability – \$5,000
 - Short-Term Disability – \$5,000
 - Long-Term Disability – \$12,300
 - Business Overhead Expense – \$15,000
- Maximum Benefit based on Occupation
- Premium Savings
 - Association Groups – 15 percent
 - Self-Employed – 15 percent
- Employees who have been with their current employer less than three months, the following will be required:
 - Letter from current employer or human resources department verifying employee disability programs and current payment stub

- **Citizenship/Residency Requirements**
 - United States citizens permanently residing within the United States or its territories, or
 - Foreign Nationals who have a Permanent Resident Visa and have lived continuously in the United States or its territories for at least three (3) years
 - Proof of status will be required by submitting a copy of the permanent resident visa card and completing the Foreign National/Travel Questionnaire
 - Non-Resident Foreign Nationals or those persons anticipating residence in a foreign country, even temporarily, are ineligible for disability income insurance
 - Client traveling more than 90 days outside the U.S. or in areas with political unrest, poor economic conditions, lack of modern living standards, or modern medical facilities are ineligible for coverage
- **Self-employed requirements**
 - Engaged in the same occupation as they were prior to becoming self-employed for at least 6 months, or
 - Newly working or engaged in a different occupation than they were prior to becoming self-employed at least 12 months
- **Fully Underwritten Issue Requirements**
 - An individual's medical history, financial information and occupation are all considered when being fully underwritten. This may include a client interview, ordering Attending Physicians Statement (APS), Paramed or a Blood & Urine profile. In addition, financial underwriting would include providing financial statements and records depending on the type and level of coverage being applied for. Finally, your client's occupation determines the premium rate and amount of coverage available
 - Streamlined Underwriting is available through Simplified Underwriting. Underwriting decision within 48 hours of initial underwriting review provided the following conditions are met:
 - Applicant is in occupation class 6A, 5A, 4A, 3A, or 2A
 - For Accident Only Disability coverage: Applicant is age 55 or younger and medically standard
 - For Short-Term and Long-Term Disability coverage: Applicant is nontobacco, age 45 or younger, and medically standard
 - No adverse information from the Medical Information Bureau
 - All application questions have been clearly and completely answered and required forms and financial documents have been submitted with the application
- **Business Overhead Expense (BOE) Requirements**
 - May be issued to qualified professional and business persons working at least 30 hours per week in Occupation Classes 6A, 5A, 4A, 3A, 2A, or 1A who incur operating expenses covered by this policy and have been in business for a minimum of two years
 - Age 20-59
 - Persons operating businesses out of their own home are not eligible for this coverage
 - Examples of qualified applicants are:
 - Individuals, joint occupants, and members of a partnership
 - In the case of joint occupants and partners, the monthly benefit may not exceed the applicant's share of monthly operating expenses
 - Professional individuals who have incorporated solely for tax purposes and who, except for incorporation, would also qualify as stated above
 - Officers of C corporations with not more than five employees including corporation officers, subject to the following:
 - Each officer insured must be an active full-time, salaried employee of the corporation
 - The maximum monthly benefit may not include salaries paid to officers or stockholders of the corporation
 - Coverage issued to any one officer may not exceed a share of expenses proportionate to that officer's share of outstanding stock
 - **Citizenship/Residency Requirements:**
 - United States citizens permanently residing within the United States or its territories, or
 - Foreign Nationals who have a Permanent Resident Visa and have lived continuously in the United States or its territories for at least three (3) years
 - Proof of status will be required by submitting a copy of the permanent resident visa card, and completing the Foreign National/Travel Questionnaire
 - Non-Resident Foreign National or those persons anticipating residence in a foreign country, even temporarily, are ineligible to disability income insurance
 - Client traveling more than 90 days outside the U.S. or in areas with political unrest, poor economic conditions, lack of modern living standards, or modern medical facilities are ineligible for coverage

Disability Choice at Work

Features the advantages of three underwriting programs on three customizable disability products. All are offered with various allowances and program features that will meet the needs of any of your business clients. Targeting the small to mid-sized business market, DI Choice at Work builds on the success of the individually sold DI Choice to offer a product that is competitive and unique in the employer sponsored market.

How do the DI Choice at Work programs work?

Employers decide who participates in the program – all employees or a select group of employees (i.e., all managers). They also determine how they would like to fund the program.

- Employer-paid (mandatory participation) – the employer pays the entire cost of the program – either for all employees or a select group of employees
- Employee-paid (voluntary participation) – the employer makes the coverage available to employees on a voluntary basis, with each employee paying his or her own premiums, or the employer can contribute for a portion of the premium with the remaining being paid by the employee

What are preferred target market characteristics?

Look for small to mid-sized businesses with the following characteristics:

- Sole proprietorship, Partnership, LLC, S Corporation, C Corporation
- Limited geographic locations
- Past success with voluntary insurance programs
- Diverse distribution of age, gender, and occupation

Also, look for businesses with a desire to create employee loyalty and retain valued employees. They also should be:

- committed to supporting the program
- agreeable to on-site employee meetings and enrollment during company time
- businesses that are looking to set themselves apart from their competitors by offering a more robust benefits package

What circumstances could affect the group offer?

A variety of factors may affect the Guaranteed Standard Issue and Express Standard Issue offer including:

- existing coverage
- participation
- age distribution
- gender diversity
- occupation classes
- business stability

What are the benefits of offering income protection at work?

Benefits to Employer	Benefits to Employees
Helps attract and retain quality employees by setting the company apart from competitors by offering a more robust benefits package	Helps protect the loss of income after an accident or sickness
Enhances a company's reputation as a place people want to work	Provides the ease of purchasing insurance at work and paying through payroll deduction
Builds morale and develops a workforce of loyal employees	Allows them to take their policy with them, even if they leave the company

Eligibility

- Full-time employee working at least 30 hours per week in Occupation Classes 6A, 5A, 4A, 3A, 2A, or 1A (Class S, for Accident Only Disability and Short-Term Disability products only)
- Age 18-70
- Age 18-61; Accident Only Disability
- Annual income of at least \$15,000
- Maximum Benefit
 - Accident Only Disability – \$5,000
 - Short-Term Disability – \$5,000
 - Long-Term Disability – \$12,300
- W-2 employee with continuous employment for the previous three months
- United States citizen permanently residing within the United States or its territories for at least 3 years
- Foreign Nationals who have a Permanent Resident Visa and have lived continuously in the United States or its territories for at least three (3) years
 - Proof of status will be required by submitting a copy of the permanent resident visa card and completing the Foreign National/Travel Questionnaire
- Non-Resident Foreign Nationals or those persons anticipating residence in a foreign country, even temporarily, are ineligible for disability income insurance

Fully Underwritten Issue

- This program is voluntary and available to all eligible full-time employees working 30+ hours per week. The underwriting program allows the employee to customize coverage using the three associated disability products and optional riders. The maximum benefit available is based on the employee's occupation class and the Income Qualification Table
 - Three Eligible Employees – 20 percent premium savings
 - Ages 18-70 (age 61 for Accident Only Disability)
 - Group size for preapproval is limited to 3-250 eligible employees
 - W-2 employees who have been employed with the company for the previous three months
 - Individual Underwriting Guidelines Apply

Express Standard Issue

This program is voluntary participation for full-time eligible employees working 30+ hours per week that the employer deems eligible. The program is available for those employers who still want to promote and support an income protection program featuring Express Standard Issue underwriting and allowances for their employees, but not bear the expense of the associated premiums

- The minimum group size for this program is the greater of 5 lives or 10 percent participation
- Employed with company for the previous six months
- Available for annual open enrollment
- The available premium allowances¹ based on the group size are:
 - 5-24 Eligible Employees – 10 percent
 - 25-49 Eligible Employees – 15 percent
 - 50+ Eligible Employees – 20 percent
- The available maximum benefit based on the group characteristics are as follows:
 - 5-24 Eligible Employees – up to \$3,000
 - 25-49 Eligible Employees – up to \$4,000
 - 50+ Eligible Employees – up to \$5,000

Guaranteed Standard Issue

The Guaranteed Standard Issue (GSI) underwriting program is available to employers on both an employer-paid (mandatory) and employee-paid (voluntary) basis. This underwriting program is designed to allow employers to select the employees who are eligible to receive the coverage and the benefit configurations and riders available to them. The GSI program features only one underwriting questions on a simple-to-complete application.

- **Employer-paid (mandatory participation):** This program is provided by the employer to full-time employees working 30+ hours per week that the employer determines as eligible. The employer must pay 100 percent of the eligible employees' premiums
 - The minimum group size for this program is 10 eligible employees and 100 percent of these eligible employees must receive the coverage

¹Allowances assume a 12/12 pre-existing condition provision. A pre-existing condition is a condition for which medical advice, diagnosis, care or treatment was recommended by or received from a Physician within the 12 months prior to effective date. We will not pay benefits for loss resulting from a pre-existing condition, unless such loss occurs after 12 months has expired.

- Employed with company for the previous six months
- The available premium allowances¹ based on the group size are:
 - 10-24 Eligible Employees – 15 percent
 - 25-49 Eligible Employees – 20 percent
 - 50+ Eligible Employees – 25 percent
- The available maximum benefit based on the group characteristics are:
 - 10-24 Eligible Employees – up to \$3,000
 - 25-49 Eligible Employees – up to \$5,000
 - 50+ Eligible Employees – up to \$8,000
- At the discretion of the underwriter, an Annual Benefit Increase (ABI) may be offered to the group:
 - Provisions of the option include:
 - Annual Benefit Increase allows for existing participants and new eligible employees to increase their monthly benefit on the anniversary date of the program provided their income has increased
 - This option is available for mandatory employer paid cases only
 - Premiums will be based on the applicant's current attained age
 - Updated census must be provided to support increase

Requirements and information regarding a group's ABI program will be outlined in the Offer Letter.

- **Employee-paid (voluntary participation):** This program is voluntary participation for full-time eligible employees working 30+ hours per week that the employer deems eligible. The program is available for those employers who still want to promote and support an income protection program featuring Guaranteed Standard Issue underwriting and allowances for their employees, but not bear the expense of the associated premiums
 - The minimum group size for this program is 10 eligible employees with the greater of 10 employees or 30 percent of the eligible employees accepting coverage
 - Employed with company for the previous six months
 - The available premium allowances² based on the group size are:
 - 10-24 Eligible Employees – 10 percent
 - 25-49 Eligible Employees – 15 percent
 - 50+ Eligible Employees – 20 percent
 - The available maximum benefit based on the group characteristics are as follows:
 - 10-24 Eligible Employees – up to \$3,000
 - 25-49 Eligible Employees – up to \$4,000
 - 50+ Eligible Employees – up to \$5,000

Additional Details

- If an employee wants to buy coverage outside of the limits of the Guaranteed Standard Issue or Express Standard Issue coverage the employee will complete an additional Fully Underwritten Issue application for any of the additional benefits
- Eligible new hires are allowed to purchase after completing six months of continuous, full-time employment. Dependent upon the selection of the employer, enrollment may be available during the 60 days following the six months of employment or during the annual enrollment period
- If an employee is terminated or leaves the business, the coverage is completely portable and may be taken with them as they leave. When porting employer-paid cases, the employee can elect to be billed directly without any coverage change

¹Allowances assume a 3/12 pre-existing condition provision. A pre-existing condition is a condition for which medical advice, diagnosis, care or treatment was recommended by or received from a Physician within the 3 months prior to effective date. We will not pay benefits for loss resulting from a pre-existing condition, unless such loss occurs after 12 months has expired.

²Allowances assume a 12/12 pre-existing condition provision. A pre-existing condition is a condition for which medical advice, diagnosis, care or treatment was recommended by or received from a Physician within the 12 months prior to effective date. We will not pay benefits for loss resulting from a pre-existing condition, unless such loss occurs after 12 months has expired.

Business Submission Process

Individual

Mutual of Omaha provides a disability income insurance application that agents will find easy to use. All applications and required forms can be found on our Sales Professional Access (SPA) website.

Trial Inquiries

- Although we do not accept trial applications, fax or mail all available information to the Underwriting Department with appropriate authorization where necessary, for a preliminary opinion based on the information provided
- Underwriting has the final approval authority and any offer is subject to full underwriting, including confirmation and clarification of the information provided
- Inquiries can also be made using the underwriting template in Sales Professional Access (SPA)
- Trial Inquiries can be emailed to the following: underwriter.health@mutualofomaha.com

Complete and accurate information is critical in providing timely service and underwriting decisions. When completing the medical portion of the application, provide details of medical history.

Application Submission

Brokerage applications should be submitted to the following address or fax number:

Application Submission
Mutual of Omaha
Records/Mailing Processing Center
9330 State Hwy 133
Blair, NE 68008-6179
Fax (402) 997-1804

Agency Applications should be submitted through the Division Office

Application Processing

Incomplete Applications

If we are unable to complete our underwriting requirements with 45 days of the application date, we must close the file as incomplete and return premiums paid. A letter of explanation is sent to the agent and the applicant to inform them that insurance is not in force as a result of an incomplete application.

When outstanding underwriting requirements are received, we outline our preliminary offer in writing to the agent, subject to a new application.

Time Service

Our goal is to make underwriting decisions on the majority of applications within 15 days of receipt of the application. Simplified Underwriting should be complete in 48 hours.

Applications issued other than applied for

If we need to adjust the benefits, add a premium increase or an exclusion rider or make other adjustments to the policy, we will notify you of our handling prior to issue to confirm that the policy can be placed as offered.

Declined Applications

When an application is denied, a letter with a refund check in the amount of any premiums paid is sent to the applicant.

Application Completion Requirements

- Applications must be completed in ink. Typewritten applications bearing the applicant's handwritten signature will be accepted
- While in the presence of the applicant, agents must ask all of the application questions of the applicant and complete the application with full, explicit and accurate answers. "N/A" is not an acceptable application answer; where applicable, please use "no" or "none" instead
- Any corrections or alterations to the application must be made in the presence of, or initiated by the applicant, not the agent. Changes made with corrective tape or fluids will not be accepted
- No application will be accepted that has been altered or corrected with regard to the signature of the proposed insured, the date signed, or the licensed agent's signature

- Backdating on the application will not be accepted
- The applicant's home and business phone numbers must be completed on the application to expedite the personal history interview that may be necessary
 - The PHI can be initiated before the application is submitted
- Applications must be completed based upon the applicants resident state unless otherwise stipulated
- The Agent must be licensed in the signing state

HIPAA Compliance

The health information authorization form must be completed at the time of application as required by the Health Insurance Portability and Accountability Act of 1996. The authorization form is included in the application packet.

Replacements

- Replacement of present insurance must conform to the replacement regulations for the applicant's state of residence
- You should advise the proposed insured to continue premium payments on any present insurance until underwriting is completed and a policy is issued
- Make sure the proper forms are fully completed, paying special attention to the replacement questions, agent certification, the existing policy number and issuing company
- Replacement forms can be obtained from Sales Professional Access (SPA)

Premium Processing

Initial Premiums

Initial premiums should be collected at the time the application is taken and should accompany the application to the home office. If money is collected, give the Conditional Receipt to the applicant and advise them that coverage is effective subject to the terms of the receipt.

Mutual of Omaha does not accept individually billed monthly business. If an application is submitted on a quarterly, semi-annual or annual basis without money or without the full first premium, the application is underwritten and, when the policy is issued, premium is to be paid within 30 days.

When the full premium on C.O.D. cases, or the balance of the premium on a partial pay case, is not received in the home office within 30 days from the date of issue, the policy is void and the applicant is notified by letter.

Bank Service Plan (BSP)

It's easy and convenient to use the Bank Service Plan to pay premiums on new and existing policies. Have your client complete the authorization in the application. Send a voided check with the application. For in-force policies, send the form listing the policies already in force and a voided check. If your client has more than one policy, we will establish a convenient combined payment plan for all the policies to keep them in force with one monthly authorized payment.

We will establish contact with the bank. The withdrawal will then appear on the client's bank statement.

Direct Bill BSP Modal Factors	
Annual	1.0000
Semiannual	0.5150
Quarterly	0.2600
Monthly (BSP)	0.0875

Policy Issue and Delivery

Delivering the policy

Delivering the policy in person is important to building relationships with your clients. It also ensures that they receive their policies in a prompt and reliable manner. We ask all of our agents to deliver policies in person.

If any change in health occurs after the application date, communicate this information to the Underwriting department immediately. You must not deliver a policy when a change in health has occurred. Please contact Underwriting for further instructions.

Policies Issued as Other Than Applied For

A policy is conditionally issued as a counteroffer of insurance when the policy cannot be issued as applied for and coverage is rated modified and/or conditions are excluded. Policies issued other than as applied for may require an amendment rider which will be sent with the policy package.

Delivering a Policy Issued Other Than Applied For

- The requested form must be signed and the first full premium paid for the policy to become effective
- Any exclusion riders or benefit-limitation riders will be shown on the policy schedule
- Witness and secure the signature of the applicant
- Delivery and acceptance of the conditionally issued policies should be completed promptly. Contact Underwriting if special circumstances require an extension of delivery time
- The policy will be rescinded if the signed amendment rider is not received in the home office within 30 days
- Any rescissions will be explained by letter to the applicant and any premiums paid refunded. A copy of this letter will be sent to you. The policy and unsigned forms should be returned to the home office

Fully Underwritten Issue

- No group approval required for eligible groups
- No census required
- Three eligible employees required
- Group size for preapproval is limited to 3-250 eligible employees
- W-2 employees who have been employed with the company for the previous three months
- Requires employers endorsement of program (Acknowledgement Form)

Step 1: Create a Proposal

Complete a case quote using Mutual of Omaha's WinFlex Multi-Life Proposal Software.

Step 2: Submit applications and appropriate forms

- Submit one signed copy of Employer Acknowledgement form with initial DI Choice at Work applications
- Complete Payroll Deduction and List Bill Group section if applicable
- Submit your multi-life applications using your normal channel

Mail to: Records/Mailing Processing Center

9330 State Hwy. 133

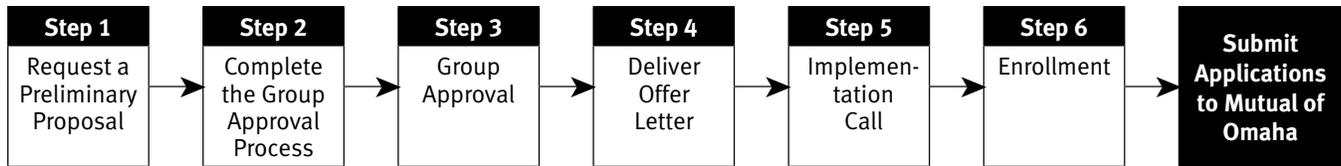
Blair, NE 68008-6179

Fax: 402-997-1804

Disability Choice at Work

Guaranteed Standard Issue and Express Standard Issue

Mutual of Omaha provides a disability income insurance application that agents will find easy to use. All applications and required forms can be found on our Sales Professional Access (SPA) website.



Getting Started

Step 1: Request a Preliminary Proposal

- Submit your request for a proposal by completing required sections on the Group Request Form. A complete census must accompany the request
- Send an email to multilife@mutualofomaha.com
- Fax 402-997-1893
- Call 877-778-0838

Census Requirements

An employee census in an excel format must be submitted along with the Group Request Form. A complete census (M27573) requires the following information for all Eligible Employees:

- Employee name or ID
- Date of birth/Age
- Annual salary
- Annual bonuses (Previous 2 years, if available)
- Commissions (Previous 2 years, if available)
- Job title/Duties
- Gender
- Employment start date

Step 2: Submit the Group for Approval

If not already complete, submit the Multi-Life Group Approval Request Form (M27546) along with an updated complete census (M27573) to Mutual of Omaha's Multi-Life Department for review:

Mail to: Mutual of Omaha Insurance Company
Multi-Life Underwriting – 6th Floor
Mutual of Omaha Plaza
Omaha, NE 68175

Fax: 402-997-1893

Email: multilife@mutualofomaha.com

Step 3: Group Approval

Within one to two business days, the Multi-Life Underwriting Coordinator will review the Group Approval Request Form and respond with an approval, decline, or request additional information. If the group is approved, an Offer Letter containing the details of the program will be sent to you and your marketer or division office.

Step 4: Deliver the Offer Letter

The offer letter should be delivered immediately to the employer. If necessary an updated proposal should accompany the offer letter. Review the letter and proposal with the business and return the signed Offer Letter along with any other required documents to the Multi-Life Underwriting Coordinator within 30 days.

If the group is utilizing List Bill/Payroll Deduction, please complete the New Employer Questionnaire (M27566) and return the completed form to the Multi-Life Underwriting Coordinator.

The group cannot be activated until the signed Offer Letter is returned to the Multi-Life Underwriting Coordinator.

Step 5: The Implementation Call

Upon receipt of the signed Offer Letter, the Multi-Life Underwriting Coordinator will issue an invitation for an Implementation Call. The call may include:

- The Multi-Life Underwriting Coordinator
- The agent and/or marketer/division office
- The organization's benefits administrator

During the call, the implementation process will be discussed, including billing set-up, enrollment period, common effective date, and application requirements. Following the call, the Multi-Life Underwriting Coordinator will assign a group number and send an Implementation Memo to you or your marketer/division office via email. The Implementation Memo will contain the details of the program.

Step 6: Enrollment

Once you complete the Implementation Call, you can begin taking applications on the date selected for enrollment to begin.

- Applications can be solicited during the 60-day enrollment period specified during the Implementation Call
- All policies issued prior to the pre-determined common effective date will receive the same effective date. Any application approved after the common effective date will receive an effective date coinciding with the next billing cycle
- Hold applications until you reach participation percentage required
- Submit your multi-life applications using your normal channel

Mail to: Records/Mailing Processing Center
9330 State Hwy. 133
Blair, NE 68008-6179

Fax: 402-997-1804

Administrative Information

Application Completion Requirements

- Applications must be completed based upon the applicant's resident state unless otherwise stipulated in the Offer Letter
- The agent must be licensed in the signing state
- Applications must be received in our home office within the 30 days following the end of the open enrollment period. All applications must be signed within the open enrollment period. No applications will be taken after the enrollment period has expired except in the previously explained circumstances involving eligible new hires and new entrants into eligible employee groups

Billing Information

Billing Options

The agent/marketer/division office and the Multi-Life Underwriting Coordinator will work together to set up a billing plan to meet the needs of the multi-life group.

- List Bill/Payroll Deduction – Available for all eligible employees. A minimum of three participants and a completed Employer Questionnaire (M27566) including an updated census (M27573) are required to set up a list bill/payroll deduction case. All employees using list bill/payroll deduction must elect the same premium mode. The following premium modes are available for list bill/payroll deduction:

PRD Modes	Modal Factors
9-Pay	0.1167
10-Pay	0.1.050
11-Pay	0.0955
18-Pay	0.0583
19-Pay	0.0553
20-Pay	0.0525
21-Pay	0.0500
22-Pay	0.0477
23-Pay	0.0457
24-Pay	0.0438
25-Pay	0.0420
26-Pay	0.0404

- Direct Bill – Available to all participants on a monthly, quarterly, semiannual or annual basis. Monthly billing must be set up through automatic checking account deduction

Premium Modes	Modal Factors
Annual	1.0000
Semiannual	0.5150
Quarterly	0.2600
Monthly (BSP)	0.0875

Premium Collection

Premium should not be collected with the multi-life application. This applies to all direct bill and list bill/payroll deduction cases. As no premium is collected with the application, conditional coverage is not available for DI Choice at Work cases.

Split Billing

Cases may exist where the employer will only be paying a portion of the employee's premium. For example, the employer may choose to pay for the basic benefit level and the employee may choose to voluntarily buy-up additional coverage. To determine the additional premium, two separate illustrations will need to be run and the difference can be calculated. A bill will be sent to the employer for the entire premium.

Association Marketing

Program Overview

Association Marketing is a cost-effective and efficient way to target groups of individuals with a common occupation or interest – allowing you to build your business through the power of third-party endorsements. More than 600 associations nationwide endorse Mutual of Omaha.

An Association must have bylaws and dues-paying members to qualify. A 15 percent premium allowance is available if the insured or eligible spouse is a member of a qualifying association.

Association Marketing Guidelines

Membership Requirements

- Local associations must have at least 150 members
- State associations must have at least 250 members
- Multi-state or national associations must have at least 1,000 members

Membership Qualifications

To qualify as an association, an organization must:

- Have been in existence for at least two years
- Have bylaws and officers
- Have annual dues-paying members who vote on officers and matters of policy

Desirable Characteristics

Associations with the following concerns or attributes will not be eligible for preferential rates and/or no-cost benefit enhancements:

- Has no affinity
- Lack reliable membership records
- Formed for the purpose of obtaining insurance
- Formed to promote political views
- Formed for purely social purposes
- Formed for commercial venture
- Primarily consists of members with hazardous occupations
- Credit unions/banks

Getting Started

Association Approval Process

Step 1

Submit electronic (or paper) proposal request and association bylaws to home office for review

Allow five to seven business days for review and notification of initial approval or rejection

Step 2

Agent approaches association and makes presentation to association representatives

Association agrees to proceed

Step 3

Agent develops marketing plan and association director signs Affiliation Agreement (M18100_0911) and marketing plan

Step 4

Signed Affiliation Agreement and Marketing Plan submitted to home office for review

Step 5

Final approval and Association Marketing number provided in five business days

The home office reserves the right to final approval or disapproval of all association group requests based on product, underwriting and marketing assessment of each group's fit for our program.

Additional Details on Approved Associations

1. All applications are individually underwritten according to the specific product's underwriting guidelines.
2. An individual applicant must be a member of the association for **at least three months** before applying for coverage to be eligible for any discount or benefit enhancement.
 - The Association Marketing verification form (M27646) must be submitted with the application to qualify for the preferential rate or no-cost benefit enhancement
 - Agents should not encourage individuals to enroll in an association for the purpose of receiving a discount or enhancement
3. Due to employer-benefit laws, employees of members are not eligible for coverage using Association Marketing discounts or benefit enhancements (although they may be eligible for coverage through individual or DI Choice at Work).
4. To keep the group open and eligible for preferential rates and/or no-cost benefit enhancements, the agent must issue the number of applications agreed to in the marketing plan within the agreed timeframe. If the required number of applications is not issued within that period, the group will be evaluated for closure to new business. After the initial evaluation period, there must be five issued applications every six months to keep the group open.
5. All approved marketing materials that may be used to communicate with the association and its members can be found on SPA.
6. The agent is responsible for any promotional expenses incurred in working with the association.

If you have additional questions on this program or need further assistance, please email Association Marketing at association.marketing@mutualofomaha.com or call (800) 624-5554.

General Underwriting Guidelines

This section is designed to provide you with comprehensive information regarding our eligibility and employment requirements and medical guidelines.

For specific product information, please see the associated product section. In addition, you can talk directly to the underwriting staff. Contact your DI underwriting team for underwriting questions or pending case status at 1-800-715-4376.

Minimum Benefit Amounts

The minimum monthly benefit amounts required are shown in the table below. These minimums may be satisfied with a combination of base and SIS coverage.

	Minimum Monthly Benefit Amounts/Increments			
	Accident Only Disability	Short-Term Disability	Long-Term Disability	Business Operating Expense
Minimum Benefit	\$300	\$300	\$300	\$500
Minimum Increment	\$100	\$100	\$100	\$50

Social Security Number

Applicants are considered for insurance by providing a valid Social Security number issued by the United States Social Security Administration.

Foreign Travel

Applicants who travel to foreign countries frequently, for more than 90 days annually, and/or those who travel to areas with political unrest, poor economic conditions, lack of modern living standards or modern medical facilities, are ineligible for disability income insurance coverage.

Applicants who are working outside of the United States are also ineligible for disability income insurance coverage.

Non-English Speaking Applicants

Applicants who do not speak the English language are considered for insurance provided the Agent serves as a 3rd-Party translator and completes Form MLU25947, Agent's Certification for Non-English Speaking Applicants. Reasonable efforts will be made to assist non-English speaking applicants in completing the telephone interview and other underwriting requirements.

Product Combinations

Applicants may not apply for combinations of Elimination Periods and Benefit Periods using multiple accident and sickness policies with the intent to create total benefits where the Elimination Period is less than the minimum allowed for a particular Benefit Period. Example:

- Applying for a 30-day Elimination Period with a 1-year Benefit Period on one application and applying for a 365-day Elimination Period with a To Age 67 Benefit Period on another application
- If applying for Accident Only plan and a Sickness/Accident plan, the elimination period for the Accident only plan must be 14 days or less

State Sponsored Compulsory Disability Insurance

In some states residents are eligible for compulsory disability insurance programs with benefit periods ranging from 26 to 52 weeks. The benefits vary by state and will be considered when determining benefit amount eligibility.

Tobacco Use (Short-Term Disability and Long-Term Disability only)

Individuals who have used tobacco products within 12 months of application completion or those with positive nicotine (cotinine) urinalysis test results require tobacco user rates. Tobacco products include cigarettes, cigars, pipes, chewing tobacco, and nicotine gum and patches. Tobacco user rates are 25 percent higher than nontobacco rates. Tobacco users who stop using tobacco products for 12 consecutive months will qualify for a rate reduction. A nontobacco questionnaire and urinalysis will need to be completed.

Hazardous Avocations

Persons who engage in hazardous avocations on an amateur basis may still be eligible for disability income coverage. Avocations such as

- automobile/motorcycle/boat racing,
- hang gliding,
- skydiving/parachuting,
- scuba diving,
- rock climbing,

Similar activities should be identified during the application process and an Avocation Questionnaire (included in the application kit) must be completed. Typically, an amendment rider excluding the avocation will be attached to the policy if the application is approved.

Medical Underwriting Guidelines

Total Monthly Benefit Amount	Accident Only Disability	Short-Term Disability	Long-Term Plan		Business Overhead Expense
			2-Year and 5-Year Benefit Period	10-Year and To Age 67 Benefit Period	
\$300-\$3,000	Simplified Underwriting ¹	Simplified Underwriting ¹	Interview	Interview	Simplified Underwriting ¹
\$3,100-\$5,000		Interview		Interview, Physical Data, Blood and Urine	Interview
\$5,100-\$8,000			Interview, Physical Data, Blood and Urine	Interview, Long Form Paramed, Blood and Urine	Interview, Physical Data, Blood and Urine
\$8,100 and Above			Interview, Long Form Paramed, Blood and Urine, EKG ²	Interview, Long Form Paramed, Blood and Urine, EKG ²	Interview, Long Form Paramed, Blood and Urine, EKG ²

¹Underwriting decisions within 48 hours of initial underwriting review provided the following conditions are met:

- Applicant is in occupation class 6A, 5A, 4A, 3A, or 2A
- For Accident Only Disability coverage: Applicant is age 55 or younger and medically standard
- For Short-Term and Long-Term Disability coverage: Applicant is nontobacco, age 45 or younger, and medically standard
- No adverse information from the Medical Information Bureau
- All application questions have been clearly and completely answered and required forms and financial documents have been submitted with the application

²Age 45 and over only

Possible Underwriting Outcomes

- Standard
- Impairment Rate-Up of L (25 percent), M (50 percent), N (75 percent) and/or a BL (Benefit Limitation) for a specific condition which will exclude such condition from coverage unless the loss begins at least 12 months after the policy effective date
- Impairment Rate-Up of 7 (25 percent), 8 (50 percent), 9 (75 percent) and a # (Disease Elimination Rider) for a specific condition which will exclude such condition from coverage for as long as the rider is on the policy
- BL (Benefit Limitation) for a specific condition, which will exclude such condition from coverage unless loss begins 12 months after the policy effective date
- # (Disease Elimination Rider) for a specific condition which will exclude such condition from coverage for as long as the rider is on the policy
- Reject – No coverage available

Pre-Existing Medical Conditions

Applicants who are acutely ill, currently disabled, have surgery pending, or are recuperating from an illness or injury are generally not eligible for coverage. The underwriter will evaluate applicants with residual illnesses or injuries. Applicants with controlled, chronic conditions with appropriate medical management may be eligible for coverage.

Below is a list of some of the conditions that will result in automatic rejection of an application for disability income coverage.

AIDS/HIV/AIDS Related Complex (ARC)
Alcohol or Drug Abuse/Dependence – treatment within the past 5 years
Bipolar or Manic Depression
Cardiomyopathy
*Chronic Fatigue Syndrome
Connective Tissue Disorders – Scleroderma and Polymyositis
*Coronary Artery Bypass or Angioplasty
*Coronary Artery Disease – ACC after 6 months
*Diabetes – Type I, insulin-dependent, or juvenile
*Gastric By-pass
*Hepatitis – Present and/or chronic
Multiple Sclerosis
Muscular Dystrophy
*Myocardial Infarction/Heart Attack
Narcolepsy
Parkinson's Disease
Pending evaluation or Unconfirmed diagnosis
*Polycystic Kidney Disease
*Pregnancy
*Rheumatoid Arthritis
**Persons with these conditions may be considered for accident only coverage.*

Coverage may be available for applicants with the following pre-existing medical conditions; however, their benefits may be limited. Medical records will be required in order to make the final underwriting determination.

- Diabetes – Type II, non-insulin dependent
 - Coverage will be limited to a maximum monthly benefit of \$2,000 with a 90-day waiting period, and a 2-year benefit period. Policy will have an exclusion rider for “Diabetes Mellitus and/or Complications” and a rate increase of 75 percent
- Mental/Nervous Conditions (Anxiety, Depression, Stress, etc.)
 - **Short-Term Disability:** Coverage will be limited to a maximum monthly benefit of \$3,000 with a 60-day waiting period, and a 24-month benefit period. Policy will have a rate increase
 - **Long-Term Disability:** Coverage will be limited to a maximum monthly benefit of \$3,000 with a 90-day waiting period, and a 5-year benefit period. Policy will have an exclusion rider for “Neurosis, Psychoneurosis, Mental or Emotional, Personality or Psychotic Disorder of Any Kind”

Scheduling

After the application is completed, please schedule all required examinations with approved paramedical examination facilities. Paramedical facilities complete blood profile, urinalysis and long-form examinations.

Paramedical Facilities

Mutual of Omaha's approved paramedical facilities have blood kits and the expertise to complete our blood profile requirements. All blood specimens must be drawn using Portamedic or APPS blood kits and mailing instructions. One of these paramedical facilities must be used when a blood profile is required or requested. All specimens are sent to the Clinical Reference Laboratory (CRL) for testing.

- Portamedic 1-800-765-1010
- American Para Professional Systems (APPS) 1-800-635-1677
- ExamOne 1-877-933-9261
- Exam Management Services, Inc. (EMSI) 1-800-872-3674
- Superior Mobile Medics 1-800-898-3926

Blood Profile, Urinalysis and HIV Consent

Mutual of Omaha may require a blood profile or urinalysis. See the Underwriting Requirements Chart for specific guidelines. Laboratory tests may be requested for lesser amounts. An HIV consent form may be required in some states, consent forms will be included in the application packet.

Client Interview (PHI)

A client interview will be required for certain benefit amount/benefit period combinations. They may also be ordered at the underwriter's discretion. The interview should be completed at the time of the application or shortly thereafter. Please call **1-800-775-3000** and follow the prompts to complete a disability interview. The interviews are recorded and generally take only 10 to 20 minutes, depending on the applicant's health history. Clients should be prepared to provide physician and medication information.

Attending Physician's Statements (APS)

In order to render the most favorable decision possible, an APS may be required. The home office will initiate the request by contacting the doctor's office or medical facility in advance to confirm the availability of the medical records, cost and requirements for release. The home office will advise you of our request and periodically follow-up with the medical facility. Timely release of the requested APS depends on the quality of the contact information and the degree of cooperation afforded by the medical facility. The agent and applicant can play a crucial role in securing the APS by contacting the medical facility to reiterate the urgency and significance of obtaining the necessary information.

Notice of Underwriting Action (Pending Report)

Notice of Underwriting Action correspondence is available on SPA to confirm the underwriting requirements that are necessary to underwrite the application. For assistance in viewing this report, please contact our sales support team. If you are a Mutual of Omaha career agent, please call **1-877-617-5589**. All other agents, please call **1-800-693-6083**.

Build Chart

The build chart used for disability income insurance categorizes applicants into different risk classes according to their Body Mass Index (BMI). The BMI is a number calculated from a person's weight and height. BMI provides a reliable indicator of body fatness for most people and is used to screen for weight categories that may lead to health problems.

Use the Build Chart by first finding the applicant's height in the left-hand column and then looking across the row to find the applicant's weight in pounds. The column heading above their weight will determine their appropriate risk class.

BMI	16.4	16.5-32.4	32.5-34.9	35.0-37.4	37.5-39.9	40.0
	Substandard Rating					
Height	Decline	Standard	25%	50%	75%	Decline
4'8"	<74	74-145	146-156	157-167	168-178	179+
4'9"	<76	76-150	151-161	162-173	174-184	185+
4'10"	<79	79-155	156-167	168-179	180-191	192+
4'11"	<82	82-160	161-173	174-185	186-198	199+
5'0"	<84	84-166	167-179	180-192	193-204	205+
5'1"	<87	87-171	172-185	186-198	199-211	212+
5'2"	<90	90-177	178-191	192-205	206-218	219+
5'3"	<93	93-183	184-197	198-211	212-225	226+
5'4"	<96	96-189	190-203	204-218	219-232	233+
5'5"	<99	99-195	196-210	211-225	226-240	241+
5'6"	<102	102-201	202-216	217-232	233-247	248+
5'7"	<105	105-207	208-223	224-239	240-255	256+
5'8"	<109	109-213	214-230	231-246	247-262	263+
5'9"	<112	112-219	220-236	237-253	254-270	271+
5'10"	<115	115-226	227-243	244-261	262-278	279+
5'11"	<118	118-232	233-250	251-268	269-286	287+
6'0"	<122	122-239	240-257	258-276	277-294	295+
6'1"	<125	125-246	247-265	266-284	285-302	303+
6'2"	<129	129-252	253-272	273-291	292-311	312+
6'3"	<132	132-259	260-279	280-299	300-319	320+
6'4"	<136	136-266	267-287	288-307	308-328	329+
6'5"	<139	139-273	274-294	295-315	316-337	338+
6'6"	<143	143-280	281-302	303-324	325-345	346+
6'7"	<146	146-288	289-310	311-332	333-354	355+
6'8"	<150	150-295	296-318	319-340	341-363	364+
6'9"	<154	154-302	303-326	327-349	350-372	373+
6'10"	<158	158-310	311-334	335-358	359-382	383+
6'11"	<162	162-318	319-342	343-366	367-391	392+

Financial Underwriting Guidelines

Definitions

Salary

Salary (wage) is defined as compensation received by an employee for services performed. A salary is a fixed sum paid for a specific period of time worked, such as weekly or monthly. (Federal Tax Form W-2)

Earned Income

Earned income is income earned from employment, which would include wages, salary, tips, bonuses and other compensation. Earned income is reported on a gross, or before-tax basis. Significant changes or fluctuation in earned income may require clarification to determine the appropriate benefit amount available.

Unearned Income

Unearned (passive) income is defined as income that does not come from employment. Sources of unearned income might include income from rental properties, dividends, interest, royalties, and capital gains. One-half of any amount of unearned income in excess of \$1,500 a month will be considered as other disability benefits at the time of underwriting.

Overtime Income

Overtime income is defined as income received for working in excess of a 40-hour workweek. Overtime income should not be included when calculating monthly benefit amount eligibility.

Self-Employed

Self-employed is defined as an applicant who is operating as a sole proprietor, independent contractor, partnership or closely held corporation and has 20 percent or more ownership in a business.

Net Worth

Net Worth is defined as the value of a person's assets, including cash, minus all liabilities. The amount by which the individual's assets exceed their liabilities is considered the net worth of that person. In order to determine net worth for underwriting purposes, the primary personal residence and personal belongings may be ignored. Benefits may be limited for individuals with net worth in excess of \$2.5 million.

Bankruptcy

No coverage can be offered until two years after an applicant's bankruptcy discharge.

Depreciation

Depreciation is defined as a non-cash expense that reduces the value of an asset as a result of wear and tear, age, or obsolescence. Depreciation of assets such as furniture and equipment can be considered when determining the monthly benefit amount for a Business Operating Expense (BOE) policy. For self-employed individuals applying for disability coverage, we will add back 50 percent of the depreciation amount shown on the most recent financial statement, and consider this amount as earned income.

Future Insurability Option

When exercising the Future Insurability Option proof of income must accompany the supplemental application.

- Not available with Accident Only Disability and Short-Term Disability
- Not available with DI Choice at Work

Business Overhead Expense

One year of taxes will be required with benefits up to \$5,000 per month. Two years of taxes will be required with benefits of \$5,000 or more per month.

Income Documentation DI Choice – Individual

Employee Non-Owner

	Base Monthly Benefit Amount	Employee Non-Owner
Up to 2-Year Benefit Period	Under \$5,000	Not Required
5-Year, 10-Year and To-Age-67 Benefit Period		
	Over \$5,000	First 2 Pages of Last 2 Years 1040 Form and W2 Form

Self-Employed

	Base Monthly Benefit Amount	Sole Proprietor	Partner in Partnership	Corporation Shareholder	S-Corp Shareholder
Up to 2-Year Benefit Period	Up to \$3,000	Not Required			
	Under \$5,000	Last Year's Schedule C	Last Year's 1065, K1, Schedule E and W2 Form	Last Year's 1120, K1, Schedule E and W2 Form	Last Year's 1120S, K1, Schedule E and W2 Form
5-Year, 10-Year and To-Age-67 Benefit Period	Over \$5,000	Last 2 Years Schedule C	Last 2 Years 1065, K1, Schedule E and W2 Form	Last 2 Years 1120, K1, Schedule E and W2 Form	Both Pages of 1120S, K1 and W2 Form or Schedule E and W2 Form

Business Overhead Expense

Base Monthly Benefit Amount	Sole Proprietor	Partner in Partnership	Corporation Shareholder	S-Corp Shareholder
Under \$5,000	Last Year's Schedule C	1065 and K1 Form	1120 and K1 Form	1120S and K1 Form
Over \$5,000	Last 2 Years Schedule C	Last 2 Years 1065 and K1 Form	Last 2 Years 1120 and K1 Form	Last 2 Years 1120S and K1 Form

The last two years' financial statements are required for individuals applying for self-employed premium savings.

Note: Net income (income less business expenses prior to taxes) is used for self-employed individuals; Gross income is used for salaried individuals.

Financials required can include other forms as determined by Underwriting.

Income Qualification Table

The income qualification table shows the maximum benefit amounts available for a given income level for Accident Only Disability, Short-Term Disability and Long-Term Disability policy forms. The maximums are intended to replace a sufficient percentage of a policyholder's income to allow them to sustain their standard of living during a disability while not completely removing the financial incentive to return to work.

The table is based on annual gross (before tax) earned income. The maximum base and maximum SIS benefits available do not sum to equal the total maximum benefit available. This gives clients the flexibility to maximize either base or SIS benefits in designing the income protection plan that fits their needs.

When looking up values in the table, move to the next lower Annual Earned Income value.

(Example: \$42,500 of earned income would use the \$41,000 table values)

NOTE: For Accident Only Disability and Short-Term Disability plans, refer to the Total Maximum Monthly Benefit column since these coverages have no SIS benefits.

Annual Earned Income	Maximum Base Monthly Benefit	Maximum SIS Monthly Benefit with NO Dependents	Maximum SIS Monthly Benefit with Dependents	Total Maximum Monthly Benefit
\$15,000	\$700	\$400	\$400	\$1,000
17,000	700	500	500	1,100
19,000	700	500	500	1,200
21,000	800	700	700	1,300
23,000	800	800	900	1,400
25,000	800	900	1,000	1,600
27,000	800	1,000	1,200	1,700
29,000	900	1,000	1,200	1,800
31,000	900	1,100	1,300	1,900
33,000	1,100	1,100	1,300	2,000
35,000	1,100	1,200	1,400	2,100
37,000	1,200	1,200	1,400	2,200
39,000	1,200	1,300	1,500	2,300
41,000	1,300	1,300	1,600	2,400
43,000	1,400	1,400	1,600	2,500
45,000	1,400	1,400	1,700	2,600
47,000	1,500	1,500	1,800	2,800
49,000	1,600	1,500	1,800	2,900
51,000	1,700	1,500	1,800	2,900
53,000	1,700	1,500	1,900	3,000
55,000	1,800	1,600	1,900	3,100
57,000	1,900	1,600	1,900	3,200
59,000	2,000	1,600	2,000	3,300
61,000	2,100	1,600	2,000	3,400
63,000	2,200	1,600	2,000	3,500
65,000	2,200	1,600	2,100	3,600
67,000	2,300	1,700	2,100	3,700
69,000	2,400	1,700	2,100	3,800
71,000	2,400	1,700	2,200	3,900
73,000	2,600	1,700	2,200	4,000
75,000	2,600	1,700	2,200	4,000
80,000	2,800	1,800	2,300	4,300
85,000	3,000	1,800	2,300	4,500
90,000	3,300	1,800	2,300	4,700
95,000	3,400	1,800	2,300	4,800
100,000	3,600	1,800	2,300	5,000
105,000	3,800	1,800	2,300	5,200
110,000	4,000	1,800	2,300	5,400
115,000	4,300	1,800	2,300	5,600
120,000	4,400	1,800	2,300	5,700
125,000	4,600	1,800	2,300	5,900
130,000	4,700	1,800	2,300	6,000
135,000	4,900	1,800	2,300	6,200
140,000	5,100	1,800	2,300	6,300
145,000	5,300	1,800	2,300	6,500
150,000	5,400	1,800	2,300	6,600
155,000	5,600	1,800	2,300	6,800
160,000	5,700	1,800	2,300	6,900

Income Qualification Table (continued)

Annual Earned Income	Maximum Base Monthly Benefit	Maximum SIS Monthly Benefit with NO Dependents	Maximum SIS Monthly Benefit with Dependents	Total Maximum Monthly Benefit
\$165,000	\$5,800	\$1,800	\$2,300	\$7,000
170,000	6,000	1,800	2,300	7,200
175,000	6,100	1,800	2,300	7,300
180,000	6,300	1,800	2,300	7,400
185,000	6,400	1,800	2,300	7,500
190,000	6,600	1,800	2,300	7,700
195,000	6,700	1,800	2,300	7,800
200,000	6,800	1,800	2,300	7,900
210,000	7,000	1,800	2,300	8,100
220,000	7,300	1,800	2,300	8,300
230,000	7,600	1,800	2,300	8,600
240,000	7,800	1,800	2,300	8,800
250,000	8,000	1,800	2,300	9,000
260,000	8,200	1,800	2,300	9,200
270,000	8,400	1,800	2,300	9,400
280,000	8,700	1,800	2,300	9,600
290,000	8,900	1,800	2,300	9,800
300,000	9,100	1,800	2,300	10,000
310,000	9,300	1,800	2,300	10,200
320,000	9,500	1,800	2,300	10,400
330,000	9,700	1,800	2,300	10,600
340,000	9,900	1,800	2,300	10,800
350,000	10,000	1,800	2,300	11,100
360,000	10,000	1,800	2,300	11,300
370,000	10,000	1,800	2,300	11,500
380,000	10,000	1,800	2,300	11,700
390,000	10,000	1,800	2,300	11,900
400,000	10,000	1,800	2,300	12,200
410,000	10,000	1,800	2,300	12,300
420,000	10,000	1,800	2,300	12,300
430,000	10,000	1,800	2,300	12,300
440,000	10,000	1,800	2,300	12,300
450,000	10,000	1,800	2,300	12,300
460,000	10,000	1,800	2,300	12,300
470,000	10,000	1,800	2,300	12,300
480,000	10,000	1,800	2,300	12,300
490,000	10,000	1,800	2,300	12,300
500,000	10,000	1,800	2,300	12,300

Coordination with Group Long-Term Disability

In order to determine the approximate benefit amount that can be offered to clients with group disability insurance, multiply the Total Maximum Monthly Benefit column of the Income Qualification Table by 1.20, then subtract the total group disability monthly benefit amounts they are eligible for. This amount may vary based on whether the group coverage is employer- or employee-paid and occupational class.

State Disability Insurance (SDI)

Some states offer state disability benefits to their working residents. In an effort to coordinate individual disability benefits with the state coverage, policies for all individuals that are eligible for New Jersey, Rhode Island and California state disability coverage will include a Benefit Reduction Rider. Since this rider reduces benefits payable due to coverage provided by the state, *premiums are also reduced for your clients*. The calculated state disability benefit will be subtracted first from the base benefit, then from the SIS benefit (if any) during the state disability insurance benefit period. A minimum of a \$100 monthly benefit will remain after application of the Benefit Reduction Rider (i.e., after applying the Benefits Reduction Rider at claim, your client's monthly benefit cannot be reduced to an amount less than \$100).

Also, individuals eligible for New Jersey, Rhode Island, Hawaii and California state disability will **not** be eligible elimination periods of less than 30 days or benefit periods less than 12 months (24 months in California).

Occupational Underwriting

These occupational guidelines are designed to assist in the proper occupational classification of applicants for disability income insurance. The classifications are based on factors such as

- degree of education, training, and skill demanded by the occupation,
- level of manual dexterity and physical effort required,
- environmental hazards to health and safety present in the workplace,
- employment stability,
- economic factors specific to the occupation/industry, and
- past company claims experience

Some occupations are not specifically listed in the Occupational Manual. In these cases, please refer to the General Description of Occupational Classes below or contact the Underwriting Support Unit at **1-800-693-6083**.

It is important that applicants be classified accurately according to these guidelines since occupational class determines the premium rate and the amount of coverage that is available. As a result, each applicant's specific duties must be accurately described, as well as the percentage of time each of the duties is performed. This information, more frequently than the job title, will be the basis for a fair occupational classification. The occupational classes contained in the manual are guidelines only and Underwriting reserves the right to adjust these classifications if specific job duties or circumstances suggest such action is warranted.

In certain cases, additional requirements are included in the job description, such as minimum income tests. Unless otherwise noted, applicants who cannot comply with these additional requirements are generally not eligible for coverage, but check with an underwriter if you're not sure.

Occupations are grouped by general industry. To locate an occupation, look first alphabetically for the job description and, if unable to locate, then check by industry.

General Description of Occupational Classes

- Class 6A** Contains only the most stable executive and professional occupations where work is performed in an office setting with no environmental hazards, no direct supervision of persons with manual responsibilities and minimal travel.
- Class 5A** Contains executive and professional occupations where work is performed in an office setting with no environmental hazards, no direct supervision of persons with manual responsibilities and minimal travel.
- Class 4A** Contains other executive and professional occupations where most work is performed in an office or clinical setting with minimal environmental hazards and limited direct supervision of persons with manual responsibilities.
- Class 3A** Contains a variety of managerial, professional, and technical occupations including many health care occupations. The majority of work is performed in a setting with minimal environmental hazards.
- Class 2A** Contains occupations that require more movement and travel or more manual dexterity or light physical effort. Some environmental hazards may be present in the work setting.
- Class 1A** Contains occupations with a greater emphasis on moderate to heavy physical labor and more direct exposure to workplace hazards.
- Class S** Contains occupations with an emphasis on moderate to heavy physical labor and significant exposure to workplace hazards. These occupations may be eligible for short-term coverage if the employee is covered under state or federal workers' compensation, employers' liability or other occupational disease law.
- Class N** Contains occupations that are uninsurable due to excessive exposure to workplace hazards and relatively poor earned income or job stability.

Multiple Occupations

In the event an applicant has more than one occupation, the occupational classification will be based on the occupation involving the greatest level of environmental hazards. Income from the part-time or seasonal occupations will generally not be considered when determining benefit eligibility.

Maximum Benefit Amounts

The maximum base benefit amounts available by occupational class are shown in the table below.

Occupational Class	Maximum Base Benefit			
	Accident Only Disability	Short-Term Disability	Long-Term Disability	Business Overhead Expense
6A, 5A, 4A	\$5,000	\$5,000	\$10,000	\$15,000
3A	\$5,000	\$5,000	\$8,000	\$12,000
2A	\$5,000	\$5,000	\$6,000	\$6,000
1A	\$5,000	\$5,000	\$5,000	\$5,000
S	\$5,000	\$5,000	N/A	N/A

Accident Only Disability, Short-Term Disability and Long-Term Disability are subject to additional or program limitations based on insurable income that are contained in the Income Qualification Table section of this guide.

The maximum BOE monthly benefit may not exceed the average monthly operating expenses for the 12-month period preceding the date of the application.

Special Restrictions for Certain Types of Employees

Some employees are eligible for unusually generous disability income benefits through their employer. As a result, individual disability income benefits need to be carefully coordinated with these employer-sponsored plans before the policy is issued in order to avoid overinsurance.

Below are some of the restrictions that will apply to these types of employees.

Railroad Employees:

Railroad employees are eligible for:

- A maximum Base Monthly Benefit Amount of \$500, and
- A minimum 90-day Elimination Period, and
- A maximum 1-year Benefit Period

Government Employees (Federal, County, State and Municipal):

Government employees are eligible for:

- For benefit periods of 12 months or less, coverage can be issued the maximum base benefit allowed per the Applicant's income, and
- For benefit periods of two years or more, a maximum Base Monthly Benefit Amount of 20 percent of earned income up to \$2,000. The SIS benefit rider may be added in addition to the base benefit under the Long-Term Accident and Sickness plan, and
- A minimum 30-day Elimination Period, and
- Applicants are ineligible for the Future Insurability Option Rider, and
- Benefits applied for will be coordinated with other disability coverages currently in force

In-Home Daycare Providers

A copy of last two years of taxes will be required to verify net income.

Persons covered under CALSTRS or CALPERS

No coverage available.

Teachers in the state of New York:

- For benefit periods of 10 years or to age 67, maximum of \$500 base benefit and \$1,200 SIS benefit. No FIO rider available
- For benefit periods of 5 years or less, no restrictions

Business Owner – Individual Home-Based Occupations

Business owners and self-employed professionals working from home must conform to the eligibility requirements for self-employed individuals in the General Underwriting Guidelines (Section 5).

Salaried (W2) employees and telecommuters working from home are normally eligible for disability income coverage.

Premium Savings for Self-Employed Individuals

Self-employed individuals who meet the following eligibility criteria may qualify for premium savings of 15 percent.

- Not available with Business Overhead Expense coverage
- Minimum two years in business, and
- A minimum income of \$32,000 after expenses and before taxes for each of the past two years, and
- Is not a member of a health care occupation
- Income documentation required

Self-employed individuals who do not qualify for premium savings must conform to the eligibility requirements for self-employed individuals in the General Underwriting Guidelines (Section 5) and must provide the income documentation indicated in the Financial Underwriting Guidelines (Section 7).

Business Owner Upgrades – DI Choice at Work only

Qualified business owners who meet the following criteria will be eligible to be written at one occupation class higher than otherwise available:

- Minimum two years in business
- Minimum income of \$32,000 after expenses and before taxes for each of the past two years
- Is not a member of the health care profession
- Has at least two other employees that are issued coverage under the DI Choice at Work Program Additional income information can either be added to the census or detailed under separate cover. This includes:
 - Percent of Ownership – minimum 20 percent
 - Gross Business Income
 - Business Expense/Deductions

Uninsurable Occupations

Some occupations are uninsurable due to excessive exposure to workplace hazards and relatively poor earned income or job stability. Here is a partial list of uninsurable occupations:

Acids/Alkalis/Carcinogens/Explosives Worker
Actor/Actress/Entertainer
Air Traffic Control Specialist
Animal Handler/Trainer
Armed Forces Personnel
Asbestos Removal Worker
Astrologer
Bartender
Bicycle Messenger
Bridge/Tunnel Construction Worker
Busboy/Busgirl
Chicken/Poultry Cleaner/Cutter/Dresser/Processor
Circus/Carnival Worker
Crew Member of Cargo/Passenger Ship
Crop Duster
Day Trader
Diver
Explosive Handler/Blaster
Fashion Model
Fishermen
Flight Attendant/Steward/Stewardess
Floor Trader (Stocks/Bonds/Commodities/Futures/Options)
Freelance Advertiser/Artist/Writer
Garbage/Sanitation Truck/Race Car/Taxicab/Bus/Limousine Driver
Horse Breaker
Hunting/Fishing/Mountain Climbing/River Guide
Martial Arts Instructor
Merchant Marine
Musician/Singer (Night Club/Restaurant/Lounge/Tavern)
Nanny/Au Pair
Packinghouse Worker
Painter (Exterior Non-Residential)
Pawn Broker
Private Detective
Private Duty Nurse (Outside Hospital)
Professional Athlete/Jockey
Professional Gambler
Rendering Plant Worker
Retired Person
Rodeo Performer
Roofer
Sandblaster
Ski Instructor
Steeplejack
Student (Full-Time)
Stuntlady/Stuntman
Tattoo Artist/Body Piercing
Temporary/Seasonal Worker
Tower Erector
Tree Trimmer/Tree Surgeon
Waiter/Waitress
Window Cleaner (More Than 2 Stories)

Occupational Classification Manual

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
ACCOUNTANT	
Certified Public Accountant	6A
4-Year Accounting Degree	6A
Auditor	5A
Other Accountant/Bookkeeper	4A
ACTUARY	
FSA/FCAS	6A
ASA/ACAS/EA	5A
Others	5A
ACUPUNCTURIST	
At Least 3 Years Experience and \$35,000 Income in Each of Last 2 Years	3A
Other Licensed	2A
ADVERTISING	
Account Executive (At Least \$75,000 Income)	5A
Account Executive (Other)	4A
Art Director/Graphic Artist/Copywriter	4A
Freelance	N
AGENT (See INSURANCE INDUSTRY)	
AGRICULTURE (See FARMING AND RANCHING)	
ANESTHESIOLOGIST (See HEALTH CARE – PHYSICIANS)	
ANIMALS	
Attendants/Trainers	
Animal Handlers (Zoo)	N
Kennel/Daycare Operator (Not in Home)	1A
Pet Groomer/Pet Shop Worker	1A
Dog/Cat Breeder	N
Other Zoo Workers	1A
APARTMENT HOUSE MANAGER	
Not Living on Premises, No Maintenance Work	3A
Living On or Off Premises with Maintenance Work	1A
ARCHITECT	
Bachelor's Degree (90% Office and Consulting)	6A
Draftsman (90% Office and Consulting)	5A
Others	4A
ARMED FORCES PERSONNEL	
ART DEALER/GALLERY OWNER/MUSEUM CURATOR	
At Least \$45,000 Income in Each of Last 2 Years	4A
ARTIST	
Cartoonist/Illustrator (Salaried Only)	3A
Commercial Artist/Graphic Artist/Commercial Designer (Salaried Only)	3A
Self-Employed/Freelance	N
ASTROLOGER	
N	

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
ASTRONOMER (See SCIENTIST)	
ATHLETICS	
Professional or Collegiate Athletics	
Athletic Director	3A
Coach	3A
Trainer	2A
Professional Athlete/Jockey	N
ATTORNEY (See LEGAL)	
AUTHOR (See WRITER)	
AUTOMOBILE DEALERSHIP	
New	
General Manager/Finance Manager/Business Manager	4A
Salesperson/Sales Manager (At Least \$35,000 Income in Each of Last 2 Years)	4A
Salesperson/Sales Manager (Less than \$35,000 Income in Each of Last 2 Years)	3A
Washer/Polisher	1A
Parts/Supply Clerk (See CLERICAL)	
Service Manager (See SERVICE/REPAIR/INSTALLATION – AUTOMOBILE)	
Used	
General Manager/Finance Manager/Business Manager	3A
Salesperson/Sales Manager (At Least \$35,000 Income in Each of Last 2 Years)	3A
Salesperson/Sales Manager (Less than \$35,000 Income in Each of Last 2 Years)	2A
Washer/Polisher	1A
Parts/Supply Clerk (See CLERICAL)	
Service Manager (See SERVICE/REPAIR/INSTALLATION – AUTOMOBILE)	
AVIATION	
Ticket Agent/Administrative Personnel	4A
Pilot/Officer, Commercial Scheduled Airline (Minimum 60-day Elimination Period)	2A
Pilot/Officer, Corporation or Executive Carriers (Minimum 60-day Elimination Period)	2A
Pilot/Officer, Nonscheduled Airline/Charter (Minimum 60-day Elimination Period)	1A
Freight or Baggage Handler/Bellhop/Porter	1A
Air Traffic Control Specialist	N
Crop Duster/Other Pilots	N
Flight Attendant/Steward/Stewardess	N
Air Marshal (See LAW ENFORCEMENT)	
BAIL BONDSMAN	
Office Duties Only	2A
All Others	N

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
BAKERY	
Supervisory/Administrative Duties Only	3A
Baker	2A
Delivery	1A
BANKING	
Officer/Bank Examiner	5A
Loan Originator/Credit Analyst (Office Duties Only)	4A
Cashier/Teller	3A
BARBER/BEAUTICIAN	
Not in Home	
Cosmetologist/Hairstylist (Shopowners Only)	3A
Cosmetologist/Hairstylist (Other)	2A
Barber	2A
Electrologist/Manicurist	2A
BIOCHEMIST (See SCIENTIST)	
BLACKSMITH/FARRIER/HORSESHOER	1A
BOTANIST (See Scientist)	
BRICK WORKER (See Construction – General)	
BROKER	
Commodities/Futures/Options	
At Least \$75,000 Income in Each of Last 2 Years	4A
At Least \$45,000 Income in Each of Last 2 Years	4A
Floor Trader	N
Others	N
Insurance	
(See Insurance INDUSTRY)	
Stocks/Bonds	
At Least \$75,000 Income in Each of Last 2 Years	5A
At Least \$45,000 Income in Each of Last 2 Years	4A
Others	2A
Floor Trader	N
Other Brokers	
At Least \$45,000 Income in Each of Last 2 Years	4A
Others	N
BUTCHER	
	2A
BUTLER	
	3A
CARPENTER/CABINET MAKER	
	2A
CARPET CLEANER OR INSTALLER	
	2A
CARTOGRAPHER	
	3A
CARTOONIST (See ARTIST)	
CASINO WORKERS	
Manager/Supervisor/Operator (No Floor Duties)	3A
Cashier (Not on Floor)	2A
Dealers/Pit Boss/Workers on Floor (Minimum 1 Year with Employer)	1A
Others	N

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
CATERER	
At Least \$35,000 Income in Each of Last 2 Years	4A
CHEMICAL INDUSTRY	
Acids, Alkalis, Carcinogens, or Explosives	
All Workers	N
No Acids, Alkalis, Carcinogens, or Explosives	
Lab Technician	3A
Skilled Worker	3A
Machine Operator	1A
Tester	1A
CHEMIST (See SCIENTIST)	
CHIMNEYSWEEP	1A
CHIROPRACTOR (See HEALTH CARE – Other)	
CIRCUS/CARNIVAL WORKERS	N
CIVIC CENTERS/CONVENTION CENTERS/ARENAS	
Administrator/Manager	4A
Clerical/Office Personnel	3A
Production Workers (Lights, Property, Sound)	2A
Concession Workers	1A
CLEANING	
Supervisory/Administrative Duties Only	3A
Custodians/Janitors/Other Clean-Up Workers	1A
Window Cleaner (2 Stories or Less)	1A
Window Cleaner (More Than 2 Stories)	N
CLERGY	
Minister/Rabbi/Pastor	4A
CLERICAL	
Data Entry	3A
General	3A
Quality Control	3A
Shipping and Receiving (No Freight Handling)	3A
Inventory Control	2A
Parts or Stock Clerk	2A
CLOTHING INDUSTRY	
Cloth/Clothing/Fashion Designer	3A
Tailor/Dressmaker/Seamstress (Not in Home)	2A
Fashion Model	N
COACH (See ATHLETICS)	
COLUMNIST (See WRITER)	
COMPUTER INDUSTRY	
Engineer/Architect (Degree in Computer Science or 3 Years Experience)	6A
Web Developer/Designer (Degree in Computer Science or 3 Years Experience)	6A
Programmer/Systems Analyst/Security Specialist/Engineer	6A
Administrator	4A
Capacity Management Specialist	4A

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
CONSTRUCTION	
Bridge	
Painter	N
Structural Steel Workers	N
General	
Job Supervisor/Building Contractor (90% of Duties are Supervisory)	4A
Superintendent/Foreman (90% of Duties are Supervisory)	4A
Dry Wall Worker/Plasterer	2A
Floor Covering Layer/Linoleum Worker	2A
Painter (Interior)	2A
General Laborer	1A
Heavy Equipment Operator (Grader/Bulldozer/Earth Mover/Crane)	1A
Mason/Brickworker/Cement Worker/Tilesetter	1A
Monument Worker/Stone Carver	1A
Paperhanger	1A
Upholsterer	1A
Painter (Exterior Residential)	1A
Painter (Exterior Non-Residential)	N
Asbestos Removal Workers	N
Explosive Handler/Blaster	N
Roofer	N
Sandblaster	N
Steeplejack	N
Tower Erectors	N
Welder	N
Carpenter (See CARPENTER/CABINET MAKER)	
Electrician (See ELECTRICAL INDUSTRY)	
Plumber (See PLUMBER)	
Road	
Highway, Road or Street Construction Worker/Laborer	1A
Sewer	
Sewer Construction (Except Tunnel)	1A
Tunnel	
Tunnel Workers (Shaft or Subway)	N
CONSULTANT/LOBBYIST	
At Least \$75,000 Income in Each of Last 2 Years	5A
At Least \$45,000 Income in Each of Last 2 Years	4A
Others	3A
CORPORATE OFFICER/EXECUTIVE	
Administrative Duties Only, At Least \$75,000 Income	6A
Administrative Duties Only, At Least \$45,000 Income	5A
Others (Administrative Duties Only)	4A

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
DAYCARE	
Adult	
Not in Home or on Property (Owner/Director, Administrative Duties Only)	4A
Not in Home or on Property	3A
Child	
Not in Home or on Property (Owner/Director, Administrative Duties Only)	4A
In Home (State Licensed, At Least 2 Years in Business, Minimum 3 Children Unrelated to Provider)	2A
Not in Home or on Property	2A
Nanny/Au Pair	N
DAY TRADER	
	N
DENTIST (See HEALTH CARE – Dentistry)	
DERMATOLOGIST (See HEALTH CARE – Physicians)	
DISPATCHER	
Airlines/Auto/Bus/Truck/Taxi (Office Duties Only)	3A
DIVER	
	N
DRESSMAKER (See CLOTHING INDUSTRY)	
DRIVER	
Armored Car	2A
Delivery or Route (Local, No Loading or Unloading)	2A
Emergency Vehicle	1A
Fork Lift Operator	1A
Tractor Trailer/Truck (Minimum 60-Day Elimination Period)	1A
Garbage/Sanitation Truck	N
Racing (All Types)	N
Taxicab/Bus/Limousine	N
Heavy Equipment Operator (See CONSTRUCTION)	
DRY CLEANING/LAUNDRY	
Owner/Manager/Supervisor	4A
Workers	2A
ECONOMIST	
Masters/Ph.D. (90% Office Duties)	6A
Other (90% Office Duties)	5A
EDITOR (See PRINTING AND PUBLISHING)	
EDUCATION (See TEACHING/INSTRUCTION)	
ELECTRICAL INDUSTRY	
Engineer (Office Duties Only)	4A
Electrician (Commercial or Residential)	3A
Field Supervisor/Estimator	2A
Meter Installer	1A
Meter Reader or Inspector	1A
Overhead Lines/Conduits/Tunnels	S

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
ENERGY INDUSTRY	
Electric/Solar/Nuclear/Oil/Gas	
Manager/Supervisor/Engineer (Office Duties Only)	4A
Other Employees	S
ENGINEER	
Registered Professional Engineer (Office Duties Only)	6A
Other Professional Degrees (Office Duties Only)	6A
Others With No Degree (Office Duties Only)	5A
Inspector/Supervisor (With Field Duties)	2A
ENTERTAINMENT INDUSTRY	
Announcer/Disc Jockey/Commentator (Studio Duties Only)	4A
Director	4A
Producer	4A
Studio Engineer	4A
Technician	3A
Reporter (No Field Duties)	3A
Reporter (With Field Duties)	2A
Production Workers (Light/Property/Sound)	1A
Actor/Actress/Entertainer	N
Camera Operator/Photographer (See PHOTOGRAPHER)	
Writer, Script (See WRITER)	
EXECUTIVE (See CORPORATE OFFICER/EXECUTIVE)	
EXTERMINATOR/FUMIGATOR	1A
FAMILY PRACTICE (See HEALTH CARE – Physicians)	
FARMING AND RANCHING	
Farm Implement Dealer (Office Duties Only)	3A
Auctioneer, Retail or Wholesale (Includes Livestock)	2A
Beekeeper (Apiarist)	2A
Buyer, Agricultural and Livestock Products	2A
Chicken/Poultry Grower or Raiser	2A
Citrus Fruit Grower	2A
Dairy Farmer	2A
Farmer/Tree Farmer	2A
Grain Elevators or Mills (Office Workers)	2A
Livestock Raiser or Feeder/Rancher	2A
Manager/Superintendent	2A
Orchardist	2A
Tobacco Farmer or Grower	2A
Horse Trainer or Owner (No Racing or Jumping)	1A
Millwright	1A
Winery Worker	1A
Dairy Workers	S
Grain Elevators or Mills (Non-Office Workers)	N
Horse Breaker	N
Blacksmith (See BLACKSMITH/FARRIER/HORSESHOER)	
Farrier (See BLACKSMITH/FARRIER/HORSESHOER)	
Horseshoer (See BLACKSMITH/FARRIER/HORSESHOER)	

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
FINANCIAL PLANNER	
At Least \$75,000 Income in Each of Last 2 Years	5A
At Least \$45,000 Income in Each of Last 2 Years	4A
Others	3A
FIRE FIGHTER/EMERGENCY MEDICAL TECHNICIAN	
Rural Areas or Metropolitan Areas with Populations Less Than 200,000	1A
Metropolitan Areas with Population 200,000 or More	S
FISHING INDUSTRY	
Captain, Sport Fishing Boat (Tourist)	1A
Fish Hatchery Worker	1A
Fishermen and Surface Workers	N
FLORIST	
Administrative or Sales Only (No Greenhouse Work)	3A
Others With Greenhouse Work	2A
FOREST RANGER	2A
FUMIGATOR (See EXTERMINATOR/FUMIGATOR)	
GAMBLER	
Professional	N
GARBAGE COLLECTOR	N
GARDENER (See HORTICULTURIST)	
GEOLOGIST (See SCIENTIST)	
GLASS INDUSTRY	
Lens Grinder/Polisher	3A
Glass Products Worker	1A
Glazier	1A
GOLF COURSE/COUNTRY CLUB	
Manager/Proprietor	3A
Club Professional, Golf or Tennis (Full-time Only)	2A
Supervisor of Grounds Crew (Light Physical Activity)	2A
Greenskeeper/Groundskeeper	1A
GOVERNMENT EMPLOYEES (See specific occupation/profession/duties)	
GUIDE	
Tour Guide	2A
Hunting/Fishing	N
Mountain Climbing or River	N
HEALTH CARE	
Dentistry	
Dentist, General	3A
Dentist, Specialty (Orthodontist/Periodontal)	3A
Dental Assistant	2A
Dental Hygienist	2A
Lab Technician	2A
Midwife	
Registered Nurse (Hospital/Clinic/Doctor's Office Only)	3A
Others	S

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
HEALTH CARE (cont.)	
Nurses	
Nurse Anesthetist	4A
Nurse Practitioner	4A
School Nurse (Full-time Only)	3A
RN/LPN/LVN: Doctor's Office or Clinic Only	3A
RN/LPN/LVN: Hospital, Nursing Home, Hospice or HHC (Minimum 30-day Elimination Period)	2A
Certified Nurse Aide (CNA): Doctor's Office or Clinic Only	2A
CNA: Hospital, Nursing Home, Hospice or HHC (Minimum 30-day Elimination Period)	1A
Home Health Care Provider Other Than RN/LPN/LVN/CNA (Minimum 30-day Elimination Period)	1A
Nurse in Psychiatric Hospital/Prison/Jail	S
Private Duty Nurse (Outside Hospital)	N
Pharmacy	
Registered Pharmacist	6A
Pharmacy Technician	4A
Physicians	
Family Practice/Pediatrician	4A
Internal Medicine	4A
Anesthesiologist	3A
Dermatologist	3A
Emergency Room	3A
Obstetrics/Gynecology	3A
Ophthalmologist	3A
Pathologist	3A
Psychiatrist	5A
Radiologist	3A
Surgeon	3A
Urologist	3A
Specialty Not Listed, No Surgery and No Emergency Room Work	3A
Technicians	
Dialysis, ECG, Laboratory, Ultrasound, X-ray (At Least \$50,000 Income)	4A
Dialysis, ECG, Laboratory, Ultrasound, X-ray (Less Than \$50,000 Income)	3A

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
HEALTH CARE (cont.)	
Therapists (Hospital, Clinic, Doctor's Office)	
Audiologist	4A
Physical	4A
Psychologist/Counselor (Licensed and Ph.D.)	4A
Psychologist/Counselor (Licensed Only)	4A
Respiratory	4A
Speech (Registered or Licensed)	4A
Assistants	3A
Occupational	3A
Massage (Certified or Licensed)	2A
Others	N
Therapists (Home Health Care)	
Physical	3A
Speech (Registered or Licensed)	3A
Assistants	2A
Occupational	2A
Respiratory	2A
Other	
Administrator	4A
Naturopath	4A
Nutritionist or Dietician (No Food Preparation)	4A
Optometrist	4A
Osteopath	4A
Physician Assistant (At Least \$50,000 Income)	4A
Physician Assistant (Less Than \$50,000 Income)	3A
Podiatrist	3A
Chiropractor	2A

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
HORTICULTURIST	
Gardener/Greenhouse Worker/Nursery Worker	1A
HOTEL/MOTEL/INN	
Manager (Office Duties Only)	4A
Desk Clerk	3A
Caretaker	1A
Maid/Housekeeper (See MAID)	
ILLUSTRATOR (See ARTIST)	
INNKEEPER (See HOTEL/MOTEL/INN)	
INSURANCE INDUSTRY	
Agent/Broker (At Least \$75,000 Income in Each of Last 2 Years)	5A
Agent/Broker (At Least \$45,000 Income in Each of Last 2 Years)	4A
Claims Examiner/Underwriter (Office Duties Only)	5A
General Agent	4A
Claims Examiner/Underwriter (With Field Duties)	3A
Clerk	3A
Office Manager	3A
Other Agent/Broker	3A
INTERIOR DESIGNER/DECORATOR	
4-Year Degree (Consulting Only)	3A
Others	2A
INTERNAL MEDICINE (See HEALTH CARE – Physicians)	
INTERPRETER/TRANSLATOR	4A
JEWELRY	
Certified Gemologist/Certified Gemologist Appraiser	3A
Others (Office Duties Only)	3A
Goldsmith/Silversmith/Diamond Cutter	2A
JOURNALIST (See WRITER)	
LANDSCAPING	
Landscape Architect (90% Supervisory/Administrative)	3A
90% Supervisory/Administrative Duties	2A
Tree Trimmer/Tree Surgeon	N
Other Workers Including Lawn Mowers	1A

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
LAW ENFORCEMENT	
City/County/State Police	
Dispatcher, Communications	3A
City Police Officer (Metropolitan Area Less Than 2 Million)	1A
Detective/Inspector	1A
Marshals/Sheriffs/Deputies	1A
Meter Person (Not Making Arrests)	1A
State Highway Patrol Officer	1A
City Police Officer (Metropolitan Area 2 Million or More)	S
Customs and Immigration	
Inspector (Inside Duties Only)	4A
Juvenile Detention Facility	
All Workers	S
Prison or Correctional Facility	
Warden	3A
Guard/Jailer/Matron	S
Other	
Air Marshal	2A
Fish and Game Warden	2A
Guard, Security or Bank	2A
Process Server	1A
Parole/Probation Officer	S
LAWYER (See LEGAL)	
LEGAL	
Attorney	6A
Judge	6A
Legal Assistant (Certified)	5A
Paralegal	5A
Legal Assistant (Other)	4A
Secretary	4A
Stenographer	3A
Court Reporter	3A
Bailiff	1A
LIBRARIAN	4A
LIQUOR DISTRIBUTION	
Wholesaler	4A
Liquor Store Owner/Manager	2A
Bartender	N
LOBBYIST (See CONSULTANT/LOBBYIST)	
LOCKSMITH/KEY MAKER	3A
LUMBER INDUSTRY	
Office Duties Only	4A
Others	N
MAID	1A

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
MANUFACTURING/PROCESSING/PACKAGING	
Automobile Manufacturing	
All Workers	N
Other Manufacturing	
Administrative/Supervisory Duties Only	4A
Foreman/Inspector/Superintendent	3A
Lab Technician	3A
Receiving/Shipping Clerk	3A
Other Skilled Worker	3A
Assembler/Benchworker/Toolmaker	1A
Crane Operator	1A
Diemaker/Engraver	1A
Installer/Tester	1A
Machine Operator/Machinist/Mechanic/Milwright	1A
Alcohol/Brewery/Distillery/Winery Plant Workers	1A
Creamery/Dairy Plant Workers	1A
Factory Canning/Preserving Workers	1A
Refrigeration Plant Workers	1A
Sugar Refinery Worker	1A
Chicken/Poultry Cleaner/Cutter/Dresser or Processor	N
Packinghouse Worker	N
Rendering Plant Workers	N
MARINE INDUSTRY	
Inland Vessels	
Pilot	1A
Large Seagoing Vessels/Freighters	
Passenger Ship: Pilot/Officers	4A
Cargo Ship: Pilot/Officers	3A
Passenger Ship: Radio Operator/Purser/Chief Steward	2A
Harbor Master	2A
Harbor Pilot	1A
Dockworker, Stevedore, Wharfworker	S
Cargo Ship: Crew	N
Passenger Ship: Crew	N
MASON (See CONSTRUCTION – General)	
MASSAGE (See HEALTH CARE – Therapists (Hospital, Clinic, Doctor’s Office))	
MECHANIC (See SERVICE/REPAIR/INSTALLATION)	
MESSENGER	
Inside the Office	2A
Outside or Between Offices	1A
Bicycle	N
MIDWIFE (See HEALTH CARE – Midwife)	
MINERALOGIST (See SCIENTIST)	

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
MINING	
Manager/Owner (Office Duties Only)	4A
Outside Foreman (Surface Only)	2A
Others	N
MINISTER (See CLERGY)	
MORTICIAN	
No Embalming	4A
With Embalming	3A
MOTEL (See HOTEL/MOTEL/INN)	
MOVING AND STORAGE	
Owner/Manager (Office Duties Only)	4A
Estimator/Foreman (No Manual Duties)	3A
Mover, Furniture and Household Goods	S
MUSEUM CURATOR (See ART DEALER/GALLERY OWNER/MUSEUM CURATOR)	
MUSIC	
Musician/Singer (Full-Time Orchestra/Studio Composer/Arranger)	3A
Piano Tuner/Teacher	3A
Musician/Singer (Night Club/Restaurant/Lounge/Tavern)	N
NATURAL GAS (See PETROLEUM INDUSTRY)	
NURSE (See HEALTH CARE – Nurse)	
OBSTETRICS/GYNECOLOGY (See HEALTH CARE – Physicians)	
OFFICE WORKER	
Administrative Duties Only (At Least \$40,000 Income)	5A
Administrative Duties Only (Less Than \$40,000 Income)	4A
Administrative Assistant	4A
Receptionist	4A
Secretary	4A
Others	3A
OIL (See PETROLEUM INDUSTRY)	
OPHTHALMOLOGIST (See HEALTH CARE – Physician)	
OPTOMETRIST (See HEALTH CARE – Other)	
PAINTER (See CONSTRUCTION – General)	
PARALEGAL (See LEGAL)	
PATHOLOGIST (See HEALTH CARE – Physicians)	
PAWN BROKER	N
PEDIATRICIAN (See HEALTH CARE – Physicians)	
PETROLEUM INDUSTRY	
Foreman	3A
Manager/Superintendent (Supervisory Only)	3A
Mechanic	1A
Others (Offshore Workers)	N
PHARMACIST (See HEALTH CARE – Pharmacy)	
PHOTOGRAPHER	
Commercial, Studio	4A
Camera Operator, Motion Picture/Television	3A
Commercial, Non-Studio (Sporting Events, Corporate Functions, Concerts, Filming on Location)	2A

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
PHYSICAL THERAPIST (See HEALTH CARE – Therapists)	
PHYSICIAN ASSISTANT (See HEALTH CARE – Other)	
PHYSICIST (See SCIENTIST)	
PIPEFITTER/STEAMFITTER	1A
PLUMBER	2A
PODIATRIST (See HEALTH CARE – Others)	
POSTAL EMPLOYEES	
Postal Inspector (Office Only)	2A
Driver/Letter Carrier/Mail Handler/Clerk (Minimum 30-Day Elimination Period)	1A
PRINTING AND PUBLISHING	
Books/Newspapers/Periodicals	
Editor/Publisher	5A
Copywriter (Office Duties Only)	3A
Foreman	3A
Photographer	3A
Graphic/Lithographic Artist	2A
Proofreader	2A
Compositor/Lithographer/Pressman/Typesetter	1A
Engraver, Photoengraver	1A
Machine Operator	1A
Maintenance Mechanic	1A
Bookbinder	1A
Newspaper Delivery (See DRIVER)	
PRIVATE DETECTIVE	N
PSYCHIATRIST (See HEALTH CARE – Physicians)	
PSYCHOLOGIST (See HEALTH CARE – Therapists)	
PUBLISHER (See PRINTING AND PUBLISHING)	
RABBI (See CLERGY)	
RADIOLOGIST (See HEALTH CARE – Physicians)	
RAILROAD	
Conductor	2A
Dispatcher	2A
Foreman	2A
Inspector	2A
Signalman	2A
Tower Electronic Switching and Traffic Controller	2A
Yard Master	2A
Other (Office Duties Only)	2A
Engineer	1A
Maintenance Mechanic	1A
Track and Section Workers	S
Train Crew	S
Yard Workers	S

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
REAL ESTATE	
Agent/Broker (At Least \$75,000 Income in Each of Last 2 Years)	5A
Agent/Broker (At Least \$45,000 Income in Each of Last 2 Years)	4A
Abstractor/Abstract Clerk	3A
Agent/Broker (Others)	3A
Appraiser	3A
Escrow/Title Clerks	3A
Home Inspector	2A
REPORTER (See ENTERTAINMENT INDUSTRY)	
RESTAURANT/BAR	
Chef (At Least \$45,000 Income)	4A
Host/Hostess/Cashier (Sole Duties)	3A
Owner/Operator/Manager (No Bartending Duties)	3A
Cook	2A
Busboy/Busgirl	N
Waiter/Waitress	N
Baker (See BAKER)	
Bartender (See LIQUOR DISTRIBUTION – Bartender)	
RETAIL SALES	
Convenience Store	
Owner/Manager/Supervisor	2A
Other Employees	N
General Merchandise	
Buyer or Purchasing Agent	4A
Owner/Manager/Supervisor	4A
Salesperson/Sales Clerk/Receiving Clerk	3A
Other Employees	2A
Grocery Store	
Manager (Supervisory Duties Only)	4A
Stock Clerk	2A
Others	1A
RETIRED PERSON	
	N
RODEO PERFORMER	
	N
ROOFER (See CONSTRUCTION – General)	
SALES AGENT/MANUFACTURING REPRESENTATIVE	
At Least \$75,000 Income in Each of Last 2 Years	5A
At Least \$45,000 Income in Each of Last 2 Years	4A
Others	3A
SCIENTIST	
Geologist (Office Duties Only)	5A
Astronomer (Salaried Only)	4A
Biochemist	4A
Biologist (Not Teaching, Not Marine Biologist with Diving)	4A
Botanist	4A
Chemist	4A
Meteorologist	4A
Physicist	4A

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
SCIENTIST (cont.)	
Zoologist	4A
Geologist (With Field Duties)	3A
Lab Assistant or Technician (Not in Physician's or Dentist's Office/Clinic)	4A
Mineralogist (Above Ground Only)	3A
Others (No Field Duties)	3A
Others (With Field Duties)	2A
SEAMSTRESS (See CLOTHING INDUSTRY)	
SEPTIC AND SEWAGE	
Installation	1A
Servicing	1A
SERVICE/REPAIR/INSTALLATION	
Automobile	
Service Manager (Supervisory Only)	4A
Body Repair Worker/Welder	2A
Mechanic	2A
Cable/Satellite Television	
Equipment Repairer/Installer/Servicer (No Line Work, Pole Climbing or Digging)	3A
Lineman/Pole Climber	S
Service Stations	
Owner/Manager	2A
Others	1A
Telephone	
Equipment Repairer/Installer/Service (No Line Work, Pole Climbing or Digging)	3A
Lineman/Pole Climber	S
Tower Service/Installation	S
Other	
Computer Servicer/Repairer	3A
Security Systems (No Line Work, Pole Climbing or Digging)	3A
Computer Installer	3A
Clock/Watch Repairer	2A
Musical Instrument Repairer	2A
Office Machines	2A
Shoe Repairer	2A
Heating, Ventilation and Air Conditioning	2A
Household Appliances	2A
Mechanic (Aircraft/Boat/Truck/Small Engine)	2A
Vending Machines	1A
Welder	1A
SOCIAL WORKER	
Office Duties Only	4A
Field Duties	3A
STUDENT	
Full Time	N
STUNTLADY/STUNTMAN	
SURGEON (See HEALTH CARE – Physicians)	
SURVEYOR	
Office Duties Only	4A
Field Duties	3A

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
TAILOR (See CLOTHING INDUSTRY)	
TATOO ARTIST/BODY PIERCING	N
TAXIDERMIST	3A
TEACHING/INSTRUCTION	
College/University	
Dean	5A
Professor (Full-Time Classroom Only, Degree Required)	5A
Registrar	4A
Other (Administrative Duties Only)	4A
K-12	
Administrator/Guidance Counselor/Special Education/ Driver Education	4A
Principal/Superintendent	4A
Teacher (Full-Time Classroom Only, Not in Home, Degree Required)	4A
Teacher (Physical Education/Shop/Others with Duties Outside of the Classroom)	3A
Athletic Director	3A
School Nurse (See HEALTH CARE – Nurses)	
Preschool	
Teacher (Not in Home)	2A
Vocational	
Teacher/Professor	4A
Other	
Aerobics/Yoga Instructor/Personal Trainer	2A
Dancing Instructor	2A
Martial Arts Instructor	N
Ski Instructor	N
TEMPORARY/SEASONAL WORKER	
TRAVEL AND TRANSPORTATION	
Travel Bureau Worker	3A
TREE TRIMMER/TREE SURGEON (See LANDSCAPING)	
ULTRASOUND TECHNICIAN (See HEALTH CARE – Technicians)	
UROLOGIST (See HEALTH CARE – Physicians)	
VETERINARIAN	
DVM (Small Animal)	5A
Assistant (Small Animal)	3A
DVM (Large Animals)	3A
Assistant (Large Animal)	2A
WAREHOUSE WORKERS	
Checker/Crater/Foreman/Packer	2A
Fork Lift or Power Truck Operator/Skilled Worker	1A
Others	S
WELDER (See CONSTRUCTION – General or SERVICE/REPAIR/INSTALLATION)	

OCCUPATIONAL CLASSES	
Occupational Title	Occupational Class
WRITER	
Books/Newspapers/Periodicals	
Columnist	5A
Author/Novelist/Writer/Proofreader (Salaried Only)	4A
Journalist On Staff of Newspaper/Periodical	4A
Scriptwriter (Salaried Only)	4A
Technical Writer (Salaried Only)	4A
Freelance	N
X-RAY TECHNICIAN (See HEALTH CARE – Technicians)	
ZOOLOGIST (See SCIENTIST)	



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