Century+
Individual Disability Income Insurance

(effective 7-12-10)

PRODUCT GUIDE

AssurityBalance®

For Agent use only.
Product availability and features vary by state.

Assurity®
Life Insurance Company

16-103-02201 (7/12/10)

Product Guide for **AssurityBalance® Century+ Individual Disability Income Insurance**

Important Notice

This policy is underwritten by Assurity Life Insurance Company, Lincoln, Nebraska, and may contain reductions of benefits, limitations and exclusions. For costs and complete details of the coverage, please contact Assurity Life Insurance Company or review the policy for more information. **The individual policy is your ultimate authority for any questions about this product.**

This is a generic product guide. **Policy and rider availability, features and rates may vary by state.** Your state may require a state-specific contract and/or application. State-specific applications are available on AssureLINK.

This is a product guide for policy Form No. l H0920. Any prior guide does not apply to this product. This guide does not apply to Personal Disability Income Insurance offered in California and Florida.

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Policy Description

ASSURITYBALANCE CENTURY+ INDIVIDUAL DISABILITY INCOME INSURANCE POLICY
(Form No. I H0920)

AssurityBalance Century+ Individual Disability Income is a guaranteed-renewable disability income insurance policy for individuals. It pays a monthly benefit while the insured is totally or partially disabled, following an elimination period and up to the maximum benefit period, subject to policy provisions.

Issue Ages: 18 through 60 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65 (age 67 for to-age-67 benefit period), conditionally renewable to age 75 if employed full time.

Underwriting Classes:

Standard Classes – Non-Tobacco (if no use in prior 12 months) and Tobacco

Substandard Classes – Permanent or temporary premium ratings - Table 1 (125 percent), Table 2 (150 percent), Table 3 (175 percent) and Table 4 (200 percent); Non-Tobacco and Tobacco

Benefit Amounts: $500 through $9,000 for total policy and Supplemental Disability Income Rider (SDIR) benefits with at least $200 policy benefit and at least $100 SDIR benefit; up to $15,000 participation. (See Financial Underwriting Guidelines section.)

Benefit Periods:

For issue ages 18 through 55:

- **Class 4A — 1-year, 2-year, 5-year, 10-year, to-age-65 and to-age-67**
- **Class 3A — 1-year, 2-year, 5-year, 10-year, to-age-65 and to-age-67**
- **Class 2A — 1-year, 2-year, 5-year; also 10-year; to-age-65 and to-age-67, IF**
  - **Self-employed:** Working in and owning, the same business for the last two years, with an annual net income of *at least* $40,000 for *each* of the last two years.
  - **W-2 employee:** With an annual income of *at least* $40,000 for *each* of the last two years.
- **Class 1A** — 1-year, 2-year and 5-year

For issue ages 56 through 60:

- **Classes 4A and 3A — 1-year, 2-year and 5-year**
- **Classes 2A and 1A — 1-year and 2-year**

Elimination Periods: 30, 60, 90, 180 or 365 days

Underwriting - A traditional fully underwritten approach is used. A medical exam or medical records will be ordered if necessary. Coverage may be offered with a policy amendment rider, special class premium, longer elimination period, shorter benefit period, condition exclusion or a combination of any of these.

Issue Limitations: See Financial Underwriting Guidelines section.

Rate Structure: Premiums are level for the guaranteed renewal period; based on gender, tobacco use, age, occupational class, benefit amount, benefit period, elimination period and any optional riders selected. Premiums increase annually for the conditionally renewable period.

Policy Fee: $40 annually (commissionable)

Policy Description *(continued)*

Premium Modes: Annual - 1.000 Quarterly - 0.264 Semi-Annual - 0.510
Monthly (automatic bank withdrawal or credit card) - 0.087

Optional Riders:

Automatic Benefit Increase Rider	Own Occupation Rider
Catastrophic Disability Benefit Rider	Residual Disability Benefit Rider
Critical Illness Benefit Rider	Retroactive Injury Benefit Rider
Guaranteed Insurability Rider	Return of Premium Benefit Rider
Non-Cancelable Rider	Supplemental Disability Income Rider

POLICY BENEFITS

Total Disability Monthly Benefit

If the insured is totally disabled and the elimination period has been satisfied, this benefit will be paid. Benefits will continue while the insured is totally disabled or to the end of the benefit period, whichever is first.

Total disability monthly benefits will be paid for only one of two or more concurrent disabilities. Also, a recurrent total disability is considered a new total disability only if it is separated from the ending date of the prior total disability by a period of one year or more where the insured is continuously employed on a full-time basis and not receiving any disability monthly benefits. A new total disability is subject to a new elimination period and starts a new benefit period. Any other recurrent total disability is considered a continuation of a prior total disability, not subject to a new elimination period or starting a new benefit period. (See Definitions section.)

Partial Disability Monthly Benefit

If the insured is partially disabled and has resumed part-time employment immediately following a period where they received total disability monthly benefits, this benefit will be paid. Benefits will continue until the insured is no longer partially disabled or to the end of the benefit period, whichever is first, but no longer than six months. The partial disability monthly benefit is 50 percent of the total disability monthly benefit.

Presumptive Disability Benefit

If the insured is presumptively disabled, the total disability monthly benefit will be paid regardless of the insured's ability to work and whether or not they are under the care of a physician. The elimination period does not need to be satisfied for the insured to receive the benefit.

Home Modification Benefit

If the insured is totally disabled and has been receiving total disability monthly benefits for six consecutive months, the actual costs up to six times the total disability monthly benefit during their lifetime will be paid towards modification of their existing residence to accommodate their disability. Modifications must begin while the insured is totally disabled.

Survivor Benefit

If the insured dies while receiving total disability monthly benefits and has been receiving total disability monthly benefits for at least the prior 12 consecutive months, a lump sum of six times the total disability monthly benefit will be paid to the beneficiary(-ies).

Policy Description *(continued)*

Vocational Rehabilitation Benefit

If the insured is totally disabled and has been receiving total disability monthly benefits for six consecutive months, the actual costs of a vocational rehabilitation program may be paid, up to a maximum of six times the total disability monthly benefit during their lifetime.
The program must be pre-approved by Assurity and provide instruction or training at an accredited college, university or vocational school that contributes to the insured's return to work. Participation is voluntary and may be at the insured's request or as suggested by Assurity.

Organ Donor Benefit

If the insured becomes disabled as the result of surgery for transplanting an organ or donating bone marrow, Assurity will pay policy and rider benefits on the same basis as any other sickness.

For benefits to be paid, the elimination period must be satisfied and the donation must occur after this policy has been in force for six months or more from the issue date or last reinstatement date.

Waiver of Premium

Renewal premiums will be waived on the first premium due date after the insured has been totally disabled for the elimination period or 90 days, whichever is shorter. Any premiums paid during this period which became due after total disability started will be refunded.

Waiver of premium ends when the insured is no longer receiving disability monthly benefits. Premiums are not waived during a period of partial disability.

Optional Riders – at additional cost; available at time of application only

AUTOMATIC BENEFIT INCREASE RIDER *(Form No. R I0922)*

The Automatic Benefit Increase Rider increases the total disability monthly benefit by 5 percent of the original benefit each year for any benefits payable starting after the first year continuous benefits have been paid. Payments will continue to increase each year while payable under the policy until the total disability monthly benefit payment has increased to twice the original amount.

If the insured receives an increased benefit and then recovers, the benefit may be increased permanently with written request to Assurity within 90 days of recovery before attained age 60 and if employed full time. Premiums for the increased benefit will be based on the insured's attained age and Assurity's then-current rates.

Issue Ages: 18 through 60 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65 (age 67 for to-age-67 benefit period)

Issue Limitations: Not available with the 1-year benefit period.

CATASTROPHIC DISABILITY BENEFIT RIDER *(Form No. R I0923)*

The Catastrophic Disability Benefit Rider provides a monthly benefit if the insured is catastrophically disabled and all policy total disability monthly benefits have been paid. Benefits will continue and premiums will be waived while the insured is catastrophically disabled or to the end of the catastrophic benefit period, whichever is first.

Optional Riders *(continued)*

CATASTROPHIC DISABILITY BENEFIT RIDER *(continued)*

Catastrophic disability means the insured is totally disabled past the policy benefit period and:

- needs the presence of another person within arm's reach and/or physical assistance to perform two or more activities of daily living (ADLs), or is cognitively impaired;
- does not work in any job for wage or profit; and
- has had a physician certify their continued total disability and prescribe a plan of treatment.

Issue Ages: 18 through 60 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65

Benefit Amounts: Same as benefit amount selected for policy

Benefit Periods: For each policy benefit period, the following rider benefit periods are available:

- **1-year policy benefit period** — 4-year and 9-year
- **2-year policy benefit period** — 3-year, 8-year and to-age-65
- **5-year policy benefit period** — 5-year and to-age-65
- **10-year policy benefit period** — to-age-65

Issue Limitations: Not available with to-age-65 and to-age-67 policy benefit periods and the 5-year policy benefit period for issue ages 56 through 60.

CRITICAL ILLNESS BENEFIT RIDER *(Form No. I R0721)*

The Critical Illness Benefit Rider will pay a benefit if the insured receives a first-ever diagnosis or has a procedure for one of the specified critical illnesses shown in the following chart if the date of diagnosis is while this rider is in force and the specified critical illness is not excluded by name or specific description in the rider. The amount payable is the percentage of the benefit amount found in the chart multiplied by the benefit amount.

Issue Ages: 18 through 60 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65 (age 67 for to-age-67 benefit period), conditionally renewable to age 75 if employed full time.

Benefit Amounts: $5,000 through $150,000 but not exceeding 36 times the total disability monthly benefit

Issue Limitations: Not available with the Return of Premium Benefit Rider.

Benefits Payable in the Same Category: If an insured receives a percentage of the benefit amount for one specified critical illness within a category and then becomes eligible for benefits for another specified critical illness within the same category, the benefit amount payable for the subsequent illness within the same category is the lesser of the percentage amount payable or 100 percent minus the percentage of the benefit amount received for all previous specified critical illnesses within the same category.

After 100 percent of the benefit amount shown on the rider schedule has been paid to an insured person within a category in the chart above, Assurity will not pay any additional benefits for any specified critical illness in that category for that insured person.

Optional Riders *(continued)*

Benefits Payable in Different Categories: If benefits have been paid for a specified critical illness within one category for an insured person, no benefits will be payable for a subsequent specified critical illness within a different category for that insured person unless the date of diagnosis of the subsequent specified critical illness is separated by at least 180 days from the date of diagnosis of the immediately preceding specified critical illness.

Category	Specified Critical Illness	Percentage of Benefit Amount Payable for Each Specified Critical Illness	Maximum Percentage of Benefit Amount for Category
1	Heart Attack	100%	100%
	Major Organ Transplant – heart or combination transplant including heart	100%	
	Stroke	100%	
	Coronary Bypass Surgery	25% (payable once per lifetime)	
	Angioplasty	10% (payable once per lifetime)	
2	Kidney (Renal) Failure	100%	100%
	Major Organ Transplant - not covered in Category 1	100%	
	Paralysis – not as a result of stroke	100%	
3	Invasive Cancer	100%	100%
	Non-invasive Cancer	25% (payable once per lifetime)	

GUARANTEED INSURABILITY RIDER *(Form No. R I0924)*

The Guaranteed Insurability Rider gives the insured the option to increase their total disability monthly benefit by purchasing additional amounts of insurance. Additional amounts will have the same benefit period and elimination period as the policy. Increases do not require evidence of insurability and are based on the insured's current income and Assurity's current issue and participation limits in effect on the option date. Premiums for the additional insurance will be based on the insured's attained age and Assurity's then-current rates.

The insured may exercise this option no more than five times before age 55. Increases must be requested in writing to Assurity during the option period – 60 days prior to an option date up to the option date. Option dates are any policy anniversary at least two years after policy issue and with at least two years between dates. The insured cannot exercise an option if disabled or receiving disability benefits.

Issue Ages: 18 through 45 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 55

Benefit Amounts: $200 through $600 (in $100 increments) on each option date; the sum of all increases cannot exceed the original total disability monthly benefit.

Issue Limitations: Not available with substandard policies. Available on a case-by-case basis for policies with an Exclusion Rider.

Optional Riders *(continued)*

NON-CANCELABLE RIDER *(Form No. R I0925)*

The Non-Cancelable Rider makes the insured's policy and any attached riders non-cancelable. Non-cancelable means that Assurity cannot change the policy or riders by increasing the premiums or canceling prior to termination.

Issue Ages: 18 through 60 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65 (age 67 for to-age-67 benefit period)

Issue Limitations: Not available with substandard policies, occupation classes 2A and 1A, and 10-year, to-age-65 and to-age-67 benefit periods.

OWN OCCUPATION RIDER *(Form No. R I0921)*

The Own Occupation Rider extends the own occupation period for the total disability definition from two years to the period selected.

Issue Ages: 18 through 60 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65 (age 67 for to-age-67 benefit period)

Benefit Periods: For each policy benefit period, the following rider benefit periods are available:

- **5-year policy benefit period** — 5-year
- **10-year policy benefit period** — 5-year or 10-year
- **To-age-65 policy benefit period** — 5-year or to-age-65
- **To-age-67 policy benefit period** — 5-year or to-age-67

Issue Limitations: Not available with occupation classes 2A and 1A and 1-year and 2-year policy benefit periods. Also not available to issue ages 56 through 60 with 5-year and 10-year policy benefit periods.

RESIDUAL DISABILITY BENEFIT RIDER *(Form No. R I0926)*

The Residual Disability Benefit Rider will pay a monthly benefit if the insured is residually disabled and the elimination period has been satisfied by any continuous period of total and/or residual disability. Renewal premiums will also be waived on the first premium due date after the insured has been residually disabled for the elimination period or 90 days, whichever is shorter. Any premiums paid during this period, which became due after total disability started, will be refunded.

Benefits will continue and premiums will be waived while the insured is residually disabled or to the end of the residual benefit period, whichever is first. For the first six months of residual disability, Assurity will pay the greater of the residual disability monthly benefit and any partial disability monthly benefit payable but not both. The residual disability monthly benefit is calculated as follows:

[(prior monthly income – current monthly income) / prior monthly income] x total disability monthly benefit

Issue Ages: 18 through 60 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65 (age 67 for to-age-67 benefit period)

Issue Limitations: Not available with occupation class 1A. Available on a case-by-case basis with substandard policies.

Optional Riders *(continued)*

RETROACTIVE INJURY BENEFIT RIDER *(Form No. R I0927)*

The Retroactive Injury Benefit Rider will pay a benefit if an injury causes the insured to become totally disabled within 30 days of the injury, and the insured remains continuously totally disabled until the end of the elimination period. The benefit, payable as a lump sum after the elimination period, is equal to the total disability monthly benefit times the number of months in the elimination period.

Issue Ages: 18 through 60 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65 (age 67 for to-age-67 benefit period)

Issue Limitations: No restrictions.

RETURN OF PREMIUM BENEFIT RIDER *(Form No. R I0928)*

The Return of Premium Benefit Rider will pay a returned premium benefit upon policy cancellation, policy lapse, the insured's death or the insured's attained age 65. The benefit is calculated as follows:

1. Add together all policy and rider premiums paid or waived.
2. Multiply this premium amount by the appropriate percentage based on completed policy year. (See following table.)
3. Subtract from this amount all policy and rider benefits paid.

Issue Ages: 18 through 55 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65 (age 67 for to-age-67 benefit period)

Issue Limitations: Not available on policy with the Critical Illness Benefit Rider.

RETURN OF PREMIUM BENEFIT SCHEDULE

For insureds age 18 through 44					
Completed Policy Year	Return Percentage	Completed Policy Year	Return Percentage	Completed Policy Year	Return Percentage
1	0%	9	36%	17	71%
2	0%	10	42%	18	74%
3	5%	11	47%	19	78%
4	8%	12	51%	20	82%
5	9%	13	56%	21	85%
6	13%	14	60%	22	89%
7	22%	15	63%	23	92%
8	30%	16	67%	24	96%
				25 & over	100%

For insureds age 45 through 55			
Completed Policy Year	Return Percentage	Completed Policy Year	Return Percentage
1	0%	6	13%
2	0%	7	22%
3	5%	8	30%
4	8%	9	40%
5	9%	10 & over	50%

Optional Riders *(continued)*

SUPPLEMENTAL DISABILITY INCOME RIDER *(Form No. R I0929)*

The Supplemental Disability Income Rider (SDIR) will pay a monthly benefit less any social insurance benefits received, offset dollar for dollar, if the insured is totally disabled and the elimination period has been satisfied. Benefits will be paid until the insured is no longer totally disabled or to the end of the benefit period, whichever is first. No benefits will be paid if social insurance benefits exceed the SDIR monthly benefit amount.

If the insured receives a lump-sum payment of social insurance benefits, Assurity will treat the lump sum as if it were paid over several months. The lump sum will be divided by the SDIR monthly benefit less monthly social insurance benefits received. The result will be the number of months future rider benefits will not be paid. If the monthly social insurance benefit received exceeds the SDIR monthly benefit, Assurity will not seek refund of past SDIR benefits received before the lump-sum payment.

Issue Ages: 18 through 60 (using age nearest birthday as of policy issue date)

Renewability: Guaranteed renewable to age 65 (age 67 for to-age-67 benefit period)

Benefit Amounts: $100 - $1,800 (See Financial Underwriting Guidelines section.)

Benefit Periods: Same as benefit period selected for policy

Elimination Periods: Same as elimination period selected for policy

Issue Limitations: No restrictions.

Social Insurance Benefits:

- **Social Security Disability Benefit** – Includes any primary or family disability benefits the insured is eligible for under the U.S. Social Security Act or similar law of any other country. Payments under the retirement provisions of the Social Security Act are treated as a Social Security disability benefit.
- **Workers' Compensation** – Includes benefits the insured is eligible for under any Worker's Compensation Act or Occupational Disease Law. Included are all state and U.S. territory laws, as well as laws of other countries.
- **Government Retirement and Disability Fund Benefit** – Includes any disability benefits the insured is eligible for (including dependent benefits) under any federal, state, county, city or other governmental subdivision retirement and/or disability fund. Retirement benefits from such funds are treated as disability benefits.
- **Railroad Retirement Disability Income** – Includes any primary or family disability benefits the insured is eligible for under the Railroad Retirement Act. Retirement option benefits under the act are treated as disability benefits.

Definitions

The following definitions apply to the policy and riders as approved in Nebraska. **Definitions may vary by state.**

ACTIVITIES OF DAILY LIVING (ADLs) *(for the Catastrophic Disability Benefit Rider only)*

Certain basic daily tasks necessary to maintain the insured's health and safety. For this rider, ADL refers to the activities described below:

- **Bathing** means washing oneself by sponge bath, or in either a tub or shower including the task of getting into or out of the tub or shower.
- **Continence** means the ability to maintain control of bowel and bladder function; or, when unable to maintain control of bowel or bladder function, the ability to perform associated personal hygiene (including caring for catheter or colostomy bag).
- **Dressing** means putting on and taking off all items of clothing and any necessary braces, fasteners or artificial limbs.
- **Eating** means feeding oneself by getting food into the body from a receptacle (such as a plate, cup or table) or by a feeding tube or intravenously.
- **Toileting** means getting to and from the toilet, transferring on and off the toilet, and performing associated personal hygiene.
- **Transfer and mobility** means the ability to move into or out of a bed, chair or wheelchair or to move from place to place, either via walking or using a wheelchair, cane, crutches, walker or other equipment.

ANY GAINFUL OCCUPATION

An occupation, which fits the insured by education, training or experience and replaces or is expected to replace 60 percent or more of their prior monthly income.

COGNITIVELY IMPAIRED *(for the Catastrophic Disability Benefit Rider only)*

Deterioration or loss of ability to think, perceive, reason or remember, which calls for another person's help or prompting to protect oneself or others. It is measured by clinical evidence and standardized tests approved by Assurity that reliably measure such impairment. The loss in mental capacity must be a result of a sickness or injury, including Alzheimer's disease, dementia and organic brain damage caused by an accident or head trauma.

CONCURRENT DISABILITIES

Disabilities caused by more than one injury or sickness, whether they are related or not.

ELIMINATION PERIOD

The number of consecutive days the insured must be totally disabled before they are eligible to receive the benefits.

EMPLOYED ON A FULL-TIME BASIS

Working for pay at least 30 hours per week.

MAXIMUM BENEFIT PERIOD

The maximum period of time any combination of total disability monthly benefits and partial disability monthly benefits, if any, are paid.

Definitions *(continued)*

MONTHLY INCOME

The insured's monthly gross income earned from their occupation including salary, wages, bonuses, commissions, fees and other pay for personal services.

If the insured is self-employed or owns a business, monthly income is their share of gross income earned by the business, plus any salary or draw from the business, minus their share of normal and customary business expenses specified as deductible for tax purposes.

OWN OCCUPATION

The occupation in which the insured is engaged at the time their disability begins.

If the insured is unemployed one year or less from the time their disability begins, own occupation will be the occupation in which they were engaged prior to becoming unemployed. If they have been unemployed for more than one year, own occupation will be an occupation which fits them by education, training or experience.

PARTIAL DISABILITY

A degree of disability due to a sickness or injury which:

- starts while this policy is in force;
- requires a physician's care unless the insured's physician certifies they have reached the maximum point of recovery;
- for the first two years after the elimination period, keeps the insured from doing one or more, but not all, of the substantial and material duties of their own occupation or results in the loss of 25 percent or more of the time spent by them in the usual daily performance of the duties of their own occupation; and
- after total disability and any partial disability benefits have been paid for two years, keeps the insured from doing one or more, but not all, of the substantial and material duties of any gainful occupation or results in the loss of 25 percent or more of the time spent by them in the usual daily performance of the duties of any gainful occupation.

PRE-EXISTING CONDITION

A sickness or physical condition for which, during the two years before the issue date, the insured:

- had symptoms which would cause an ordinary prudent person to seek diagnosis, care or treatment; or
- received medical consultation, advice or treatment from a physician or had taken prescribed medication.

PRESUMPTIVELY DISABLED

The insured's permanent and irrevocable loss, because of their injury or sickness, of one of the following: speech, hearing in both ears, sight in both eyes, use of both feet, use of both hands, or use of one hand and one foot.

Permanent and irrevocable loss of sight means both of the insured's eyes measure at or below 20/200 after reasonable effort has been made to correct their vision using the most advanced medically acceptable procedures and devices available. Permanent and irrevocable loss of hearing means hearing in both ears cannot be restored by hearing aids. The insured will be considered totally disabled if they are presumptively disabled.

Definitions *(continued)*

PRIOR MONTHLY INCOME

The greater of:

- the insured's average monthly income for the one-year period immediately prior to their disability; or
- the insured's average monthly income for the calendar year with the highest earnings of the last two calendar years prior to their disability.

RECURRENT TOTAL DISABILITY

A situation in which the insured becomes totally disabled, ceases to be totally disabled and then becomes totally disabled again from the same or related sickness or injury. The latter total disability will be considered a recurrent total disability.

RESIDUAL DISABILITY *(for the Residual Disability Benefit Rider only)*

A degree of disability due to sickness or injury which:

- starts while this rider is in force;
- requires a physician's care unless the insured's physician certifies they have reached the maximum point of recovery;
- results in the insured's loss of at least 20 percent of their prior monthly income;
- for the first two years after the elimination period, keeps the insured from doing one or more, but not all, of the substantial and material duties of their own occupation; and
- after benefits have been paid for two years, keeps the insured from doing one or more, but not all, of the substantial and material duties of any gainful occupation.

If the insured is totally disabled, they are not residually disabled.

TOTAL DISABILITY

A disability due to sickness or injury which:

- starts while this policy is in force;
- requires a physician's care unless the insured's physician certifies they have reached the maximum point of recovery;
- for the first two years after the elimination period, keeps the insured from doing all the substantial and material duties of their own occupation; and
- after benefits have been paid for two years, keeps the insured from doing all the substantial and material duties of any gainful occupation.

If the insured is able to perform one or more of the substantial and material duties of their own occupation for the first two years after the elimination period, or of any gainful occupation after benefits have been paid for two years, they are not totally disabled.

Limitations and Exclusions

The following limitations and exclusions apply to the policy and riders as approved in Nebraska. **Limitations and exclusions may vary by state**.

LIMITATIONS

Foreign Travel and Residency

Assurity will pay up to a maximum of three disability monthly benefits for any disability sustained or continued outside the United States or Canada.

Mental/Nervous Disorders; Substance Abuse

Assurity will pay up to a maximum of 24 disability monthly benefits during the insured's lifetime for disabilities due to mental/nervous disorders and substance abuse.

Pre-existing Condition

If the insured's disability is within two years from the issue date and is due to a pre-existing condition, no benefits will be paid unless the condition was disclosed and not misrepresented on the application and is not excluded by a policy amendment rider.

A pre-existing condition is a sickness or physical condition for which, during the two years before the issue date, the insured:

- had symptoms which would cause an ordinary prudent person to seek diagnosis, care or treatment; or
- received medical consultation, advice or treatment from a physician or had taken prescribed medication.

EXCLUSIONS

Assurity will not pay benefits for conditions that are caused by or the result of the insured:

- being pregnant, experiencing childbirth or having an elective abortion (complication of pregnancy is deemed to be a sickness);
- losing an occupational or professional license or certification;
- being exposed to war or any act of war, declared or undeclared;
- engaging in an illegal occupation;
- participating in or attempting to commit a felony;
- intentionally self-inflicting a sickness or injury;
- committing or attempting to commit suicide, while sane or insane;
- being incarcerated or is caused while incarcerated in a penal institution or government detention facility;
- being intoxicated (as determined by the laws governing the operation of motor vehicles in the jurisdiction where the disability occurs) or under the influence of an illegal substance or a narcotic (except for narcotics used as prescribed to the insured by a physician); or
- actively serving in any of the armed forces, or units auxiliary thereto, including the National Guard or Reserves, except during the active duty training of less than 60 days.

General Underwriting Guidelines

MULTI-LIFE DISCOUNT

A 15 percent discount will be applied when three or more policies are issued at the same time to an employee-employer group. The discount also extends to future policies added to an existing eligible list bill.

AVOCATIONS

Individuals involved in aviation, auto racing, hang gliding, sky diving, skin/scuba diving or similar activities on an amateur basis can be considered for coverage in most cases. The agent must report the activity on the application and complete the appropriate questionnaire. Usually, a policy amendment rider (exclusion rider) will be attached to the policy if the application is approved.

FOREIGN NATIONALS

Applications may be taken for United States citizens who permanently reside in the U.S. or for permanent resident aliens who have lived in the U.S. for at least two years and do not plan to return to their native country on a permanent basis. The applicant's resident alien card number must be submitted with the application for a permanent resident alien. A photocopy of the resident alien card can be included in case it is required.

COLLECTION LIMITS

Premium may be collected with the application when:

- the amount of insurance applied for, combined with in-force coverage, does not exceed $5,000 monthly benefit; and
- the applicant has answered all application health questions with no indication of adverse conditions or is scheduled to be medically examined.

Premium should not be collected with the application when:

- the amount of insurance applied for, combined with in-force coverage, exceeds $5,000 monthly benefit; or
- completion of application questions identifies substantial adverse health conditions.

REPLACEMENT GUIDELINES

If existing disability income insurance is to be replaced, the following states require that a replacement form be completed and submitted with the application, and that a completed copy be left with the applicant:

Arkansas	Kentucky	South Carolina
Colorado	Maine	Texas
Connecticut	Massachusetts	Utah
Delaware	New Hampshire	Vermont
Florida	New Jersey	Virginia
Idaho	Oklahoma	Washington
Illinois	Pennsylvania	West Virginia
Iowa	Rhode Island	Wisconsin

Occupational Underwriting Guidelines

GENERAL OCCUPATIONAL GUIDELINES

Full-Time, Part-Time and Seasonal Occupations

- Applicants must be employed on a full-time basis (at least 30 hours per week) at the time of application.
- Applicants exclusively employed in seasonal occupations are not eligible for coverage.
- Applicants engaged in more than one occupation, even on a part-time or seasonal basis, will be classified according to their most hazardous occupation.

SELF-EMPLOYED OCCUPATIONS

Business Owner Upgrade

One occupation class upgrade is allowed for business owners meeting the following criteria:

- at least 10 percent ownership,
- self-employed for at least three years,
- net income of at least $30,000, and
- not a medical professional, farmer or roofing contractor.

Applicants upgrading from 1A to 2A are not eligible for 10-year, to-age-65 or to-age-67 benefit periods.

Business in the Home

Self-employed applicants conducting business in their home 50 percent of the time or less will be underwritten with normal guidelines and eligible for full benefits.

Self-employed applicants conducting business more than 50 percent of the time in their home will be underwritten with the following guidelines:

- the applicant must be employed full time in the current home-based occupation for at least two years;
- the applicant must provide income verification including copies of two most recent years' tax returns, both business and personal, with all schedules and W-2 forms;
- full benefits are available based on the applicant's occupation class;
- for issue ages 18 through 55, all benefit periods are available;
- for issue ages 56 through 60, 1-year, 2-year or 5-year benefit period is available; and
- at the underwriter's discretion, Assurity may make offers on cases that would have ratings and/or exclusion riders.

NOTE: W-2 employees working in the home more than 50 percent of the time will be underwritten with normal guidelines and eligible for full benefits.

Newly Self-Employed Applicants

Newly self-employed applicants without a full calendar year's tax return from self-employment will be required to demonstrate prior full-time employment in a related field. No offers for coverage will be made to newly self-employed applicants without related experience. Any offers made will be based on the following guidelines:

Occupational Underwriting Guidelines *(continued)*

- income considered in underwriting will be half of the applicant's documented average annual income over the last two years;
- standard cases only – no exclusion riders or rate-ups;
- issue ages 18 through 55 are eligible;
- 1-year, 2-year or 5-year benefit period is available;
- 90-day, 180-day or 365-day elimination period is available;
- policy maximum is $2,000 monthly benefit and SDIR maximum is the monthly benefit based on half of the applicant's documented average annual income over the last two years; and
- Automatic Benefit Increase Rider, Catastrophic Disability Benefit Rider, Critical Illness Benefit Rider, Guaranteed Insurability Rider, Return of Premium Benefit Rider and Supplemental Disability Income Rider are available.

After newly self-employed applicants have been in business for one year, they are eligible for normal underwriting and full benefits based on that year's tax returns. This period may be shortened at the underwriter's discretion if the applicant is taking over for a parent or managed the business prior to ownership.

NOTE: W-2 employees transitioning to a contracted or consulting position with contracts showing a salary that will be paid for at least one year are eligible for full benefits based on their income. A copy of that contract must be provided to Assurity. If more than 50 percent of the applicant's work is conducted at home, Assurity will still allow full benefits.

OCCUPATION CLASS DESCRIPTIONS

All occupations are classified in the Occupation Class Guide found on AssureLINK. Descriptions and examples of each occupation class are as follows:

Occupation Class 4A
Includes professional or office-type occupations that are rarely exposed to physical or occupational hazards. Some examples include the following:

Accountant	Computer Programmer	Real Estate Agent
Architect	Office Clerk	Secretary
Biologist	Pharmacist	

Occupation Class 3A
Includes occupations similar to occupation class 4A but with certain activities or hazards involving laboratory, technical, supervisory and service work. Some examples include the following:

Clergy	Locksmith	Speech Therapist
Dental Hygienist	Nurse (RN/LPN)	Surveyor
Lab Technician	Sales Clerk	

Occupation Class 2A
Includes skilled and manual occupations in lighter industries, along with most machine operators. Some examples include the following:

Auto Mechanic	Carpenter	Plumber
Beautician	Electrician	Tailor
Bricklayer	Farmer	

Occupational Underwriting Guidelines *(continued)*

Occupation Class 1A
Includes occupations involving heavy manual labor or unskilled workers where there is increased risk of accident. Some examples include the following:

Auto Body Repair	Custodian	Roofer
Bus Driver	Furniture Mover	Used Car Dealership
Construction Laborer	Painter	

NE (Not Eligible)
Includes occupations not eligible for coverage due to exposure to serious accident or occupational hazards. Some examples include the following:

Armed Forces	Bartender	Self-employed Artist
Athlete	Entertainer	Student
Author	Pilot	

SPECIAL OCCUPATIONS

Government Employees

Federal, state, county and city employees are listed in the Occupation Class Guide in the "Government and Legal Services" section listed by their job duties. This section also includes law enforcement, firefighters and postal workers.

Government employees are eligible for coverage up to $1,000 policy monthly benefit and the SDIR monthly benefit based on their income. (See Financial Underwriting Guidelines section.) If the applicant has any pension payment from a previous occupation, some type of permanent government disability benefit, other group disability income insurance, or other individual disability income insurance in addition to their current group long-term disability, coverage will not be available.

NOTE: The Guaranteed Insurability Rider is not available.

Railroad Employees

Railroad employees are eligible for coverage up to the maximum allowed for government employees - $1,000 policy monthly benefit and the SDIR monthly benefit based on their income. (See Financial Underwriting Guidelines section.) Other government employee guidelines listed above also apply.

Teachers

Teachers covered under any type of teachers' disability retirement plan are eligible for coverage up to the maximum allowed for government employees - $1,000 policy monthly benefit and the SDIR monthly benefit based on their income. (See Financial Underwriting Guidelines section.) Other government employee guidelines listed above also apply.

Casino Employees

Casino employees directly involved in gaming activities are considered occupation class 1A and eligible for full benefits if gambling is legalized in that state and the casino is operated in accordance with the law.

Casino employees not directly involved with gaming activities are not considered "casino employees," and are classified by other responsibilities of their employment and not subject to casino employee guidelines. For example, a casino restaurant manager would be considered as a restaurant manager, occupation class 3A.

Financial Underwriting Guidelines

INCOME DESCRIPTIONS

Earned Income

Earned income is the gross income from the applicant's occupation, including salary, wages, bonuses, commissions, fees and any other pay for personal services. If the applicant is self-employed or owns any part of a business, earned income is the applicant's share of gross income earned by the business, plus any salary or draw from the business, minus the applicant's share of normal and customary business expenses specified as deductible for tax purposes.

Unearned Income

Any kind of unearned income, such as rental property or interest income that continues even if the insured is totally disabled, does not qualify as earned income. Pension or retirement benefits are also considered unearned income.

If unearned income is greater than 15 percent of earned income, the total disability monthly benefit available at issue is reduced by one-half of the monthly unearned income.

SELF-EMPLOYED APPLICANTS WITH MINIMAL NET INCOME

Many self-employed individuals capitalize on depreciation and expenses to report little or no income for income tax purposes. Despite having minimal net income, these individuals may be eligible for a small disability income insurance policy if they are:

- self-employed in the same business for two years,
- self-employed on a full-time basis,
- under age 55 at the time of application, and
- not showing a business loss on their most recent tax return.

For these applicants, Assurity will consider up to $600 monthly benefit ($300 policy monthly benefit and $300 SDIR monthly benefit) with a 1-year, 2-year or 5-year benefit period. The elimination period must be at least 60 days. No riders will be available

INCOME VERIFICATION

Income verification will be required as part of the underwriting process as follows:

A. If the applicant is not self-employed and the amount applied for exceeds $3,000 of monthly benefit, the applicant is required to provide copies of either:

- the two most recent pay stubs,
- the most recent W-2 form, or
- the most recent tax return.

NOTE: Any occupation class 2A applicant desiring a to-age-65 or to-age-67 benefit period must supply income verification regardless of the amount of monthly benefit applied for with Assurity. (For other requirements, see Benefit Periods section)

B. When the applicant is self-employed or a commissioned salesperson and the amount applied for exceeds $2,000 of monthly benefit, a copy of the most recent tax return, with all schedules and W-2 forms, is required.

C. When the applicant is self-employed or is a commissioned salesperson requesting a to-age-65 or to-age-67 benefit period, and the amount applied for exceeds $2,000 of monthly benefit, copies of the most recent two years' tax returns, with all schedules and W-2 forms, are required. An average of those two years will be used.

Financial Underwriting Guidelines *(continued)*

ISSUE AND PARTICIPATION LIMITS

Maximum Issue and Participation Limits by Occupation Class

Limits by occupation class are as follows:

Occupation Class	Maximum Issue Limit	Maximum Participation Limit
4A	$9,000	$15,000
3A	9,000	15,000
2A	7,500	10,000
1A	6,000	8,000

The maximum participation limits in each occupation class are determined by the availability of reinsurance and other coverage in force or applied for by the applicant. Other sources of income protection must be considered to avoid over-insurance. Those sources include group disability income insurance, salary continuation plans, social insurance disability benefits, retirement disability coverage and other individual disability income insurance.

Maximum Issue Limits by Income

See the following Maximum Issue Limits by Income table.

The minimum issue limits are $500 of total monthly benefit from at least $200 policy monthly benefit and at least $100 SDIR monthly benefit. The maximum issue limits are determined by the applicant's occupation class, income and in-force disability coverage. (See the following Maximum Issue Limits by Income table.)

Applicants with less than $1,200 monthly earned income are not eligible for coverage. If the applicant's income is between listed income amounts, the maximum issue limits are according to the higher listed income amount.

If the applicant has group long-term disability (LTD) coverage in force or applied for, the total maximum policy monthly benefit and SDIR monthly benefit allowable is the "Total Max with Group LTD" minus in-force group LTD and individual disability income insurance. The remaining amount can be split between base policy and SDIR monthly benefits, not to exceed either maximum.

For business owners with at least 10 percent ownership, net income utilized in determining the maximum issue limits by income can be increased by 15 percent. With this enhancement, the policy may be increased by up to $750 of monthly benefit, and the SDIR may be increased up to the $1,800 limit. Issue and participation limits by occupation classes still apply.

Financial Underwriting Guidelines *(continued)*

MAXIMUM ISSUE LIMITS BY INCOME

Annual Income	Monthly Income	Monthly Benefit			
		Base Policy Max	SDIR Max	Total Max	Total Max with Group LTD
Not available below $1,200 monthly income					
14,400	**1,200**	350	550	900	950
15,600	**1,300**	380	600	980	1,040
16,800	**1,400**	450	600	1,050	1,120
18,000	**1,500**	480	650	1,130	1,200
19,200	**1,600**	550	650	1,200	1,280
20,400	**1,700**	580	700	1,280	1,360
21,600	**1,800**	650	700	1,350	1,440
22,800	**1,900**	730	800	1,430	1,525
24,000	**2,000**	750	900	1,500	1,600
25,200	**2,100**	800	900	1,550	1,655
26,400	**2,200**	830	950	1,630	1,740
27,600	**2,300**	900	1,000	1,700	1,815
28,800	**2,400**	930	1,050	1,780	1,930
30,000	**2,500**	1,000	1,100	1,850	2,010
31,200	**2,600**	1,030	1,150	1,930	2,100
32,400	**2,700**	1,100	1,200	2,000	2,200
33,600	**2,800**	1,130	1,250	2,080	2,290
34,800	**2,900**	1,200	1,300	2,150	2,430
36,000	**3,000**	1,270	1,300	2,220	2,530
37,200	**3,100**	1,300	1,350	2,300	2,650
38,400	**3,200**	1,370	1,350	2,370	2,750
39,600	**3,300**	1,440	1,400	2,440	2,900
40,800	**3,400**	1,480	1,400	2,480	2,950
42,000	**3,500**	1,520	1,400	2,570	3,080
43,200	**3,600**	1,580	1,500	2,630	3,160
44,400	**3,700**	1,620	1,500	2,670	3,200
45,600	**3,800**	1,650	1,550	2,750	3,300
46,800	**3,900**	1,700	1,600	2,800	3,350
48,000	**4,000**	1,740	1,600	2,890	3,470
49,200	**4,100**	1,780	1,600	2,930	3,520
50,400	**4,200**	1,830	1,600	2,980	3,580
51,600	**4,300**	1,900	1,600	3,050	3,660
52,800	**4,400**	1,980	1,650	3,130	3,760
54,000	**4,500**	2,000	1,650	3,150	3,780
55,200	**4,600**	2,020	1,700	3,220	3,860
56,400	**4,700**	2,090	1,700	3,290	3,950
57,600	**4,800**	2,100	1,700	3,300	3,960
58,800	**4,900**	2,180	1,700	3,380	4,050
60,000	**5,000**	2,200	1,750	3,400	4,080
61,200	**5,100**	2,220	1,750	3,420	4,100
62,400	**5,200**	2,230	1,750	3,430	4,120
63,600	**5,300**	2,250	1,750	3,450	4,140
64,800	**5,400**	2,260	1,800	3,460	4,150
66,000	**5,500**	2,270	1,800	3,470	4,160
67,200	**5,600**	2,320	1,800	3,520	4,220
68,400	**5,700**	2,360	1,800	3,560	4,270
69,600	**5,800**	2,390	1,800	3,590	4,310
70,800	**5,900**	2,430	1,800	3,630	4,350
72,000	**6,000**	2,460	1,800	3,660	4,390
74,400	**6,200**	2,520	1,800	3,720	4,460
76,800	**6,400**	2,600	1,800	3,800	4,560
79,200	**6,600**	2,690	1,800	3,890	4,670
81,600	**6,800**	2,770	1,800	3,970	4,760
84,000	**7,000**	2,860	1,800	4,060	4,870
86,400	**7,200**	2,980	1,800	4,180	5,010
88,800	**7,400**	3,090	1,800	4,290	5,150
91,200	**7,600**	3,210	1,800	4,410	5,290
93,600	**7,800**	3,320	1,800	4,520	5,420
96,000	**8,000**	3,400	1,800	4,600	5,520
98,400	**8,200**	3,470	1,800	4,670	5,600
100,800	**8,400**	3,520	1,800	4,720	5,660
103,200	**8,600**	3,570	1,800	4,770	5,720
105,600	**8,800**	3,620	1,800	4,820	5,780
108,000	**9,000**	3,660	1,800	4,860	5,830
110,400	**9,200**	3,680	1,800	4,880	5,860
112,800	**9,400**	3,750	1,800	4,950	5,940
115,200	**9,600**	3,810	1,800	5,010	6,012
117,600	**9,800**	3,880	1,800	5,080	6,090
120,000	**10,000**	3,950	1,800	5,150	6,180
122,400	**10,200**	4,000	1,800	5,200	6,240
124,800	**10,400**	4,090	1,800	5,290	6,350
127,200	**10,600**	4,180	1,800	5,380	6,460
129,600	**10,800**	4,270	1,800	5,470	6,560
132,000	**11,000**	4,360	1,800	5,560	6,670
134,400	**11,200**	4,400	1,800	5,600	6,720
136,800	**11,400**	4,450	1,800	5,650	6,780
139,200	**11,600**	4,540	1,800	5,740	6,870
141,600	**11,800**	4,620	1,800	5,820	6,980
144,000	**12,000**	4,710	1,800	5,910	7,090

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MAXIMUM ISSUE LIMITS BY INCOME

Annual Income	Monthly Income	Monthly Benefit				Annual Income	Monthly Income	Monthly Benefit			
		Base Policy Max	SDIR Max	Total Max	Total Max with Group LTD			Base Policy Max	SDIR Max	Total Max	Total Max with Group LTD
146,400	**12,200**	4,800	1,800	6,000	7,200	165,600	**13,800**	5,700	1,800	6,900	8,280
148,800	**12,400**	5,000	1,800	6,200	7,440	168,000	**14,000**	5,800	1,800	7,000	8,400
151,200	**12,600**	5,100	1,800	6,300	7,560	180,000	**15,000**	6,075	1,800	7,275	8,730
153,600	**12,800**	5,200	1,800	6,400	7,680	192,000	**16,000**	6,480	1,800	7,680	9,000
156,000	**13,000**	5,300	1,800	6,500	7,800	204,000	**17,000**	6,875	1,800	8,075	9,000
158,400	**13,200**	5,400	1,800	6,600	7,920	216,000	**18,000**	7,080	1,800	8,280	9,000
160,800	**13,400**	5,500	1,800	6,700	8,040	228,000	**19,000**	7,450	1,800	8,650	9,000
163,200	**13,600**	5,600	1,800	6,800	8,160	240,000	**20,000**	7,800	1,800	9,000	9,000

Medical Underwriting Guidelines

NON-MEDICAL LIMITS AND EXAM REQUIREMENTS

Upon completion of the application for the proposed insured, arrangements should be scheduled to fulfill underwriting requirements indicated on the following chart. When using the chart, please note the following:

Age

- All age calculations should use the age nearest birthday.

Amount of Coverage

- To calculate the amount of coverage used in determining underwriting requirements, add up the total amount of coverage applied for on this application plus other disability income and business overhead insurance in force with Assurity.
- Telephone Inspection Reports are ordered by the underwriting department for all applications with total monthly benefits exceeding $2,000. However, at the underwriter's discretion, an inspection may be ordered on any amount, if necessary. Please inform every applicant that he/she may receive a phone call regarding an interview.

Exam

- In the chart below, "Exam" means paramedical exams for most applicants. Applicants with a history of rheumatic fever, heart murmurs or other extensive medical conditions should be examined by a physician. If there is any question about an applicant's examination, contact the underwriting department.
- If a TeleApp is completed, or if all questions on the application are completed, Assurity can waive the paramedical exam and use an abbreviated exam in which the paramed records height, weight, blood pressure and pulse.

Urinalysis (UA)

- If required, included in paramedical exam.

Blood Requirements (BLD)

- A fasting full blood draw is required; a dried blood spot (DBS) is not acceptable.

Medical Underwriting Guidelines *(continued)*

Electrocardiogram (EKG)

- If required, included in paramedical exam.

NOTE: These limits are subject to change at any time. Assurity reserves the right to require a medical exam and/or other medical requirements on any applicant.

Exam Limits Chart

Age	Amount of Coverage	Exam	UA	BLD	EKG
18 - 40	$500 through $2,500 $2,501 and over	No Yes	No Yes	No Yes	No No
41 - 50	$500 through $1,500 $1,501 and over	No Yes	No Yes	No Yes	No No
51 - 55	$500 through $1,000 $1,001 through $5,000 $5,001 and over	No Yes Yes	No Yes Yes	No Yes Yes	No No Yes
56 - 60	$500 through $5,000 $5,001 and over	Yes Yes	Yes Yes	Yes Yes	No Yes

AUTHORIZED PARAMEDICAL FIRMS

Our authorized paramedical firms have the examination forms, containers and blood draw kits in stock.

For significant medical health histories or if the applicant has previously been declined, contact the new business contact center at (800) 869-0355, Ext. 4264, prior to scheduling an examination.

Paramedical firms authorized by Assurity are as follows:

- American Paraprofessional Systems, Inc. (APPS) (800) 635-1677
- Examination Management Services (EMSI) (800) 872-3674
- Quest Diagnostics - ExamOne (800) 873-8845
- Hooper Holmes Portamedic National Service Center (800) 765-1010

Medical Underwriting Guidelines *(continued)*

HEIGHT AND WEIGHT LIMITS FOR MALES

Height	*Underweight Table Rating A*	*Average Weight*	*Overweight Table Rating*			
			A	B	C	D
5' 0"	90	129	175	187	199	209
5' 1"	93	133	181	193	205	215
5' 2"	97	138	188	200	213	224
5' 3"	100	143	194	207	220	232
5' 4"	103	147	200	213	226	238
5' 5"	106	151	205	219	233	245
5' 6"	109	156	212	226	240	253
5' 7"	112	160	218	232	246	259
5' 8"	116	165	224	239	254	267
5' 9"	119	170	231	247	262	275
5' 10"	122	174	237	252	268	282
5' 11"	125	179	243	260	276	290
6' 0"	129	184	250	267	283	298
6' 1"	133	190	258	276	293	308
6' 2"	137	195	265	283	300	316
6' 3"	141	201	273	291	310	326
6' 4"	144	206	280	299	317	334
6' 5"	148	211	287	306	325	342
6' 6"	152	217	295	315	334	352
6' 7"	156	223	303	323	343	361
6' 8"	160	228	310	331	351	369

Cases exceeding rating of Table D are rarely considered. Please consult with an underwriter.

Medical Underwriting Guidelines *(continued)*

HEIGHT AND WEIGHT LIMITS FOR FEMALES

Height	*Underweight Table Rating A*	*Average Weight*	*Overweight Table Rating*			
			A	B	C	D
4' 8"	75	107	156	167	177	185
4' 9"	77	110	161	172	182	190
4' 10"	79	113	165	176	186	195
4' 11"	81	115	168	179	190	199
5' 0"	83	118	172	184	195	204
5' 1"	85	121	177	189	200	209
5' 2"	87	124	181	193	205	215
5' 3"	90	128	187	200	211	221
5' 4"	92	131	191	204	216	227
5' 5"	94	134	196	209	221	232
5' 6"	96	137	200	214	226	237
5' 7"	99	141	206	220	233	244
5' 8"	102	145	212	226	239	251
5' 9"	105	150	219	234	248	260
5' 10"	107	153	223	239	252	265
5' 11"	111	159	232	248	262	275
6' 0"	115	164	239	256	271	284
6' 1"	118	168	245	262	277	291
6' 2"	120	172	251	268	284	298
6' 3"	123	176	257	275	290	304
6' 4"	127	181	264	282	299	313

Cases exceeding rating of Table D are rarely considered. Please consult with an underwriter.

ADDITIONAL UNDERWRITING INFORMATION TO EXPEDITE PROCESSING

Underwriting action often depends on answers to a number of basic questions specific to the condition or situation. In addition to information provided in the application, the underwriting process can be expedited by providing such additional underwriting information as outlined below. On a separate sheet of paper attached to the application, provide the information as specified for conditions or situations listed under conditions 1 through 13 in the following section. For any condition or situations not listed, please provide information according to No. 14.

Medical Underwriting Guidelines *(continued)*

1. **Arthritis**
   - Applicant's name
   - Type of arthritis
   - Joints and areas involved
   - Currently prescribed medications and treatment
   - Name, address and phone number of all physicians and medical facilities

2. **Asthma, emphysema or bronchitis**
   - Applicant's name
   - Number of attacks in the past 12 months
   - Date of last attack
   - Hospitalizations due to respiratory condition
   - Date of last hospitalization (if any)
   - Currently prescribed medications and treatment
   - Name, address and phone number of all physicians and medical facilities

3. **Back or neck pain or problems**
   - Applicant's name
   - Diagnosis (sprain, strain, herniated disc, etc.)
   - Area of the back or neck affected
   - Date of last symptom
   - Currently prescribed medications and treatment
   - Date of last treatment
   - Name, address and phone number of physician and medical facilities

4. **Diabetes or glucose metabolism abnormalities**
   - Applicant's name
   - Diagnosis
   - Date of onset or diagnosis
   - Currently prescribed medications and treatment
   - Date(s) of any hospitalizations
   - Related conditions – eye disorders, kidney disorders, heart disorders, recurrent infections, circulatory problems, amputations, skin ulcers
   - Other conditions/symptoms due to diabetes
   - Name, address and phone number of physician and medical facilities

5. **Epilepsy or seizure**
   - Applicant's name
   - Type of epilepsy or seizure
   - Date of onset or diagnosis
   - Date of last seizure
   - Currently prescribed medications or treatment
   - Name, address and phone number of all physicians and medical facilities

6. **Heart attack, angina or coronary artery disease**
   - Date of onset or diagnosis
   - Diagnosis
   - Date of last symptoms
   - Tests completed or prescribed
   - Currently prescribed medications and treatment
   - Name, address and phone numbers of all physicians and medical facilities

Medical Underwriting Guidelines *(continued)*

7. **Heart murmur**
   - Applicant's name
   - Date of onset or diagnosis
   - Type of murmur
   - Restrictions to activities
   - Currently prescribed medications and treatments
   - Name, address and phone number of physician and medical facilities

8. **High blood pressure**
   - Applicant's name
   - Date of onset or diagnosis
   - Currently prescribed medications or treatment
   - Name, address and phone number of physicians and medical facilities

9. **Kidney or urinary tract disease or disorder**
   - Applicant's name
   - Disease or disorder
   - Currently prescribed medications and treatments
   - Tests completed
   - Name, address and phone number of physician and medical facilities

10. **Stomach and/or digestive tract disorders**
    - Applicant's name
    - Diagnosis
    - Date of onset
    - Date of last symptoms
    - Currently prescribed medications and treatment
    - Name, address and phone number of physicians and medical facilities

11. **Tumor, polyp or cyst**
    - Applicant's name
    - Diagnosis
    - Location of growth
    - Date of removal
    - Currently prescribed medications and treatment
    - Follow-ups planned
    - Name, address and phone number of physician and medical facilities

12. **Driving under the Influence (DUI)**
    - Applicant's name
    - Date of offense
    - Number of DUI offenses
    - License currently suspended
    - Current employment

13. **Drug or alcohol abuse**
    - Applicant's name
    - Types of drugs or alcohol used
    - Dates of last drug or alcohol use
    - Treatment dates
    - Current affiliation in support group - Alcoholics Anonymous (AA), Narcotics Anonymous (NA)

Medical Underwriting Guidelines *(continued)*

14. **All other medical conditions**
    - Applicant's name
    - Diagnosis
    - Date of onset or diagnosis
    - Residual or ongoing symptoms
    - Date of last symptoms
    - Tests completed or prescribed
    - Currently prescribed medications or treatment
    - Names, addresses and phone numbers of all physicians and medical facilities

Administrative Guidelines

COVERAGE INFORMATION

Duplicate Policies

A duplicate policy is available upon receipt of the owner's signed request. A $20 fee may apply for subsequent requests.

COVERAGE CHANGES

Increasing or Changing Coverage

The following coverage changes require a new application:

- increasing the policy monthly benefit,
- increasing the SDIR monthly benefit,
- increasing the benefit period, or
- decreasing the elimination period.

There are two methods for increasing the monthly benefit for an in-force disability income policy:

1. Complete an application for the amount of the increase in monthly benefits desired, and make arrangements for any necessary medical requirements. When the application is approved, the new policy will be issued for the amount of increase approved. The insured will then have two disability income policies in force with Assurity.

OR

2. Complete an application for the total amount of monthly benefit desired, including the increase. Indicate on the application that the new policy will replace an in-force policy. Return the in-force policy to Assurity with the application, and make arrangements for any necessary medical requirements.

   When the application is approved, the new policy will be issued for the total amount of monthly benefit approved as of the current date. The in-force policy will be terminated. The incontestable period for the new policy will be two years from this issue date. Commissions will be adjusted according to our normal replacement rules.

   NOTE: Replacement forms are required in some states. (See General Underwriting Guidelines section.)

Administrative Guidelines *(continued)*

Decreasing Coverage

The following coverage changes require a written request to Assurity:

- decreasing the policy monthly benefit,
- decreasing the SDIR monthly benefit, or
- increasing the elimination period.

The written request must be signed and dated, and indicate the change desired. When the request is approved, an endorsement detailing the changes will be sent to the policyowner to be filed with the policy.

Change of Beneficiary

The beneficiary of an in-force policy may be changed while the insured is alive by completing and returning a Change of Beneficiary form, which is available on AssureLINK under Forms/Supplies, or by contacting the client services department at (800) 869-0355, Ext.4279. Return of the policy is not required.

Assignments

The policyowner may transfer, or assign, some or all of the policy rights to another person or organization by completing and returning a Collateral Assignment for Life Insurance form, which is available on AssureLINK under Forms/Supplies, or by contacting the client services department at (800) 869-0355, Ext. 4279. The form is returned to the assignee and a copy retained by Assurity.

REINSTATEMENT OF A LAPSED POLICY

If the policy lapses due to nonpayment of renewal premium, the insured may apply for reinstatement up to one year from the date of lapse. The following must be provided to Assurity's administrative office:

- a completed reinstatement application form, which is available on AssureLINK under Forms/Supplies, or by contacting the client services department at (800) 869-0355, Ext. 4279, and
- a signed medical authorization.

If the application for reinstatement is approved pending payment of required premium, Assurity will notify the insured of the premium needed to reinstate the policy. Once payment is received, the policy will be reinstated on the reinstatement date – the date Assurity has both approved the application and received the premium due. Additional reinstatement procedures will be determined by the policy language approved in each specific state.

Claims Guidelines

CLAIMS CONTACT CENTER

The claims contact center is available to handle telephone calls from policyholders including verifying coverage and answering policy or rider benefit questions. They can be reached from 7:00 a.m. to 5:00 p.m. Central Time by calling toll-free (800) 869-0355, Ext. 4484.

FILING A CLAIM

Notice of Claim

Notice of claim must be provided to Assurity within 20 calendar days after the loss starts. If notice is not given within that time, it must be given as soon as reasonably possible.

Claims Guidelines *(continued)*

Notice, including the insured's name and policy number, should be sent to Assurity by one of the following:

- e-mail to claimsinfo@assurity.com
- fax to (800) 869-0368
- mail to: Assurity Life Insurance Company
  P.O. Box 82533
  Lincoln, NE 68501-2533

Filing a Claim

When Assurity receives notice of a claim, the necessary proof of loss forms will be sent to the insured including the following:

- Claimant's Statement - Form No. 01-012-02255
- Employer's Statement - Form No. 01-013-02255
- Attending Physician's Statement - Form No. 01-014-02255

Forms must be returned to Assurity within 120 calendar days after loss. If not possible, the claim will not be reduced or denied for this reason if the proof is filed as soon as reasonably possible. In any event, the proof required must be given no later than one year from the time of loss unless the insured is legally incapacitated.

Claim forms may be returned to Assurity by the methods described above. If forms are e-mailed or faxed, please do not mail the original.

State Specific Information

As approved, some state insurance departments may require modifications to policy application, contract language, benefits, rates and other features. Please refer to the individual contracts specific to each state as the ultimate authority. **The following chart represents *some* of those key differences**:

Arkansas	▪ Organ Donor Benefit is not included.
Colorado	▪ Policies' pre-existing condition limitation applies to conditions one year prior to the issue date.
Delaware	▪ Organ Donor Benefit is not included.
Georgia	▪ Critical Illness Benefit Rider is not available. ▪ Survivor Benefit pays three times monthly benefit instead of six times.
Iowa	▪ Organ Donor Benefit is not included. ▪ For 1-year benefit period, only 30-day, 60-day and 90-day elimination periods allowed. ▪ For 2-year benefit period, only 30-day, 60-day, 90-day and 180-day elimination periods allowed.
Idaho	▪ Organ Donor Benefit is not included. ▪ Policies' pre-existing condition limitation applies to conditions six months prior to the issue date and for one year after issue date.
Louisiana	▪ "Any gainful occupation" is not defined by replacing 60% of prior monthly income.

Maine	▪ Organ Donor Benefit is not included.
Mississippi	▪ Policies' pre-existing condition limitation applies to conditions one year prior to the issue date and for one year after the issue date.
North Carolina	▪ Organ Donor Benefit is not included.
New Mexico	▪ Policies' pre-existing condition limitation applies to conditions six months prior to the issue date and for six months after issue date.
Nevada	▪ Policies' pre-existing condition limitation applies to conditions six months prior to the issue date.
Ohio	▪ Multi-life discount is not available.
Oklahoma	▪ Organ Donor Benefit is not included.
Pennsylvania	▪ Critical Illness Benefit Rider is not available. ▪ Multi-life discount is not available.
South Dakota	▪ Organ Donor Benefit is not included. ▪ Policies' pre-existing condition limitation applies to conditions one year prior to the issue date and for one year after issue date.
Tennessee	▪ Catastrophic Disability Benefit Rider not available.
Texas	▪ Organ Donor Benefit is not included.
Utah	▪ Organ Donor Benefit is not included. ▪ For 1-year benefit period, only 30-day, 60-day and 90-day elimination periods allowed. ▪ For 2-year benefit period, only 30-day, 60-day, 90-day and 180-day elimination periods allowed.
Washington	▪ Organ Donor Benefit is not included. ▪ Critical Illness Benefit Rider is not available.
West Virginia	▪ Organ Donor Benefit is not included.

About Assurity

Assurity Life Insurance Company's origins are rooted in a 120-year legacy of providing long-term security to policyholders that has earned generations of customers' confidence and trust.

Assurity Life serves customers across the nation, offering disability income, critical illness, accident, long-term care and life insurance, annuities and specialty insurance plans through our representatives and worksite distribution.

With assets exceeding $2 billion, Assurity Life has built a reputation for "best in class" service and sound, conservative business practices with a disciplined approach to financial management. Headquartered in Lincoln, Neb., Assurity Life has earned a high rating from A.M. Best Company, one of the insurance industry's leading independent analysts. For more information about this rating, please visit www.ambest.com or www.assurity.com.

We're proud of our history of integrity, financial accountability…and helping people through difficult times.

Revisions to this Product Guide

Date	Page	Update
7/12/2010	All	New guide for policy form no. I H0920.