

GROUP DISABILITY INSURANCE

HERE'S HOW THE COVERAGE WORKS

BOTH Sickness AND Accidental Injury are COVERED

Becoming totally disabled almost invariably results in a loss of income... sometimes a significant loss. This coverage is designed to pay you consistent, monthly income benefits should you become totally disabled by a covered sickness or accidental injury while you're covered under this policy.*

Eligibility

We encourage you to apply for this valuable coverage if you are a licensed attorney under age 60, residing in the U.S., who is actively practicing or is employed as an attorney at least 30 hours a week. You may apply for a monthly income benefit for \$500 through \$10,000 in \$100 increments up to 70% of your average monthly income.

Waiting Period

Choose a Waiting Period of 60, 90, or 180 days. Your benefits will begin after the chosen number of consecutive days if you become totally disabled.

Partial Disability Benefits INCLUDED

A partial disability benefit is paid to you if you receive total disability benefits but are then able to perform at least one of the substantial and material duties of your regular occupation, either part-time or full-time. You must suffer an income loss of between 20 and 80 percent and be under the regular care of a physician (other than a family member). The partial disability benefit lets you rebuild your income to its pre-disability level as you return to full-time employment.

30-Day Free Look

We want you to be happy with this coverage. If for any reason you are not, simply return your insurance certificate within 30 days of receipt, without a claim, and we'll refund your premium...no questions asked!

Rehabilitation Benefits INCLUDED

As an attorney practicing in the highly respected profession of law, we know you'll want to return to your practice as soon as possible after being disabled. New York Life Insurance's industry-leading Rehabilitation Program makes that happen by emphasizing a disabled person's abilities, not their disabilities. Your Certificate of Insurance will have all the details on this benefit.

Your Coverage Cannot Be Cancelled Individually

Once you have been accepted in the Plan, your coverage cannot be cancelled because of your health or the number of claims you have made. That's peace of mind you can't afford to be without.

Convenient Coverage Effective Date

You'll begin enjoying this coverage on the first day of the month following the date New York Life Insurance Company approves your application and your premium is paid when due. You must be actively working on a full-time basis on the effective date.

Benefit Payment Schedule

Once you start receiving benefits, you will continue to receive your monthly benefits for five full years if your covered total disability prevents you from performing the substantial and material duties of your usual occupation. After five years, if your disability prevents you from performing the duties of any occupation for which you are reasonably suited by virtue of your education, training and experience, you may receive benefits until age 65, provided you remain totally disabled, as defined

(800) 323-4487

Please call us if you have ANY questions.

We're here every business day from 9AM to 5PM Central Time, and we'll be glad to help you any way we can!

in the policy. Total disability due to mental or nervous disorders, alcoholism or drug abuse are limited up to 24 months. Details in the Certificate.

Continuous Benefits at No Cost to You

New York Life Insurance Company will waive any premium due after 6 months of total disability as defined in the policy—as long as you remain totally disabled and are receiving benefits.

Relationship of Benefits to Earnings

If you are entitled to receive “Other Income Benefits” paid by the government or its agencies (including social security), Worker’s Compensation, or any insurance company, organization, or fund, the maximum benefit for which you would be eligible under this policy would be 70% of your Average Monthly Income from salary, wages, fees, or commissions, before taxes. (This formula is known as the “Maximum Amount Allowed.”) Your monthly earnings means the greater of 1) your Average Monthly Income for the immediately preceding tax year, or 2) your average earnings during the three year period immediately preceding disability. If the sum of your monthly benefit under this policy and any “Other Income Benefits” listed above exceeds the “Maximum Amount Allowed,” your monthly benefit will be reduced by a formula fully explained in your Certificate of Insurance. A pro rata refund of any excess premium paid will be given for the amount of coverage that exceeds the reduced amount. If you have ANY questions about how this feature works, please call us and we’ll be glad to help you.

Coverage Continuation

Your coverage will continue as long as your premiums are paid when due, you continue to be actively at work

on a full-time basis, you are under the age of 65, and the master policy (G-30154-0) remains effective or you begin Active Duty in the Armed Forces or request to end the insurance.

Exclusions

The policy does not pay benefits for disability caused or contributed by: injury or sickness that is not treated under the regular care of a physician other than yourself or an immediate family member; pregnancy or childbirth (except Complications of Pregnancy); injury sustained or sickness contracted while on full-time duty in the Armed Forces (other than active duty for training purposes for two months or less)*; intentionally self-inflicted injuries, suicide or attempted suicide, while sane or insane; air travel except as a fare-paying passenger or in a civil aircraft with a current and valid “Standard Federal Aviation Agency Airworthiness Certificate” and piloted by a person with a current and valid pilot’s certificate or transport in an aircraft operated by the Air Mobility Command or similar service; injury or sickness due to war or act of war (whether declared or not); a disability that is due to or related to a condition specifically excluded from your coverage; the commission or attempted commission of a felony by the insured person.

*Any unearned premium for the period for which no coverage has been provided will be refunded on a pro rata basis.

Don’t Keep Your Coverage Waiting

Simply mail your application to us and we’ll contact you about your disability insurance right away.

Attorneys Group Insurance Plans
PO Box 3930
Peoria Heights, IL 61612-3930

Apply in Less Than 5 Minutes

Our simple, one-page application is specifically designed for very busy people. Take a few minutes today and fill out your application.

Simply mail your application to us and we’ll contact you about your disability insurance right away.

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PO Box 3930
Peoria Heights, IL 61612-3930

Any licensed attorney, under age 60, residing in the U.S., who is actively practicing or is employed as an attorney at least 30 hours a week is welcome and encouraged to apply for this coverage.

INCOME PARTNER LONG TERM DISABILITY INCOME INSURANCE

Semi-Annual Premium Rates – *You pay one of these specially negotiated rates just twice a year!*

Age	Waiting Period (Days)	Monthly Benefit Choices								
		\$1,000	\$1,500	\$2,000	\$2,500	\$3,000	\$3,500	\$4,000	\$4,500	\$5,000
Under 40	60	74.68	112.02	149.36	186.70	224.04	261.38	298.72	336.06	373.40
40–44	60	131.14	196.71	262.28	327.85	393.42	458.99	524.56	590.13	655.70
45–49	60	211.46	317.19	422.92	528.65	634.38	740.11	845.84	951.57	1,057.30
50–54	60	296.80	445.20	593.60	742.00	890.40	1,038.80	1,187.20	1,335.60	1,484.00
55–59	60	363.02	544.53	726.04	907.55	1,089.06	1,270.57	1,452.08	1,633.59	1,815.10
60–64	60	368.34	552.51	736.68	920.85	1,105.02	1,289.19	1,473.36	1,657.53	1,841.70

Age	Waiting Period (Days)	Monthly Benefit Choices									
		\$5,500	\$6,000	\$6,500	\$7,000	\$7,500	\$8,000	\$8,500	\$9,000	\$9,500	\$10,000
Under 40	60	410.74	448.08	485.42	522.76	560.10	597.44	634.78	672.12	709.46	746.80
40–44	60	721.27	786.84	852.41	917.98	983.55	1,049.12	1,114.69	1,180.26	1,245.83	1,311.40
45–49	60	1,163.03	1,268.76	1,374.49	1,480.22	1,585.95	1,691.68	1,797.41	1,903.14	2,008.87	2,114.60
50–54	60	1,632.40	1,780.80	1,929.20	2,077.60	2,226.00	2,374.40	2,522.80	2,671.20	2,819.60	2,968.00
55–59	60	1,996.61	2,178.12	2,359.63	2,541.14	2,722.65	2,904.16	3,085.67	3,267.18	3,448.69	3,630.20
60–64	60	At age 60, the monthly benefit will be reduced to \$5,000 and the premium reduced to what is shown in the \$5,000 column. Of course, benefits will not be reduced if you are already receiving them or are in a waiting period.									

Age	Waiting Period (Days)	Monthly Benefit Choices								
		\$1,000	\$1,500	\$2,000	\$2,500	\$3,000	\$3,500	\$4,000	\$4,500	\$5,000
Under 40	90	35.14	52.71	70.28	87.86	105.42	122.99	140.56	158.13	175.70
40–44	90	58.68	88.02	117.36	146.70	176.04	205.38	234.72	264.06	293.40
45–49	90	122.06	183.09	244.12	305.15	366.18	427.21	488.24	549.27	610.30
50–54	90	195.14	292.71	390.28	487.85	585.42	682.99	780.56	878.13	975.70
55–59	90	253.84	380.76	507.68	634.60	761.52	888.44	1,015.36	1,142.28	1,269.20
60–64	90	254.14	381.21	508.28	635.35	762.42	889.49	1,016.56	1,143.63	1,270.70

Age	Waiting Period (Days)	Monthly Benefit Choices									
		\$5,500	\$6,000	\$6,500	\$7,000	\$7,500	\$8,000	\$8,500	\$9,000	\$9,500	\$10,000
Under 40	90	193.27	210.84	228.41	245.98	263.55	281.12	298.69	316.26	333.83	351.40
40–44	90	322.74	352.08	381.42	410.76	440.10	469.44	498.78	528.12	557.46	586.80
45–49	90	671.33	732.36	793.39	854.42	915.45	976.48	1,037.51	1,098.54	1,159.57	1,220.60
50–54	90	1,073.27	1,170.84	1,268.41	1,365.98	1,463.55	1,561.12	1,658.69	1,756.26	1,853.83	1,951.40
55–59	90	1,396.12	1,523.04	1,649.96	1,776.88	1,903.80	2,030.72	2,157.64	2,284.56	2,411.48	2,538.40
60–64	90	At age 60, the monthly benefit will be reduced to \$5,000 and the premium reduced to what is shown in the \$5,000 column. Of course, benefits will not be reduced if you are already receiving them or are in a waiting period.									

Age	Waiting Period (Days)	Monthly Benefit Choices								
		\$1,000	\$1,500	\$2,000	\$2,500	\$3,000	\$3,500	\$4,000	\$4,500	\$5,000
Under 40	180	31.08	46.62	62.16	77.70	93.24	108.78	124.32	139.86	155.40
40–44	180	51.78	77.67	103.56	129.45	155.34	181.23	207.12	233.01	258.90
45–49	180	108.26	162.39	216.52	270.65	324.78	378.91	433.04	487.17	541.30
50–54	180	174.14	261.21	348.28	435.35	522.42	609.49	696.56	783.63	870.70
55–59	180	226.86	340.29	453.72	567.15	680.58	794.01	907.44	1,020.87	1,134.30
60–64	180	237.20	355.80	474.40	593.00	711.60	830.20	948.80	1,067.40	1,186.00

Age	Waiting Period (Days)	Monthly Benefit Choices									
		\$5,500	\$6,000	\$6,500	\$7,000	\$7,500	\$8,000	\$8,500	\$9,000	\$9,500	\$10,000
Under 40	180	170.94	186.48	202.02	217.56	233.10	248.64	264.18	279.72	295.26	310.80
40–44	180	284.79	310.68	336.57	362.46	388.35	414.24	440.13	466.02	491.91	517.80
45–49	180	595.43	649.56	703.69	757.82	811.95	866.08	920.21	974.34	1,028.47	1,082.60
50–54	180	957.77	1,044.84	1,131.91	1,218.98	1,306.05	1,393.12	1,480.19	1,567.26	1,654.33	1,741.40
55–59	180	1,247.73	1,361.16	1,474.59	1,588.02	1,701.45	1,814.88	1,928.31	2,041.74	2,155.17	2,268.60
60–64	180	At age 60, the monthly benefit will be reduced to \$5,000 and the premium reduced to what is shown in the \$5,000 column. Of course, benefits will not be reduced if you are already receiving them or are in a waiting period.									

Current as of 2023

Renewal Only

The premium contributions shown reflect the current rate and benefit structure. Premiums change when you enter a new age bracket. Rates are based on your current age and the monthly benefit and waiting period you select. In order to protect the integrity and Certificate holder value of this plan, premium contributions may be changed by New York Life Insurance on any premium due date and any date on which benefits are changed. Your rate may change only if they are changed for an entire class of insureds. Benefits are subject to change by agreement between New York Life and the Attorneys Group Insurance Trust.

The premium rates of this program are made possible by the careful underwriting of New York Life Insurance Company. All applications are subject to evidence of insurability satisfactory to New York Life Insurance Company. Medical exams may be required depending on your age and the amount for which you are applying. The Company reserves the right to decline coverage for any applicant who does not meet its underwriting requirements, or to exclude coverage for specified impairments or diseases.

HOW MUCH CAN I APPLY FOR?

We've calculated how much you can apply for in this concise, easy-to-read chart.

If Your Earnings Are at Least This Amount...		You May Apply for a Monthly Benefit Up To
Annual	Monthly	
\$17,142.86	\$1,428.57	\$1,000
\$25,714.29	\$2,142.86	\$1,500
\$34,285.71	\$2,857.14	\$2,000
\$42,857.14	\$3,571.43	\$2,500
\$51,428.57	\$4,285.71	\$3,000
\$60,000.00	\$5,000.00	\$3,500
\$68,571.43	\$5,714.29	\$4,000
\$77,142.86	\$6,428.57	\$4,500
\$85,714.29	\$7,142.86	\$5,000
\$94,285.71	\$7,857.14	\$5,500
\$102,857.14	\$8,571.43	\$6,000
\$111,428.57	\$9,285.71	\$6,500
\$120,000.00	\$10,000.00	\$7,000
\$128,571.43	\$10,714.29	\$7,500
\$137,142.86	\$11,428.57	\$8,000
\$145,714.29	\$12,142.86	\$8,500
\$154,285.71	\$12,857.14	\$9,000
\$162,857.14	\$13,571.43	\$9,500
\$171,428.57	\$14,285.71	\$10,000



Proudly Serving the Legal Profession Since 1972

Attorneys Group Insurance Administrators
PO Box 3930
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1200 E. Glen Ave., Peoria Heights, IL 61616
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This information is only a brief description of the principal provisions and features of the Policy. The complete terms and conditions are set forth in the group policy issued by New York Life to the Attorneys Group Insurance Trust. When you become insured, you will be sent a Certificate of Insurance summarizing your benefits under the Policy. Coverage may vary and not be available in all states.

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