

For the Expected AND the Unexpected



Don't Let an Accident or Illness Wipe Out Your Savings and Investments

The American College of Obstetricians and Gynecologists (ACOG) cares for life. That's why we are helping to protect your earnings with a choice of up to \$3,000 in monthly Disability Income Insurance. The ACOG policy is the only group disability income policy sponsored by The College and is offered exclusively to members.

Eligibility

Members in good standing who are residents under the age of 60, not in active military duty for more than 30 days, and are employed full-time at least 26 hours per week are eligible to apply. You must be actively at work on the date insurance is to take effect. If not, insurance will take effect on the day you resume such work.

Income Replacement up to \$3,000 a Month

You deserve the best, that's why with our Disability Income Insurance, you can choose your level of monthly coverage. As a resident you can select benefits from \$1,000 up to \$3,000, at \$100 increments for a limited time period.* The choice is yours as long as the monthly benefit amount you select does not exceed 70% of your pre-disability monthly earnings. Whichever benefit amount you choose, you can receive monthly income replacement benefits if you become totally disabled due to an injury or sickness and cannot work. Maximum issue amounts of coverage are based on your age, earnings, and all other disability insurance you have at the time of application and intend to continue.

Choice of Plan Benefits Duration Periods

While you remain totally disabled from a covered injury or sickness, you have a choice of your maximum benefit period. Your monthly benefits will be payable up to the benefit duration period shown for the plan you select.

If you are under age 65 and your disability is due to a mental, nervous, or emotional disorder, substance abuse, or any combination of these, a lifetime maximum of 24 monthly benefits will be paid. If you are age 65 and over, you will receive a lifetime maximum of 12 monthly benefits.

	Covered Disability Starting	Maximum Benefit Period
PLAN A	Before age 63	To age 65
	Ages 63-64	24 months
	On or after age 65 but before age 70	12 months
PLAN B	Before age 60	60 months
	On or after age 60 but before age 63	To age 65
	On or after age 63	12 months
PLAN C	Before age 60	24 months
	On or after age 60 but before age 63	To age 65
	On or after age 63	12 months

To Help Control Cost

Member credits for the first two years—A member enrolled for the first time will receive a 30% premium credit for the first 12 months and a 20% premium credit for the second 12 months of coverage. Rates and credits are subject to change.

You decide when benefits begin—60, 90, or 180 consecutive days after you become totally disabled. The longer your waiting period, the more economical your premiums will be.

Plan C is only available with a 60-day waiting period.

Residual Disability

You may be eligible for a residual disability benefit due to a covered injury or sickness, if the disability causes a loss of earnings of at least 20% (and less than 80%) and the disability continues while you are working to your maximum capacity and performing at least one, but not all of the material and substantial duties of your occupation, or the disability continues while you are able to perform such duties, but not on a full-time basis, or the disability continues while you are performing any occupation for which you are suited by education, training, or experience and under the regular care of a physician. The disability must continue throughout and beyond the elimination period or follow a period of total disability for which benefits were payable. Your monthly benefit will be the total disability benefit multiplied by your loss of earnings ratio, not to exceed 80% of your prior earnings. If more than 80% of your prior earnings are lost due to a covered disability, you will be considered totally disabled.

^{*}The Resident Coverage will remain in effect for four years or through completion of your residency, whichever occurs first. Your coverage will convert to the Standard Coverage if you are engaged in full-time practice.

The maximum benefit period for residual disability is the earliest of: (1) the end of the maximum benefit period for total disability, (2) the date you earn over 80% of your pre-disability monthly earnings, or (3) the date you return to work other than your regular occupation.

Valuable Coverage Options

ACOG's Group Disability Income Insurance plan offers you three distinctive coverage options, allowing you to design the plan that best fits your own needs.

Continuing Care Provision—To be eligible for this benefit, you must apply for a monthly benefit of \$1,500 or more, payable to age 65 (Plan A). This benefit provides you an opportunity to exchange your monthly disability benefits for a lump sum benefit. You can exercise this exchange option if you are between the ages of 60 to 69. Benefits are payable if you are unable to perform two or more activities of daily living without assistance, or you are cognitively impaired and receiving medical care as a result of a covered injury or sickness. You will have the option to convert your benefit to lump sum coverage by contacting the administrator and by continuing to pay the premium you would have been paying for the age group for \$1,500 of Long Term Disability Monthly benefit. If conversion occurs before age 65, the benefit will be \$30,000. If conversion occurs at age 65 or before age 70, the benefit will be \$20,000. The premium due will remain level for the entire period of coverage through age 79.

Catastrophic Disability Benefit Option—Provides you with a cost-effective option to purchase additional disability coverage if you suffer a covered injury or sickness resulting in a catastrophic disability.

This optional coverage can help you protect up to 100% of your pre-disability income based on the coverage level you select if you are disabled and you are either continuously unable to perform two or more activities of daily living without stand-by help, you have a cognitive impairment, or you have a terminal illness, all certified by a doctor. (This option is not available for Plan C.)

Cost-of-Living Increase Adjustment Option—If you are under age 50, you can purchase an optional cost-of-living adjustment benefit to help protect your income from inflation. This optional coverage can increase your monthly income benefits with an inflation adjustment after you have suffered a qualified disability. The inflation adjustment is based on changes in the Consumer Price Index (CPI-W), with a minimum of 0% and a maximum of 6% increase per year. The cost-of-living adjustment can increase the amount of your monthly

income benefits due after each one-year anniversary you are disabled until the age of 60. Your monthly benefit amount for the increases in the cost-of-living will be adjusted if you are totally or residually disabled for 12 consecutive months and you are receiving benefits.

Benefits Paid Directly to You

Your monthly disability check is sent directly to you. Use the money in any way you see fit—to pay the mortgage, cover the car payment, buy groceries, etc. It may even be needed to help with extra medical bills or rehabilitation expenses.

Disability From Injury or Sickness Is Covered

This plan pays benefits regardless of whether your total disability is caused from a covered accidental injury or a sickness. The latter could include inability to work because of a heart condition, back problems, cancer, paralysis, complications of pregnancy, and much more.

Rate Conditions

Rates change only as you enter a new five-year age bracket or if rates are adjusted for the entire group. You'll never be charged more because of changes in your health, and your coverage cannot be canceled because of medical conditions you develop or the number of claims you file.

Benefits Paid to Your Survivors

An amount equal to three times the last monthly benefit paid to you or to the maximum benefit period will be paid to your eligible survivor if you die while receiving benefits for 180 or more consecutive days. That's as much as \$9,000 extra to help those you leave behind.

Premiums Waived

Once you've received monthly benefits for six continuous months, your premiums will be waived completely. Your coverage will continue in full, but you won't be required to pay another penny for as long as your disability benefits continue. When benefits for that disability are no longer payable, you may continue coverage by resuming payment of premium provided you are still eligible for the coverage; and your insurance would not then be ending under any termination provision.

Disability Defined for Your Occupation

Benefits will be paid directly to you starting on the first day after the waiting period you select. You are considered to be

totally disabled if: a disability due to injury or sickness wholly and continuously prevents you from performing the material and substantial duties of your occupation and you are not performing any occupation for wage, remuneration, or profit on a full-time or part-time basis and are under a physician's regular care because of it. The physician cannot be yourself or a member of your immediate family.

Pre-existing Conditions

An injury or sickness for which you incurred charges, received medical treatment, consulted a physician, or took prescription drugs within 12 months before the effective date of your insurance is a pre-existing condition. If total disability is due to a pre-existing condition and it begins within 24 months of the date you become insured, no benefits will be paid unless you have not incurred charges, received medical treatment, consulted a physician, or taken prescribed drugs for such condition, or any complication of it, for 12 continuous months, while insured.

Note: Benefits payable as the result of your disability will be reduced by deductible sources of income (outlined in the Certificate of Insurance sent to you once your application is approved) that you receive—or are eligible to receive—to the extent that your disability monthly benefit amount, when added to deductible sources of income, exceeds 70% of your pre-disability monthly earnings. Unless you notify New York Life to the contrary, it will be assumed the maximum family benefit will be paid to you under any act or plan.

When Coverage Ends

You can renew your coverage as long as the group policy does not end; insurance does not end for your class; premiums are paid when due; you are under age 70; you do not cease to be actively at work for reasons other than total disability; you do not enter active militaryduty; you do not reside outside of the United States; or you have not been on foreign travel for longer than three months. Coverage ends June 30th after the fourth year of residency and the residency program is completed, or four years from the effective date of coverage of your resident's plan—whichever occurs first. At that point, you will be provided the option to convert to the Standard Plan if you are engaged in full-time practice.

Duration of Benefits

Monthly benefits will be paid up to the maximum benefit period. The duration of this period is based on your attained age when you become totally disabled. The benefit will end on the date you fail to give required proof of continuing total disability, your total disability ends, the maximum benefit period ends, or you die.

Successive Periods of Disability

Successive periods of disability will be considered one period of disability unless they are due to unrelated causes, or separated by a return to active work for six or more continuous months. A separate waiting period will apply for each separate period of total disability.

Continuation During Temporary Layoff or Leave of Absence

An insured person may continue coverage if he ceases to be actively at work due to a temporary layoff, a leave of absence, or a leave of absence required by state law or by the Family and Medical Leave Act of 1993 (FMLA).

Benefits, Limitations, and Extensions for Disability

Rehabilitation Services—At New York Life's discretion, we may offer the insured with a rehabilitation program to assist in returning to gainful occupation. Participation in this program is voluntary.

Transplant Benefit—An insured is eligible for the transplant benefit if a disability results from the donation of an organ for an organ transplant procedure while covered under this policy and, as a result, the insured becomes totally or residually disabled. New York Life will consider the person disabled as a result of sickness and waive the waiting period that would apply under the Total Disability Benefit. However, such disability will have a maximum benefit period of 12 months.

This benefit will be payable only once in the insured's lifetime. Benefit payments will be subject to all provisions contained in this policy, except those in conflict with the provision of the Transplant Benefit. Organ Transplant Procedure is defined as the insured donating any of the following for transplantation for the benefit of another person: kidney, liver, lung, skin, or bone marrow.

Human Immunodeficiency Virus Benefit—If the insured tests positive for the Human Immunodeficiency Virus (HIV) and:

- New York Life receives proof of results from such testing, as designated by the Centers for Disease Control and Study, that the person is deemed HIV positive.
- 2. As a result of a regulation, restriction, or modification of policy set by a licensing board, the Center for Disease Control and Study, the Occupational Safety and Health Administration, a hospital, clinic board, an employer, or any

State or Federal Agency, the amount of time the insured can work or the duties of their occupation that can be performed are restricted to the extent that a loss of earnings greater than 80% is incurred.

3. New York Life receives written documentation from a physician, clinic board, hospital, or the person's employer barring them from performing one or more of the material and substantial duties of the insured's occupation.

New York Life will treat such inability as a total disability resulting from sickness and provide a monthly benefit under the terms of the Total Disability Benefit.

New York Life reserves the right to request their own testing as recommended by the Centers for Disease Control and Study.

Extension of Benefits for Disability

If the policy cancels while the insured person is disabled and entitled to benefits, the benefits will continue as long as the person remains disabled by the same disability, but will not continue beyond the date benefits would have ceased had the insurance remained in force.

Exclusions

We want to make this coverage as complete as possible for our members; however there are some exclusions which we think you will find reasonable. The group policy does not cover and benefits will not be paid, for any loss or disability caused by:

- **1. Air Travel**–Unless traveling: (1) solely as a fare paying passenger on a licensed, commercial, regularly scheduled, non-military aircraft; (2) in a civil aircraft having a valid airworthiness certificate and piloted by a person with a valid pilot's certificate; or (3) in a transport type aircraft operated by the Air Mobility Command.
- 2. Crime/Illegal Occupation—An active participation in or incarceration resulting from any of the following in a role other than as a victim: (a) the commission of a felony; (b) an illegal occupation; (c) an insurrection; or (d) a riot.
- **3. Military Service**—Service in the military, naval, or air force of any country, alliance or international organization, or in a civilian unit which serves such force.
- **4. Pregnancy, Childbirth, or A Related Medical Condition**Pregnancy, childbirth, or a related medical condition, except for a complication of pregnancy.
- **5. Self-Inflicted Injury**–Intentional self-inflicted injury or occurs while intentionally injuring oneself, while sane or insane.

6. War Conditions–Engagement in any of the following in a role other than as a victim: (a) in war, (b) an act of war, or (c) an armed conflict which involves the armed forces of one or more countries.

Supported by a Company Known for its Longevity and Financial Strength

New York Life has the highest financial strength ratings currently awarded to an U.S. life insurer from all four of the major credit rating agencies: A.M. Best (A++), Fitch (AAA), Moody's Investors Service (Aaa), Standard & Poor's (AA+).*

Questions About This Coverage?

Call (800) 214-8122

Underwritten by:



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New York Life is licensed/authorized to transact business in all 50 United States, the District of Columbia, Puerto Rico, and Canada. However, not all group plans it underwrites are available in all jurisdictions.

Complete details, including features, eligibility, renewability, limitations, and exclusions are in the Certificate of Insurance. Certain state restrictions apply.

ACOG incurs costs in connection with this sponsored program. To provide and maintain this valuable membership benefit, it is reimbursed for these costs. ACOG also receives a fee for the license of its name and logo used in connection with the policy.

Administered & Brokered by:



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*Independent rating agency commentary as of 10/4/24